			EXTENDED TO AUGUST 16, 2021		
		00	Return of Organization Exempt From	Income Tax	OMB No. 1545-0047
Forn	n 9 3	YU	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (ex		ns) 2010
(Rev	. Janı	uary 2020)	Do not enter social security numbers on this form as it may		LUIJ
		of the Treasury nue Service	► Go to www.irs.gov/Form990 for instructions and the lates	-	Open to Public Inspection
				SEP 30, 2020	•
	heck if		e of organization	D Employer identifi	cation number
D C a	oplicable	e:	e of organization		
	Addre	SS CT.C	DBAL WATER CENTER		
-	_chang Name			84-51449	26
]chang ∣Initial		g business as		
Final Final Final retur			ber and street (or P.O. box if mail is not delivered to street address) Room/suit 50 MOLLY GREENE WAY BLDG 1605	E Telephone numbe (843) 76	
					<u>993,305.</u>
	ated Ameno		or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	
	_return]Applic	NOF	RTH CHARLESTON, SC 29405	H(a) Is this a group re	
	_tion pendir		e and address of principal officer: T. CHRISTOPHER HOLDORF	for subordinates	
			E AS C ABOVE	H(b) Are all subordinates in	
			s: 🗴 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or 52	- '	list. (see instructions)
	Vebsit			H(c) Group exemptio	
				r of formation: 2020	A State of legal domicile: SC
Ра	rt I	Summa			
a			cribe the organization's mission or most significant activities: THE GLOBA		
Activities & Governance		MISSIC	ON IS TO BUILD CAPACITY THROUGH COLLABORA	TION, TRAINI	NG,
rna	2	Check this	box 🕨 🔲 if the organization discontinued its operations or disposed of mor	e than 25% of its net as	sets.
S	3	Number of	voting members of the governing body (Part VI, line 1a)		6
Ğ	4	Number of	independent voting members of the governing body (Part VI, line 1b)		5
80	5	Total numb	er of individuals employed in calendar year 2019 (Part V, line 2a)	5	0
/itie	6	Total numb	er of volunteers (estimate if necessary)	6	5
lĘ.			ated business revenue from Part VIII, column (C), line 12		0.
<			ed business taxable income from Form 990-T, line 39		0.
				Prior Year	Current Year
	8	Contributio	ns and grants (Part VIII, line 1h)		993,305.
Revenue			ervice revenue (Part VIII, line 2g)		0.
še		•	income (Part VIII, column (A), lines 3, 4, and 7d)		0.
۳ ۳			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.
			ue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		993,305.
			similar amounts paid (Part IX, column (A), lines 1-3)		0.
					0.
			her compensation, employee benefits (Part IX, column (A), line 4)		212,938.
Expenses			al fundraising fees (Part IX, column (A), line 11e)		0.
eï					
Ä			•••••••••••••••••••••••••••••••••••••••		479,372.
_			nses (Part IX, column (A), lines 11a-11d, 11f-24e)		692,310.
			nses. Add lines 13-17 (must equal Part IX, column (A), line 25)		
<u> </u>		Revenue le	ss expenses. Subtract line 18 from line 12		300,995.
Net Assets or Fund Balances		T .1.1		Beginning of Current Year	End of Year
sset 3ala	20		s (Part X, line 16)		300,995.
et A Dd E	21		ies (Part X, line 26)		0.
ES	22		or fund balances. Subtract line 21 from line 20		300,995.
	rt II		ure Block		
	-		ry, I declare that I have examined this return, including accompanying schedules and stater		/ knowledge and belief, it is
true,	correc	ct, and compl	ete. Declaration of preparer (other than officer) is based on all information of which prepare	er has any knowledge.	
			have a factly and	Data	
Sigr	۱	, -	ture of officer	Date	
Here	e		CHRISTOPHER HOLDORF, EXECUTIVE DIRECTOR		
		► Type	or print name and title	Data -	
			preparer's name Preparer's signature	Date Check	PTIN
Paid		HARRIS		06/22/21 self-employ	
Prep	arer	Firm's nam		Firm's EIN 🕨	23-1144520
Use	Only	Firm's addr	ess 50 SOUTH 16TH STREET, SUITE 2900		
			PHILADELPHIA, PA 19102	Phone no. 21	5-979-8800
May	the IF	RS discuss	this return with the preparer shown above? (see instructions)		X Yes No

932001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions.											
SEE	SCHEDULE O	FOR	ORGANIZATION	MISSION	STATEMENT	CONTINUATION					

	1 990 (2019) GLOBAL WATER CENTER	84-5144926	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly describe the organization's mission: <u>THE GLOBAL WATER CENTER (GWC) MISSION IS TO BUILD CAPACE</u> COLLABORATION, TRAINING, EQUIPPING, AND SUPPORTING SERVE		
	ERADICATE THE GLOBAL WATER CRISIS WHICH CLAIMS OVER 2,30		ζ
	DAY.		
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	XNo
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	Yes	XNo
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 othe revenue, if any, for each program service reported.		d
4a	(Code:) (Expenses \$494,978. including grants of \$) (Reve	nue \$)
	BUILDING CAPACITY THROUGH COLLABORATION, TRAINING, EQUIP		,
	SUPPORTING SERVICES TO ERADICATE THE GLOBAL WATER CRISIS	WHICH CLAIMS	3
	OVER 2,300 LIVES EVERY DAY.		
4b	(Code:) (Expenses \$ including grants of \$) (Reve	nue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Reve	enue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 494,978.		
		Form 9 9	90 (2019)
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	2		

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Form 990 (2019) GLOBAL WATER CENTER
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	Х	
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		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
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		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			77
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
•	Schedule D, Part III	8		<u> </u>
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?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u></u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
•	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If</i> "Yes." <i>complete Schedule D</i> .			
а		11a		x
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a		- 23
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
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	1.10		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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	000	X
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	t IV Checklist of Required Schedules (continued)		<u>т </u>	
_			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
_	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			x
4-	Schedule J	23		
4a	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	24a		x
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
U	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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
6	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? If "Yes," complete Schedule L, Part II	26		x
7	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		X
8	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, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
4	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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		
6	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		X
7	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		X
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
d	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
		۰ 	Yes	No
		<u> </u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
•		1 4 6	1	1
_	(gambling) winnings to prize winners?	1c	990	L

Form	990 (2019) GLOBAL WATER CENTER 84-5144 t V Statements Regarding Other IRS Filings and Tax Compliance (continued)	926	P	_{age} 5
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		163	
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
5	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to $e-file$ (see instructions)	20		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	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		x
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
		5b		X
	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?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7.		X
	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 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
С	to file Form 8282?	7c		x
d		10		
e	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?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	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	-		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a			
a b	Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 1	-		
5	amounts due or received from them.)			
12a		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		X
10	If "Yes," see instructions and file Form 4720, Schedule N.	40		х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		

Form **990** (2019)

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Form 990 (2019)
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 Form 990 (2019)
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 Part VI
 Governance, Management, and Disclosure
 For each "Yes" response to lines 2 through 7b below, and for a "No" response
 Page

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule	O. See instructions.				
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	. 1a	6			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	. 1b	5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	nip with any other				
	officer, director, trustee, or key employee?			2	Х	
3	Did the organization delegate control over management duties customarily performed by or under t	he direct supervisior	ו ו			
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint one or				
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockholders, or				
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by the following:				
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached at the				
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X

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		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in 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		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright ext{SC}$			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other <i>(explain on Schedule O)</i>			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d financ	cial	
	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	s 🕨 _
	T. CHRISTOPHER HOLDORF - (843) 769-7395	

	115	0 MOLL	LY	GREENE	WAY	BLDG	1605,	NORTH	CHARLEST	'ON, SC	29405	
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								6				
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Form 990 (2019)	GLOBAL WATER CENTER	84-5144926 Page 7									
Part VII Compens	Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated										
Employee	es, and Independent Contractors										
Check if Sch	nedule O contains a response or note to any line in this Part V	II									
Section A. Officers, D	irectors, Trustees, Key Employees, and Highest Compens	ated Employees									
1a Complete this table t	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 organ 	nization's current officers, directors, trustees (whether individ	uals 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.

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	ndàd T	irecto	r/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee	Officer Key employee Highest compensated employee Former			organization	(W-2/1099-MISC)	from the	
	related organizations	ustee	trust		ee	npens		(W-2/1099-MISC)		organization and related
	below	lual tr	tional		nploy	st con yee	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highes	Former			organizations
(1) GEORGE C. GREENE, III	12.00		_							
EXECUTIVE CHAIR		х		x				0.	0.	0.
(2) GEORGE C. GREENE, IV	5.00									
BOARD MEMBER		Х						0.	0.	0.
(3) CHARLES B. YOUNG	4.00									
SECRETARY		Х		Х				0.	0.	0.
(4) BRETT HILDEBRAND	4.00									
TREASURER		Х		Х				0.	0.	0.
(5) STEVE VANDERBOOM	4.00									
BOARD MEMBER		Х						0.	0.	0.
(6) T. CHRISTOPHER HOLDORF	60.00									
EXECUTIVE DIRECTOR				Х				0.	0.	0.
		L								
										000
932007 01-20-20										Form 990 (2019)

_	990 (2019) GLOBAL WA	ATER CEN	ΓĒ	R						84-51	449	26	Pa	ge 8
Par	VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	anc	d Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per	box	not c , unles	Pos heck i ss per	more rson i	than o s both	n an	(D) Reportable compensation	(E) Reportable compensation		(F) Estimated amount of		
		week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer Deficer	(W-2/1099-MIS				from related organizations (W-2/1099-MIS		compe	n the nizatio relate	on ed
											_			
											_			
	Subtotal								0.		0.			0.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c) Total number of individuals (including but n							► ● o re	0.	000 of reportable	0.			0.
	compensation from the organization						,		. ,			Y	′es	0 No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>										[3		x
4	For any individual listed on line 1a, is the su and related organizations greater than \$150),000? If "Yes,	" со	mple	ete S	Sche	edule	e J fe	or such individual			4		X
5 Sec	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," comision B. Independent Contractors											5		Х
1	Complete this table for your five highest con the organization. Report compensation for t										ensatio	on from	I	
	(A) Name and business			ONE					(B) Description of s		Co	(C) mpens	ation	
2	Total number of independent contractors (ii \$100,000 of compensation from the organiz		ot lin	niteo	d to t	thos (ted	above) who received mo	ore than	F	orm 9 9	9 0 (2	019)
											r r	5 .	- 14	513)

932008 01-20-20

Par	τv	/111	Statement of Rev	venue							
			Check if Schedule O c	contains a	a respo	onse or	note to any line	(•)			
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s s	1	а	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts											
M G			Fundraising events								
àifts ar A					1d						
s, G		е	Government grants (contri	ibutions)	1e						
rion Si		f	All other contributions, gifts,	grants, and	b						
ibut			similar amounts not included	above	1f	9	993,305.				
d O		g	Noncash contributions included in I	lines 1a-1f	1g 🕄	\$					
<u>a C</u>		h	Total. Add lines 1a-1f					993,305.			
							Business Code				
e	2	а									
erv		b				— -					
jram Ser <u>Revenue</u>		C									
grar Bev		d				—					
Program Service Revenue		e 4	All other program service			— -					
-		f	Total. Add lines 2a-2f								
-	3	y	Investment income (includ								
	Ŭ		other similar amounts)	-							
	4		Income from investment o								
	5		Royalties		•	•	· · ·				
			,		(i) Rea		(ii) Personal				
	6	а	Gross rents	6a							
		b	Less: rental expenses	6b							
		с	Rental income or (loss)	6c							
		d	Net rental income or (loss))			►				
	7	а	Gross amount from sales of	(i) \$	Securit	ties	(ii) Other				
			assets other than inventory	7a							
		b	Less: cost or other basis								
anu			and sales expenses	7b							
Revenue			. ,	7c							
<u> </u>	_		Net gain or (loss)				>				
Othe	8	а	Gross income from fundraisin								
0			including \$								
			contributions reported on	-		8a					
		h	Part IV, line 18 Less: direct expenses			8b					
			Net income or (loss) from t								
			Gross income from gamin								
			Part IV, line 19	-							
		b	Less: direct expenses			9b					
		с	Net income or (loss) from	gaming a	ctivitie	s	►				
	10	а	Gross sales of inventory, le	ess returr	าร						
			and allowances			10a					
		b	Less: cost of goods sold			10b					
\rightarrow		с	Net income or (loss) from	sales of ir	nvento						
S							Business Code				
eou	11					—					
scellaneo <u>Revenue</u>		b									
Miscellaneous Revenue		c	All - 11								
Ϊ			All other revenue								
	12		Total. Add lines 11a-11d Total revenue. See instruction					993,305.	0.	0.	0.
932009							F	,			Form 990 (2019

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Form 990 (2019)

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2019.06000 GLOBAL WATER CENTER

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	Check if Schedule O contains a response or note to any line in this Part IX									
	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 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									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	87,984.	71,864.	7,301.	8,819.					
6	Compensation not included above to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	110 000	00.000	0 1 4 1	11 040					
7	Other salaries and wages	110,229.	90,033.	9,147.	11,049.					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	1 / 1	115	10	1 /					
9	Other employee benefits	141. 14,584.	115. 11,912.	12. 1,210.	<u> </u>					
10	Payroll taxes	14,384.	11,912.	1,210.	1,402.					
11	Fees for services (nonemployees):									
a L	Management	26,274.		26,274.						
b		20,2/4.		20,274.						
c d	Accounting									
u e	Lobbying Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25,									
9	column (A) amount, list line 11g expenses on Sch O.)	421,447.	289,403.	4,877.	127,167.					
12	Advertising and promotion	,	,							
13	Office expenses	4,755.	4,755.							
14	Information technology	·								
15	Royalties									
16	Occupancy									
17	Travel	15,987.	15,987.							
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									
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а	PRODUCT AND TRANSPORT	10,904.	10,904.							
b	OTHER EXPENSES	5.	5.							
с										
d										
е	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	692,310.	494,978.	48,821.	148,511.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)									

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Form 990 (2019)

GLOBAL WATER CENTER 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).

Form **990** (2019)

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GLOBAL WATER CENTER

		Check if Schedule O contains a response or note to any line in this F	<u>art X</u>	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		0.	1	300,995.
	2	Savings and temporary cash investments			2	, , , , , , , , , , , , , , , , ,
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or former officer, direc			-	
		trustee, key employee, creator or founder, substantial contributor, or				
					5	
	6	Loans and other receivables from other disqualified persons (as defined to the second se				
		under section 4958(f)(1)), and persons described in section 4958(c)(3			6	
s	7	Notes and loans receivable, net	Г		7	
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D 10a				
	b	Less: accumulated depreciation 10b			10c	
	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		15		
	16	Total assets. Add lines 1 through 15 (must equal line 33)		0.	16	300,995.
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule I)		21	
S	22	Loans and other payables to any current or former officer, director,				
Liabilities		trustee, key employee, creator or founder, substantial contributor, or	35%			
iabi		controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related thir	d			
		parties, and other liabilities not included on lines 17-24). Complete P	art X			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
~		Organizations that follow FASB ASC 958, check here \blacktriangleright X				
čě		and complete lines 27, 28, 32, and 33.		<u>^</u>		200 005
Ilan	27	Net assets without donor restrictions		0.	27	300,995.
Fund Balances	28	Net assets with donor restrictions			28	
nnc		Organizations that do not follow FASB ASC 958, check here				
or Fi		and complete lines 29 through 33.				
ts c	29	Capital stock or trust principal, or current funds			29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund	Г		30	
Net Assets	31	Retained earnings, endowment, accumulated income, or other funds		^	31	
Re	32	Total net assets or fund balances	0.	32	300,995.	
	33	Total liabilities and net assets/fund balances		0.	33	300,995.

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Form	990 (2019) GLOBAL WATER CENTER	84-514	4926	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	993	3,30	05.
2	Total expenses (must equal Part IX, column (A), line 25)	2	692	2,32	10.
3	Revenue less expenses. Subtract line 2 from line 1	3	300),99	95.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			0.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	300),99	<u>95.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	-			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			37
	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 on Schedule O and describe any steps taken to undergo such audits		3b	200	L

Form **990** (2019)

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SCHE	DUL	.E A
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Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047
2019
Open to Public

Name of the	organization
-------------	--------------

Nam	ne of t	the organization						Employer identification number		
			AL WATER C						4-5144926	
Pa	rtI	Reason for Public C	Charity Status (All organizations must co	mplete th	is part.) Se	e instructions	3.		
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	neck only	one box.)				
1		A church, convention of chu	urches, or associatio	n of churches described	in sectio	on 170(b)(1	I)(A)(i).			
2		A school described in secti								
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170)(b)(1)(A)(ii	i).			
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:								
5		An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	overnmental u	nit describe	ed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7	X	An organization that normal	lly receives a substa	ntial part of its support fr	om a gove	ernmental u	unit or from th	ne general p	public described in	
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe		(1)(A)(vi). (Complete Par	: II.)					
9		An agricultural research org	anization described	in section 170(b)(1)(A)(x) operate	ed in conju	inction with a	land-grant	college	
		or university or a non-land-g				-		-	-	
		university:		. , ,			-	Ū		
10		An organization that normal	Ilv receives: (1) more	than 33 1/3% of its supr	port from o	contributio	ns. membersl	nip fees. an	d aross receipts from	
		activities related to its exem								
		income and unrelated busin								
		See section 509(a)(2). (Cor				eee acqui				
11		An organization organized a		velv to test for public sat	etv. See	section 50)9(a)(4).			
12	\square	An organization organized a	-	•	•			rry out the	purposes of one or	
		more publicly supported or		•				-		
		lines 12a through 12d that of								
а		Type I. A supporting orga	• •			-		-	aivina	
a	L	the supported organization	-	-	• • • •	-				
					majonty c				ipporting	
L		organization. You must c			ion with it.		d arganizatio	o(o) by boy	ina	
b		Type II. A supporting organization	-				-		-	
		control or management o			ime perso	ns that cor	ntrol or manag	ge the supp	orted	
		organization(s). You mus							-1 24-	
с		J Type III functionally inte		•••				ly integrate	a with,	
		its supported organization		-						
d		Type III non-functionally						-		
		that is not functionally int		• •	•		-	an attentiv	reness	
		requirement (see instructi	,	•						
е		Check this box if the orga					Туре I, Туре	II, Type III		
		functionally integrated, or		nally integrated supporting	ng organiz	ation.			[]	
		er the number of supported o	•							
<u> </u>		vide the following information i) Name of supported	about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the ora	anization listed	(u) Amount of	monoton	(vi) Amount of other	
	(organization	(11) EIN	(described on lines 1-10	in your governi	ing document?	(v) Amount o support (see ir	-	support (see instructions)	
		organization		above (see instructions))	Yes	No	Support (See ii	1311100110113/		
Tota										
LHA	For F	Paperwork Reduction Act N	lotice, see the Instru	uctions for Form 990 or	990-EZ.	932021 09-2	25-19 Sche	dule A (For	m 990 or 990-EZ) 2019	

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Schedule A (Form 990 or 990 EZ) 2019 GLOBAL WATER CENTER

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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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")					993,305.	993,305.
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					000 005	000 005
4	Total. Add lines 1 through 3					993,305.	993,305.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						002 205
	Public support. Subtract line 5 from line 4.						993,305.
		(-) 0015	(1-) 0010	(-) 0017	(4) 0010	(-) 0010	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019 993, 305.	(f) Total 993,305.
	Amounts from line 4 Gross income from interest,					555,505.	555,505.
0							
	dividends, payments received on						
	securities loans, rents, royalties,						
•	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						993,305.
	Total support. Add lines 7 through 10					10	<u> </u>
	Gross receipts from related activities, First five years. If the Form 990 is for	`	/	d fourth or fifth to		12	
13	organization, check this box and stop						X
See	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2019 (I			column (f))		14	%
	Public support percentage from 2018		•			15	%
	33 1/3% support test - 2019. If the o						
	stop here. The organization qualifies	0					
b	33 1/3% support test - 2018. If the o	organization did no	t check a box on				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a	publicly supported	l organization	-	
b	10% -facts-and-circumstances test	- 2018. If the org	anization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is ⁻	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explai	n in Part VI how the	•
	organization meets the "facts-and-circ	cumstances" test.	The organization o	qualifies as a public	cly supported orga	nization	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17l	b, check this box a	and see instructions	
					Sch	edule A (Form 990	or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 GLOBAL WATER CENTER

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disgualified 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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6	(4) 2010	(6)2010	(0) 2011	(4) 2010	(0) 2010	
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 VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thii	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	ation,
check this box and stop here	<u></u>					
Section C. Computation of Publi	c Support Per	centage				
15 Public support percentage for 2019 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2018					16	%
Section D. Computation of Inves	tment Income	e Percentage				
17 Investment income percentage for 2018 Investment income percentage from 3					17 18	<u>%</u>
19a 33 1/3% support tests - 2019. If the						
more than 33 1/3%, check this box ar						
b 33 1/3% support tests - 2018. If the	-	•				and
line 18 is not more than 33 1/3%, che	-					
20 Private foundation. If the organization						
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		15		2011		

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

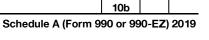
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **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 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.)

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			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	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).	1		
Sec	tion 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?	1		
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			
		2		
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in (2), did the organization's supported organizations have a	-		
U	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			
	· · · · ·	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
' a	The organization satisfied the Activities Test. <i>Complete</i> line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instr	untin no		
2	Activities Test. Answer (a) and (b) below.	uctions)	Yes	No
ے a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
u	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	20		
L	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) 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	0		
~	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	•		
	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	C 1		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	0 ==	00/7
932025	5 09-25-19 Schedule A (Form 9	90 or 99	υ-EZ)	2019

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	(Form 990 or 990-EZ) 2019 GLOBAL WATER CENTER
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.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	emergency temporary reduction (see instructions).	-		nization (see

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

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 GLOBAL WATER CENTER

	rt V Type III Non-Functionally Integrated 509(<u>(continuea)</u>	
ect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	5		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
0	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
ect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
с	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2019

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

PART II, SHORT YEAR EXPLANATION:

THE CURRENT TAX YEAR IS A SHORT YEAR RUNNING FROM MARCH 10, 2020 TO

SEPTEMBER 30, 2020 AS THIS IS THE ORGANIZATION'S INITIAL TAX YEAR.

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(Form	990)
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Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Name	of the	organization

Employer identification number

	GLOBAL WATER CENTE			84-5144926				
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accoun	ts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, li	ne 6.						
	÷	(a) Donor advised funds	(b) Fun	ds 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		ed funds					
•	are the organization's property, subject to the organization's	-		Yes No				
6	Did the organization inform all grantees, donors, and donor							
Ŭ	for charitable purposes and not for the benefit of the donor							
			•	Yes No				
Par								
1	Purpose(s) of conservation easements held by the organizat							
	Preservation of land for public use (for example, recre		a historically	important land area				
	Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure							
•	Preservation of open space	lifical according a solution in the forma						
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form	of a conservat					
	day of the tax year.			Held at the End of the Tax Year				
	Total number of conservation easements							
b								
С	Number of conservation easements on a certified historic st							
d	Number of conservation easements included in (c) acquired							
	listed in the National Register		2d					
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	organization	during the tax				
	year ▶							
4	Number of states where property subject to conservation ea							
5	Does the organization have a written policy regarding the pe							
	violations, and enforcement of the conservation easements							
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cons	ervation ease	ments during the year				
	▶							
7	Amount of expenses incurred in monitoring, inspecting, han	idling of violations, and enforcing conservat	ion easement	s during the year				
	►\$							
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(n)(4)(B)(i)					
	and section 170(h)(4)(B)(ii)?			Yes No				
9	In Part XIII, describe how the organization reports conservat	•						
	balance sheet, and include, if applicable, the text of the foot	tnote to the organization's financial stateme	ents that desc	ribes the				
	organization's accounting for conservation easements.	· · · · · · · · · · · · · · · · · · ·		<u> </u>				
Par			her Similai	r Assets.				
	Complete if the organization answered "Yes" on Forr	n 990, Part IV, line 8.						
1a	If the organization elected, as permitted under FASB ASC 9	58, not to report in its revenue statement a	nd balance sh	leet works				
	of art, historical treasures, or other similar assets held for pu	ublic exhibition, education, or research in fu	rtherance of p	public				
	service, provide in Part XIII the text of the footnote to its fina	ancial statements that describes these item	S.					
b	If the organization elected, as permitted under FASB ASC 9	58, to report in its revenue statement and b	alance sheet	works of				
	art, historical treasures, or other similar assets held for publi	ic exhibition, education, or research in furth	erance of pub	olic service,				
	provide the following amounts relating to these items:							
	(i) Revenue included on Form 990, Part VIII, line 1		► :	\$				
	···· · · · · · · · · · · · · · · · · ·			\$				
2	If the organization received or held works of art, historical tro							
	the following amounts required to be reported under FASB							
а	Revenue included on Form 990, Part VIII, line 1			\$				
	Assets included in Form 990, Part X							
	For Paperwork Reduction Act Notice, see the Instruction			Schedule D (Form 990) 2019				

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Sche	dule D (Form 990) 2019 GLOBAL								84-51	44926	D Pa	age 2
Par	t III Organizations Maintaining C	ollectior	ns of Art,	His	torical Tre	easures, o	or Othe	r Simila	r Assets	s (contin	ued)	
3	Using the organization's acquisition, accession	on, and oth	er records,	, chec	k any of the	following tha	t make s	ignificant	use of its	•	,	
	collection items (check all that apply):											
а	Public exhibition		d] Loan or exc	hange progr	am					
b	Scholarly research		е		Other							
с	Preservation for future generations											
4	Provide a description of the organization's co	ollections a	nd explain	how t	hey further th	ne organizati	on's exer	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive de	onations of	art, h	nistorical trea	sures, or oth	er similar	assets				
	to be sold to raise funds rather than to be ma									Yes		No
Par	t IV Escrow and Custodial Arrang	gements	- Complet	e if th	ne organizatio	on answered	"Yes" on	Form 99	0, Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21										
1a	Is the organization an agent, trustee, custodi	an or other	intermedia	ary for	contribution	s or other as	sets not	included		_		_
	on Form 990, Part X? Yes No											
b	If "Yes," explain the arrangement in Part XIII	and comple	ete the follo	owing	table:							
										Amount		
С	Beginning balance							. <u>1c</u>				
d	Additions during the year							. <u>1d</u>				
е	Distributions during the year							. <u>1e</u>				
f	Ending balance									_		
	Did the organization include an amount on Fo							ity?	L	Yes		No
_	If "Yes," explain the arrangement in Part XIII.											
Par	t V Endowment Funds. Complete i											
		(a) Curre	ent year	(b)	Prior year	(c) Two yea	ars back	(d) Three	years back	(e) Four	years	back
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, and losses											
	Grants or scholarships											
е	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr		nd balance		lg, column (a)) held as:						
a	Board designated or quasi-endowment			_%								
	Permanent endowment											
с		%										
	The percentages on lines 2a, 2b, and 2c show											
3a	Are there endowment funds not in the posse	ssion of the	e organizati	ion th	at are held a	nd administe	red for th	ie organiz	ation	Г	~	
	by:										Yes	No
	(i) Unrelated organizations									3a(i)		
L	(ii) Related organizations									3a(ii)		
-	If "Yes" on line 3a(ii), are the related organiza									3b		
4 Par	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipm		on s endow	ment	lunas.							
	Complete if the organization answered		Form 000	Dort I	IV lino 110 S	Soo Earm 000	Dort V	lino 10				
	· · · · · · · · · · · · · · · · · · ·						1		ad			
	Description of property		Cost or oth is (investme			t or other (other)	1	ccumulat		(d) Bool	(valu	е
4-	Land		is (investing	5111	54315			PICOIALIOI				
-	Land											
b	Buildings											
	Leasehold improvements											
	Equipment											
	Other			, .		2	I					0.
iotal	. Add lines 1a through 1e. (Column (d) must e	qual Form	990, Part X	. colu	<u>mn (B), line 1</u>	UC.)				D (5	000	
									Schedule	D (Form	1 990)	2019

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. (Col. (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. (Col. (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	(Column (b) must equal Form 990. Part X. col. (B) line 15.) 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)		
(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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

932053 10-02-19

(9)

X

Sche	edule D (Form 990) 2019 GLOBAL WATER CENTER		84-51	84-5144926 Page 4	
Pa	rt XI Reconciliation of Revenue per Audited Financial Stat	ements With Reven			
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.			
1	1 Total revenue, gains, and other support per audited financial statements		1	993,305.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d					
е	e Add lines 2a through 2d		2e	0.	
3	Subtract line 2e from line 1			993,305.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b		4c	0.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			993,305.	
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Exper	ises per Return.		
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.			
1	Total expenses and losses per audited financial statements		1	692,310.	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e	0.	
3	Subtract line 2e from line 1			692,310.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b		4c	0.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3.)		692,310.	
Pa	rt 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.

PART X, LINE 2:

MANAGEMENT HAS REVIEWED THE TAX POSITIONS EXPECTED TO BE TAKEN IN THE GWC

2020 TAX RETURN AND HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN

TAX POSITIONS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 9 Open to Public Inspection Employer identification number

GLOBAL WATER CENTER

84-5144926

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EQUIPPING, AND SUPPORTING SERVICES TO ERADICATE THE GLOBAL WATER CRISIS

WHICH CLAIMS OVER 2,300 LIVES EVERY DAY.

FORM 990, PART VI, SECTION A, LINE 2:

GEORGE C. GREENE III, EXECUTIVE CHAIRMAN AND GEORGE C. GREENE IV, BOARD

MEMBER - FAMILY RELATIONSHIP.

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

THE FORM 990 IS PREPARED BY AN INDEPENDENT CPA FIRM AND REVIEWED IN DETAIL

BY THE TOP FINANCIAL OFFICIALS AND TOP MANAGEMENT OFFICIALS OF THE

ORGANIZATION. THE REVIEWED FORM 990 IS THEN FORWARDED TO THE ORGANIZATION'S

AUDIT COMMITTEE AND FORWARDED TO ALL BOARD MEMBERS PRIOR TO FILING.

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

THE ORGANIZATION PROVIDES GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

AND FINANCIAL STATEMENTS TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING:

PROGRAM SERVICE EXPENSES

MANAGEMENT AND GENERAL EXPENSES

FUNDRAISING EXPENSES

TOTAL EXPENSES

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 421,447.

25

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932211 09-06-19

Schedule O (Form 990 or 990-EZ) (2019)

289,403.

127,167.

421,447.

4,877.