Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 20**18**

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

For the 2018 calendar year, or tax year beginning 2018, and ending 20 Α D Employer identification number C Name of organization Water Engineers for the Americas Check if applicable: 85-0482431 Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 100 (505)299 - 09422904 Rodeo Park Drive East Initial return City or town, state or province, country, and ZiP or foreign postal code Final return/terminated Santa Fe, NM 87505-6316 G Gross receipts \$ 295,727. Amended return H(a) Is this a group return for subordinates? Yes No Application pending F Name and address of principal officer: Peter G Fant, 2904 Rodeo Park Drive East #100, Santa Fe, NM 87505 H(b) Are all subordinates included? Tyes No) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 If "No," attach a list. (see instructions) 501(c) (Tax-exempt status Website: ▶ www.WEFTA.net H(c) Group exemption number ▶ Form of organization: X Corporation Trust Other ▶ 2002 M State of legal domicile: NM Part I Summary Briefly describe the organization's mission or most significant activities: Water and Sanitation projects in poor communities Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 7 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 0 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 6 22 7a Total unrelated business revenue from Part VIII, column (C), line 12 7b 0._ Net unrelated business taxable income from Form 990-T, line 38 Current Year Prior Year Contributions and grants (Part VIII, line 1h) . . . ! 246,927. 295,696. Revenue 9 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 31 10 46 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) <u>246,973</u>. 295,727. 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 Benefits paid to or for members (Part IX, column (A), line 4) 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Professional fundraising fees (Part IX, column (A), line 11e) . . . 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 142,596. 284,988. 17 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 284,988. 142,596. Revenue less expenses. Subtract line 18 from line 12 . . . 19 104,377. 10,739. **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 365,051 375,790. 21 Total liabilities (Part X, line 26) . . . 22 Net assets or fund balances. Subtract line 21 from line 20 365,051. 375,790. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sian Here Peter G Fant, President Type or print name and title Print/Type preparer's name Preparer's signature Check if Paid self-employed P00150697 Vivian Spinn 05/14/2019 Preparer Firm's EIN ► 46-0909703 Firm's name Vivian MG Spinn CPA LLC Use Only Phone no. (505) 343 - 9924 Firm's address ▶ 5024 4th St NW Ste B, Albuquerque, NM 87107 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

orm 99	0 (2018) Page 2
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Water and Sanitation projects in poor communities
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 274,890. including grants of \$ 0.) (Revenue \$ 0.)
	Technical, administrative, and funding support for construction of
	water and sanitation systems in Honduras, Bolivia, Mexico, Peru,
	Puerto Rico, and Panama.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	(0000, (2.,p.s
4d	Other program services (Describe in Schedule O.)
10	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 274,890.

Part	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	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	×	
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		×
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		×
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		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
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.		**	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11 <u>a</u>		×
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		×
С	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		×
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	×	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
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	×	
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		×
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		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
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		×
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		×
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
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? Ite Was in special section of the section	21		×

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
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		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
ď	to defease any tax-exempt bonds?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	244		
25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
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		×
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
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		×
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		×
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		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
34	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		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
38	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	×	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			4, 50
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	10	×	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	Enter the number of employees reported on Form W.S. Transmittel of Wage and Tay		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 0			
	Statements, med for the cateridal year chang with or warm the year covered by the retain	2b		أبسيدن
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	E8	
30	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	J	×
3a b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
4a	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
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).	ş *		***
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		×
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		-v.	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		×
h	and services provided to the payor?	7b		<u> </u>
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		
С	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	Test i	N. T	7/ 1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	n e-4 m to	×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
y 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			
0	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:			3 -
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990. Part VIII, line 12, for public use of club facilities . 10b	3		
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 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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		L X	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			100
b	Enter the amount of reserves the organization is required to maintain by the states in which			TATE:
	the organization is licensed to issue qualified health plans	-		
C	Enter the amount of reserves on hand		l å s	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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			
	excess parachute payment(s) during the year?	15		×
	If "Yes," see instructions and file Form 4720, Schedule N.	5, 85,		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	1	×
	If "Yes," complete Form 4720, Schedule O.	10-10	000	
		Forr	n 990	ı (2018

Part '	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Check if Schedule O contains a response or note to any line in this Part VI	s in Schedu <mark>le O.</mark> S	ee ins	tructi	"No" ions. ⊠
Section	on 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 7		3.	
	If there are material differences in voting rights among members of the governing body, or		4 10		
	if the governing body delegated broad authority to an executive committee or similar		1		
	committee, explain in Schedule O.			Van I	300
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 7	47	h, i	
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?	relationship with	2	<u></u>	×
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other	under the direct er person? .	3		×
4	Did the organization make any significant changes to its governing documents since the prior Form 99	90 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		×
6	Did the organization have members or stockholders?	(90)	6		×
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		×
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		×
8	Did the organization contemporaneously document the meetings held or written actions un	dertaken during			
	the year by the following:				
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule C	ot be reached at	9		×
Section	on B. Policies (This Section B requests information about policies not required by the	e Internal Rev en	ue C	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		×
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemple.	f such chapters, pt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a		×
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			200	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	×	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	re rise to conflicts?	12b	×	
c	Did the organization regularly and consistently monitor and enforce compliance with the process of the describe in Schedule O how this was done.	policy? If "Yes,"	12c	×	
13	Did the organization have a written whistleblower policy?		13	-	×
14	Did the organization have a written document retention and destruction policy?		14	_	×
15	Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation	and approval by			
2	The organization's CEO, Executive Director, or top management official		15a	×	
a b	Other officers or key employees of the organization		15b	×	-
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				132
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a taxable entity during the year?	lar arrangement	16a		×
	If "Yes," did the organization follow a written policy or procedure requiring the organization		100		
b	participation in joint venture arrangements under applicable federal tax law, and take steps to	to safeguard the	166		
Cooti	organization's exempt status with respect to such arrangements?		16b		<u> </u>
	List the states with which a copy of this Form 990 is required to be filed NM				
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable		(Sec	tion f	501/6
18	(3)s only) available for public inspection. Indicate how you made these available. Check all that ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Sci.	at apply. hedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year.				, and
20	State the name, address, and telephone number of the person who possesses the organization			•	
	Lou Harrington, 3451 Candelaria Rd NE #D, Albuquerque, NM 8710	/ (505)366-3	1/2		

Form **990** (2018)

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

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 hours per week (list any hours for	Position (do not check more than one box, unless person is both an officer and a director/trustee)				is both or/trus	an lee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Peter Fant President	4.00	3		×						
(2) John Lincoln Treasurer	4 00	1		×						
(3) Scott Rogers Vice-President	4.00			×						
(4) Blanca Surgeon Secretary	4.00			×		il .				
(5) Jason Gehrig Director	4.00	×								
(6) Jennifer McDowell Director	4.00	×								
(7) Lou Harrington Director	4.00	×								
(8)										
(9)										
10)										
11)		16								
12)	 									
(13)										
(14)										

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Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lighe	st C	ompensated E	mployees (cont	inued)		
	hours per officer and a director/trustee) compensation compensation						(E) Reportable compensation fror related	en from amount of					
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fi org an	pensati om the anization d relater	n d
(15)													
(16)												-	
(17)							į						
(18)									1				
(19)													
(20)										3			
(21)						RS.	(1				
(22)		1					1						
(23)						le:	1						
(24)			6.0										
(25)			19	>									
1b c	Sub-total . Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio						A A					
2	Total number of individuals (including but reportable compensation from the organic	not limited				ed		e) w	ho received m	ore than \$100,0	000 of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc	tor, o	or tr	uste indi	ee,	key e	emp	oloyee, or high	est compensa	ted 3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re greater th	portal an \$1	ole (000	npei)? /	nsatio f "Ye	s,"	nd other comp complete Sch	pensation from medule J for so	the uch		×
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe compl	nsat ete	tion Sch	froi nedi	m any ule J i	un for s	related organiz such person	zation or individ	lual 5	ı	×
Section	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Repyear.	compensat port compe	ed ind nsatio	depe	end or th	ent ne c	contr alenc	acto lar y	ors that receive year ending wit	ed more than \$ h or within the	organiza	tion's	tax
	(A) Name and business add	lress							(B) Description of s	ervices	Compe		
								7					
2	Total number of independent contractor received more than \$100,000 of compens							o th	nose listed abo	ove) who		\$	

Pari	VIII	Check if Schedule O contains	a response or note to	o any line in this	Part VIII		🗆
The state of the s				(A) Total revenue	(B) Related or exempt function revenue	(C) Unreiated business revenue	(D) Revenue excluded from tax under sections 512–514
rts rts	1a	Federated campaigns	1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b				
S, G	C	Fundraising events	1c				
Sift.	d	Related organizations	1d				
ili,	е	Government grants (contributions)	1e				
tion	f	All other contributions, gifts, grants,					
草		and similar amounts not included above	1f 295,696.				
do	g	Noncash contributions included in lines 1a					
	h	Total. Add lines 1a-1f		295,696.			
Program Service Revenue			Business Code	71 (1) (1)			
Ver	2a						
8	b						
je Je	С						
Ser	d						
Ē	е				90.1		
<u> </u>	f	All other program service reven	ue.		1	Q	***
F	g	Total. Add lines 2a-2f					
	3	Investment income (including					
		and other similar amounts) .		31.	0.	0.	31.
	4	Income from investment of tax-exe	mpt bond proceeds ▶	47	JI -		
	5	Royalties	<u>.</u>				
		(I) Rea	(ii) Personal				
	6a	Gross rents					No. 2 Contract
	b	Less: rental expenses	9-0			V ₁	
	С	Rental income or (loss)					
	d	Net rental income or (loss) .					
	7a	Gross amount from sales of (1) Securi	ties (ii) Other				
		assets other than inventory					
	b	Less: cost or other basis	1 1 1				
		and sales expenses .					
	С	Gain or (loss)					
	d	Net gain or (loss)					
	Ì		1 10	EREALER			
J.	8a	Gross income from fundraising	7				
Ver	İ	events (not including \$					
æ		of contributions reported on line 1	c).	Free Street			
<u>-</u>		See Part IV, line 18	. а				
Other Revenue	ь	Less: direct expenses	. b				
9	С	Net income or (loss) from fundra	aising events . >				
	9a	Gross income from garning activ	ities.				
		See Part IV, line 19	· a				
	b	Less: direct expenses	. b				
	С	Net income or (loss) from gamir	ig activities >				
		Gross sales of inventory,	less				
		returns and allowances	. а				
	b	Less: cost of goods sold					
	С	Net income or (loss) from sales	of inventory				
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	C						
	d	All other revenue					
	е	Total. Add lines 11a-11d	. In the factor of Pa				
	12	Total revenue. See instructions	· •	295,727.	0.	0.	31.

Part	501(c)(3) and 501(c)(4) organizations must con	nolete all columns. A	Il other organization	s must complete co	lumn (A).					
360110	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX									
Do no 8b, 9b	t include amounts reported on lines 6b, 7b, , 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees									
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			4						
7 8	Other salaries and wages									
9 10	Other employee benefits			<u> </u>						
11 a	Fees for services (non-employees): Management									
b	Legal	-81	4							
C	Accounting	793.	0.	793.	0.					
d	Lobbying	- 1	-0							
е	Professional fundraising services. See Part IV, line 17	0.00								
f	Investment management fees	570								
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	250,688.	246,284.	4,404.	0.					
12	Advertising and promotion	- W								
13	Office expenses	Va v								
14	Information technology	- M								
15	Royalties									
16	Occupancy									
	Travel	7,397.	7,397.	0.	0.					
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	7,331.	7,337.	0.						
19	Conferences, conventions, and meetings .	5,172.	2,586.	2,586.	0.					
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization .	110.	110.	0.	0.					
23	Insurance	648.	0.	648.	0.					
24	Other expenses. Itemize expenses not covered									
27	above (List miscellaneous expenses in line 24e. If									
	line 24e amount exceeds 10% of line 25, column									
	(A) amount, list line 24e expenses on Schedule O.)									
_	Manada ada a	836.	0.	836.	0.					
a		345.	335.	10.	0.					
b	License & Fees	821.	0.	821.	0.					
C	Bank Fees			0.	0.					
d	Project Materials	18,072.	18,072.	0.	0.					
e	All other expenses	106.			0.					
25	Total functional expenses. Add lines 1 through 24e	284,988.	274,890.	10,098.	<u> </u>					
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)									

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 314,176. 308,308. 1 1 56,743. 2 56,774. 2 3 3 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 Assets 7 7 8 9 Prepaid expenses and deferred charges . . . Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11 . 12 12 13 Investments—program-related. See Part IV, line 11. 13 14 14 4,840. 15 Other assets. See Part IV, line 11 15 365,051. 375,790. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses . . 17 18 18 19 19 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 iabilities trustees, key employees, highest compensated employees, and 22 Secured mortgages and notes payable to unrelated third parties . . . 23 23 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 . 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 28 29 Net Assets or Fund Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗵 and 1.50 complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 375,790. 365,051. 32 Retained earnings, endowment, accumulated income, or other funds. 32 365,051. 375,790. 33 33 375,790. 365,051. Total liabilities and net assets/fund balances .

Page	1	2

Check if Schedule O contains a response or note to any line in this Part XI	Part	XI Reconciliation of Net Assets								
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Accounting method used to prepare the Form 990: Cash Accrual Other If the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements and selection of an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis Both consolidated and separate basis Total review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? If "Yes," Gid the organization undergo the required audit or audits? If the organization did		Check if Schedule O contains a response or note to any line in this Part XI								
Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII I Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an a	1		<u> </u>							
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 11 Accounting method used to prepare the Form 990: Size and sharp of the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis b Were the organization's financial statements and selection of an independent accountant? If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	2	Total expenses (must equal trait ix, column (x), into 25)								
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Net difference and use of facilities Considered Services or selection process during the tax year, explain in Schedule O. Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 375,790.	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			36	5,0	<u>51.</u>			
To Investment expenses To To	5									
8 Prior period adjustments	6	Donated services and use of facilities		ļ						
9 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 11 Financial Statements and Reporting 12 Check if Schedule O contains a response or note to any line in this Part XII 13 Accounting method used to prepare the Form 990: 2 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant?	7	Investment expenses								
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1 Accounting method used to prepare the Form 990:		Check if Schedule O contains a response or note to any line in this Part XII		• • •			Щ.			
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Were the organization's financial statements compiled or reviewed by an independent accountant?			plain	in						
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Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					26					
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			piain	in						
the Single Audit Act and OMB Circular A-133?			forth	in						
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	3a		iorui	1111	3a		×			
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			 rao t)—	<u> </u>					
	a	If "Yes," and the organization undergo the required audit or addition the organization and not undergo such a provised audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits		3b					
Form 990 (2018)	-	required audit or addits, explain why in schedule of and describe any steps taken to undergo such a	- Conto			990	(2018)			

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

(E) Total

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

Open to Public Inspection

Employer identification number Name of the organization 85-0482431 Water Engineers for the Americas Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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.) 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 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% 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 331/3% 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). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (iii) Type of organization (vi) Amount of (i) Name of supported organization (ii) FIN (iv) is the organization (v) Amount of monetary listed in your governing other support (see support (see (described on lines 1-10 document? instructions) above (see instructions)) instructions) Yes No (A) (B) (C) (D)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.) Section A. Public Support (f) Total (a) 2014 **(b)** 2015 (d) 2017 (e) 2018 Calendar year (or fiscal year beginning in) ▶ (c) 2016 grants, contributions. Gifts. membership fees received. (Do not include any "unusual grants.") . . . 246,927. 255,700. 185,059. 295,696. 1,174,878. 191,496. levied revenues for the organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge 255,700. 185,059. 246,927. 295,696. 1,174,878. Total. Add lines 1 through 3. . . . 191,496. 5 The portion of total contributions by person each (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 751,340. 423,538. Public support. Subtract line 5 from line 4 Section B. Total Support **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Calendar year (or fiscal year beginning in) (a) 2014 295,696. 1,174,878. Amounts from line 4 191,496. 255,700. 185,059 246,927. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from 77. similar sources 46. 31 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 1,174,955. 12 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 36.05% 14 15 Public support percentage from 2017 Schedule A. Part II, line 14 15 331/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 331/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an	/-					
	unrelated trade or business under section 513						
4	Tax revenues levied for the			\$			
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge				6.		
6	Total. Add lines 1 through 5				8		
7a	Amounts included on lines 1, 2, and 3				Dan B		
	received from disqualified persons .						
b	Amounts included on lines 2 and 3			4	7		
-	received from other than disqualified			J. Commission	1		
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year		1				
С	Add lines 7a and 7b		- W	4			
8	Public support. (Subtract line 7c from		BER VEIDO	W FR EVEN			
	line 6.)						
Secti	on B. Total Support	1					
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,	1					
	payments received on securities loans, rents,	1					
	royalties, and income from similar sources .	8 / 4 1					
b	Unrelated business taxable income (less	W. J					
	section 511 taxes) from businesses	A CONTRACTOR OF THE PARTY OF TH					
	acquired after June 30, 1975	*					
С							
с 11	acquired after June 30, 1975						
_	acquired after June 30, 1975						
_	acquired after June 30, 1975						
_	acquired after June 30, 1975						
11	acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets					_	
11	acquired after June 30, 1975 Add lines 10a and 10b						
11	acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets						
11	acquired after June 30, 1975 Add lines 10a and 10b						
11	acquired after June 30, 1975 Add lines 10a and 10b						
11 12 13 14	acquired after June 30, 1975 Add lines 10a and 10b	re					
11 12 13 14	acquired after June 30, 1975 Add lines 10a and 10b	re rt Percentag	e				· · > [
11 12 13 14	acquired after June 30, 1975 Add lines 10a and 10b	re rt Percentag 8, column (f), c	e divided by line			15	▶ □
11 12 13 14 Section 15 16	acquired after June 30, 1975 Add lines 10a and 10b	rt Percentag 8, column (f), c hedule A, Part	le divided by line III, line 15			15	· · > [
11 12 13 14 Section 15 16	acquired after June 30, 1975 Add lines 10a and 10b	rt Percentag 8, column (f), c hecule A, Part come Perce	e divided by line III, line 15			15 16	▶ □
11 12 13 14 Section 15 16	acquired after June 30, 1975 Add lines 10a and 10b	rt Percentag 8, column (f), c hedule A, Part come Perce line 10c, colur	le divided by line fill, line 15 ntage nn (f), divided by	13, column (f))		15 16	▶ ☐ % %
11 12 13 14 Section 15 16 Section 16	acquired after June 30, 1975 Add lines 10a and 10b	rt Percentag 8, column (f), c hedule A, Part come Perce line 10c, colur 7 Schedule A,	divided by line III, line 15 ntage nn (f), divided by Part III, line 17	13, column (f))	umn (f))	15 16	▶ ☐ % % %
11 12 13 14 Secti 15 16 Secti 17	acquired after June 30, 1975 Add lines 10a and 10b	rt Percentag 8, column (f), c hedule A, Part come Perce line 10c, colur 7 Schedule A, lization did not	divided by line III, line 15 Intage nn (f), divided k Part III, line 17	13, column (f)) by line 13, column (f), column (f), column (f)	umn (f))	15 16 17 18 nore than 33 ¹ /3 ¹	▶ ☐ % % % % % % % % % % % % % % % % % %
11 12 13 14 Secti 15 16 Secti 17 18	acquired after June 30, 1975 Add lines 10a and 10b	rt Percentag 8, column (f), c hedule A, Part come Perce line 10c, colur 7 Schedule A, lization did not and stop here	divided by line III, line 15 III, line 15 III, line 17 check the box. The organizati	noy line 13, column (f)) oy line 13, column on line 14, a on qualifies as	umn (f))	15 16 17 18 nore than 331/31 orted organizat	▶ ☐ % % % % % % % % % ion . ▶ ☐
11 12 13 14 Secti 15 16 Secti 17 18	acquired after June 30, 1975 Add lines 10a and 10b	rt Percentag 8, column (f), conedule A, Part come Perce line 10c, colum 7 Schedule A, sization did not and stop here	divided by line III, line 15 III, line 15 III, line 17 check the box The organizationeck a box on	noy line 13, column (f)) oy line 13, column on line 14, a on qualifies as line 14 or line	umn (f))	15 16 17 18 nore than 331/3 orted organizate is more than 3	% % % % % % % % % 331/3%, and
11 12 13 14 Section 15 16 Section 17 18 19a	acquired after June 30, 1975 Add lines 10a and 10b	rt Percentage 8, column (f), chedule A, Part come Perce (line 10c, column 7 Schedule A, dization did not and stop here cation did not abox and stop h	divided by line III, line 15 Intage III, line 17 Part III, line 17 check the box The organizationeck a box on the organizationere. The organizationere.	oy line 13, column (f)) oy line 13, column (f)) on line 14, a on qualifies as line 14 or line ization qualifies	umn (f))	15 16 17 18 nore than 331/31 orted organizat 3 is more than 3	% % % % % %, and line ion . ▶ □ 331/3%, and nization ▶ □

Part IV Supp

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.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	-100	
0	Did the organization have any supported organization that does not have an IRS determination of status			
2	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).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer		18 58	
	(b) and (c) below.	За		
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			LITTLE I
	organization made the determination.	3b		
С	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.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	36		100
40	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
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	IRR		
	despite being controlled or supervised by or in connection with its supported organizations.	4b		Vi -
С	Did the organization support any foreign supported organization that does not have an IRS determination		113	1.00
	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)	-13	i di	
	purposes.	4c		- Val
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			100
-	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	51		1991
	designated in the organization's organizing document?	5b 5c		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	30		
6	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			4
	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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	23	Fils	
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity		1974	
_	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
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).	8	j	. 9
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more		10.00	
	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.	9a		
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.	9b		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit		1.	
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			e
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	iva		
	Did the distinction that any according to the transfer of the		1	

10b

determine whether the organization had excess business holdings.)

Part	Supporting Organizations (continued)		14	A.I
	the state of the state of the state of the fall and the fall and the state of the s		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		1,5	
а	below, the governing body of a supported organization?	11a	line State	
b	A family member of a person described in (a) above?	11b		
	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		
	on 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,			12.3
	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		1, 1	FF E
_	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		
Secti	on C. Type II Supporting Organizations	0.0		
			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		1	
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations	1		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's	5:		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	nstru	ction	S).
a	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
b	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		" 1	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	d.		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	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			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			- 5-6
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	3.6		1 5
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			3 2
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	g tru nizat	st on Nov. 20, 1970 (explai ions must complete Sectio	ns A through E.
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a	466	
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10	N J:	
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount	15.		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
 7 Check here if the current year is the organization's first as a non-functional instructions). 	ly in	tegrated Type III supporting	g organization (see

Schedule A (Form 990 or 990-EZ) 2018

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	
3	Administrative expenses paid to accomplish exempt purp	noses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	oses of supported orga	HIZATIONO	
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	h the organization is res	nonsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6		· · · · · · · · · · · · · · · · · · ·	
10_	Line 8 amount divided by line 9 amount			(10)
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.		7	
3	Excess distributions carryover, if any, to 2018			
а	From 2013	DESTRUCTION (CAR)		
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
<u>i</u>	Carryover from 2013 not applied (see instructions)	<u> </u>		
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

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

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** Water Engineers for the Americas 85-0482431 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: **b** Assets included in Form 990, Part X . . .

Par	III Organizations Maintaining	Collections of Art	, Historical 1	Freasures, or	Other Similar As	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and other	records, chec	k any of the fol	lowing that are a s	ignificant use of its
а	Public exhibition			or exchange pro		
b	Scholarly research		e 🗌 Other	r		
C	 Preservation for future generations 	i				
4	Provide a description of the organizat XIII.					
5	During the year, did the organization					
	assets to be sold to raise funds rather		d as part of the	e organization's	collection?	Yes No
Part	IV Escrow and Custodial Arra	ngements.				
	Complete if the organization 990, Part X, line 21.					
1a	Is the organization an agent, trustee,					
	included on Form 990, Part X?					∐ Yes ∐ No
b	If "Yes," explain the arrangement in Pa	art XIII and complete	the following to	able:	Δ	mount
	Danierius balance			-		Hodit
C C	Beginning balance				1c	
d:	Additions during the year				1e	
e	Distributions during the year				1f	
f 2a	Did the organization include an amour	on Form 990 Part	X line 21 for e			? Ves No
	If "Yes," explain the arrangement in Pa					
Par		are years of control of a	<u> </u>	у да		
	Complete if the organization	answered "Yes" or	n Form 990, I	Part IV, line 10.		
	, ,		(b) Prior year			(e) Four years back
1a	Beginning of year balance		B. D			
b	Contributions					
С	Net investment earnings, gains, and losses	36				
d	Grants or scholarships	16 A	8			
е	Other expenditures for facilities and programs	All D				
f	Administrative expenses				-	
g	End of year balance	A 16 1	_			
2	Provide the estimated percentage of the	he current vear end b	alance (line 10	. column (a)) hel	d as:	
a	Board designated or quasi-endowmer			., , , , , ,		
b	Permanent endowment	%				
c	Temporarily restricted endowment	%				
	The percentages on lines 2a, 2b, and	2c should equal 100%	6.			
3a	Are there endowment funds not in the organization by:			at are held and	administered for th	Yes No
						3a(i)
	(ii) unrelated organizations (iii) related organizations					3a(ii)
b	If "Yes" on line 3a(ii), are the related or					3b
4	Describe in Part XIII the intended uses					0.0
Part					· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization		n Form 990, I	Part IV, line 11	a. See Form 990,	Part X, line 10.
	Description of property	(a) Cost or other I (investment)	basis (b) Cost of		c) Accumulated depreciation	(d) Book value
	Land			1,500		
b	Buildings					
C	Leasehold improvements	× -				
d	Equipment	9.				
e	Other	98				
	Add lines 1a through 1e. (Column (d) m	oust equal Form 990.	Part X. column	(B), line 10c.) .		

Part VII	Investments - Other Securitie Complete if the organization an	s. swered "Yes" on For	m 990. Part IV. lin	e 11b. See Form 9	90. Part X, line 12.
	(a) Description of security or categorical (including name of security)		(b) Book value	(c) Metho	d of valuation: -year market value
(1) Financial	derivatives				
	neld equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments – Program Relate Complete if the organization an	eu. Swarad "Voe" on Ear	m 000 Part IV lin	e 11c See Form 9	100 Part X line 13
		swered tes on ror	(b) Book value		d of valuation:
	(a) Description of investment		(b) Sook value		f-year market value
(4)					
(1)		<u>-</u>	- A		
(3)			1000	9	
(5)					
(6)		- II			
(7)		W.			
(8)		No.			
(9)					
	b) must equal Form 990, Part X, col. (B) line 13.)	. 57			
Part IX	Other Assets.	AV			
	Complete if the organization an		m 990, Part IV, lin	e 11d. See Form 9	
		(a) Description			(b) Book value
(1) Websit	ce - net of amortization	1 2/4 ×			4,840.
(2)	4.4	N_A			
(3)					
_(4)					
(5)					
(6)					
(8)					
(9)	mn (b) must equal Form 990, Part X,	col. (B) line 15.)			4,840.
Part X	Other Liabilities.	сот. (Б) ште толу	· · · · · · · ·		4,040.
PartA	Complete if the organization an	swered "Yes" on For	m 990 Part IV lin	e 11e or 11f. See	Form 990, Part X.
	line 25.	Swered 100 on 101	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,0 ,,0 0. ,, 000	
1.	(a) Description of liability	(b) Book value		TRIVELENGE AND THE	
(1) Federal in			THE REAL PROPERTY.		
(2)					
(3)					
(4)					
(5)	-				
(6)					
(7)					
(8)					
(9)			5, 1 5, 14		
	b) must equal Form 990, Part X, col. (B) line 25.) 🕨				
2. Liability for	runcertain tax positions. In Part XIII, pro	ovide the text of the footn	ote to the organizatio	n's fi <mark>nancial</mark> statemen	ts that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part		r Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	11.5
а	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
С	Recoveries of prior year grants	
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	<i>p</i>
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.)	
b	Add lines 4a and 4b	4c
С 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part		
1 are	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	
b	Prior year adjustments	100
С	Other losses	
d	Other (Describe in Part XIII.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
8	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
С	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part	Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2	Dr. Dort V. Line 4: Dort V. Line
2. Dan	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional	information
2, r a!	t XI, Illies 20 and 40, and 1 art XII, lines 20 and 45. Also complete this part to provide any additional	mornadon.

Schedule D (For	rm 990) 2018	Page 5
Part XIII	Supplemental Information (continued)	
	3. (7)	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

85-0482431

Water	Engineers for the				85-0482	
Part I	General Information Form 990, Part IV, line		ies Outside	the United States. Com	nplete if the organization ar	nswered "Yes" on
otl	or grantmakers. Does the her assistance, the grante ward the grants or assistance.	es' eligibility	n maintain red for the grant	cords to substantiate the ass or assistance, and the s	amount of its grants and selection criteria used to	☐ Yes ☐ No
ou	itside the United States.			's procedures for monitoring an be duplicated if addition		d other assistance
3 40	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) Cen	tral America	0	4	Program Services	Project material and services	85,958.
(2) Sou	th America	0	4	Program Services	Project material and services	113,017.
(3) Nor	th America	0	1	Program Services	Project material and services	4,851.
(4)						-
(5)						
(6)			40			
(7)		<u> </u>				· · · · · · · · · · · · · · · · · · ·
(8)						
(9)	(•				
(10)						
(11)						
(12)						
(13)						
(14)					8	
(15)						
(16)						
(17)						
b To	ubtotal	0	9	A A A A A A A A A A A A A A A A A A A		203,826.
	otals (add lines 3a and 3b)	0	9		Karpini, German	203,826.

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

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 noncesh assistance	(h) Description of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
(5)	7				()%			
(9)								
(1))_			
(8)								
(6)								
(10)			To a part of					
(11)	4.						Carlo	
(12)	*							
(13)	₹.							
(14)								
(15)								
(16)								
	mber of recipien for which the gr	t organizations list rantee or counsel b	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	ognized as charitie 501(c)(3) equivale	s by the foreign coun ncy letter	try, recognized as ta	ax-exempt	
s Enter total flur	riiber ol other or	Enter total number of other organizations or entities	iles				Sch	Schedule F (Form 990) 2018

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2018

Part III Grants ar

ran III can be oublic	Fart III can be oublicated if additional space is needed.	s is rieeded.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)					The state of the s		
(4)							
(5)				7			
(9)							
(2)					- 15 OC - 15 O		
(8)			4				
(6)							
(10)					3		
(11)	A		1	7			
(12))				
(13)), = N	
(14)		1					
(15)	7 7 7						
(16)							
(17)	8			3			
(18)							
ВАА		REV 11/05/18 PRO	0			Sch	Schedule F (Form 990) 2018

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	⊠ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	⊠ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	⊠ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	⊠ No

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

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2018 Open to Public

Inspection

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Water Engineers for the Americas 85-0482431 Pt VI, Line 11b: The President and Treasurer review Form 990 before filing. Pt VI, Line 19: The governing documents are available to the public upon request. Pt VI, Line 12c: Annually, board members are required to disclose any conflicts of interest. Pt VI, Line 15a: The board approves all compensation. Pt VI, Line 15b: The board approves all compensation. Pt IX, Line 11g: Description: Contracted Services Total: \$73,535 Program services: \$69,131 Management and general: \$4,404 Fundraising: \$0 Description: Project Fees Total: \$177,153 Program services: \$177,153 Management and general: \$0 Fundraising: \$0 Pt IX, Line 24e: Description: Web Hosting Total: \$106 Program services: \$106 Management and general: \$0 Fundraising: \$0

NameEmployer Identification No.Water Engineers for the Americas85-0482431

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Contracted Services	73,535.	69,131.	4,404.	0.
Project Fees	177,153.	177,153.	0.	0.
			-	
		77		
		1		
	6.7			
	0			
4				
	- V			
Total to Form 990, Part IX, line 11g	250,688.	246,284.	4,404.	0.