# Form **990**

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

2018
Open to Public Inspection

OMB No. 1545-0047

Α	For the	2018 calendar year, or tax year beginning and en	nding		
	Check if applicable	C Name of organization		D Employer identifie	cation number
Г	Addres	S WATER & SANITATION ROTARIAN ACTION GROU	JP		
	Name change	TA CDA C		20-8	656760
Ļ	Initial return Final	,	Room/suite	•	
L		121 KING STREET WEST, STE 1910			<u>596-3607</u>
_	ated Amend	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	218,119.
F	return Applica	TORONIO, ONIARIO CANADA MON 319		H(a) Is this a group re	
	tion pendin	F Name and address of principal officer: MICHAEL WEBB		for subordinates	·····= =
_	_	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	
		empt status: 501(c)(3)	527	1 ′	list. (see instructions)
		e: WWW.WASRAG.ORG	1	H(c) Group exemptio	
		organization: X Corporation	L Year	of formation: 2007 N	M State of legal domicile; CA
•		Briefly describe the organization's mission or most significant activities: AN IN	тгома	TTONAT. ACCO	TATION OF
9	1	ROTARIANS FOCUSED ON IMPROVING LIVES WORLD	MIDE	BV TNCREAST	NG ACCESS
ă	2	Check this box if the organization discontinued its operations or disposed			
Governance	3			1 -	9
ő	4	Number of independent voting members of the governing body (Part VI, line 1a)			9
		Total number of individuals employed in calendar year 2018 (Part V, line 2a)			0
ties	6				150
Activities &	72.	Total number of volunteers (estimate if necessary)  Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ą	( ' h	Net unrelated business taxable income from Form 990-T, line 38			0.
_	"	Net directated business taxable moonie noni on 1011 550 1, into 50		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		63,268.	80,215.
Revenue	9	Program service revenue (Part VIII, line 2g)		71,923.	136,177.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	1,727.
Be	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		135,191.	218,119.
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	45 (	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
pen	b .	Total fundraising expenses (Part IX, column (D), line 25)	0.		
Ж	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		116,372.	149,272.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		116,372.	149,272.
		Revenue less expenses. Subtract line 18 from line 12		18,819.	
or or		·	Ве	ginning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)		207,221.	282,473.
Ass	21	Total liabilities (Part X, line 26)		20,175.	26,580.
Ret	22	Net assets or fund balances. Subtract line 21 from line 20		187,046.	255,893.
P	art II	Signature Block			
Und	der penal	ties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my	knowledge and belief, it is
true	e, correct	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	ch preparer	has any knowledge.	
Sig	ın	Signature of officer		Date	
He	re	MICHAEL WEBB, CHAIR			
		Type or print name and title	1 -	Data I F	DTIN
_		Print/Type preparer's name  Preparer's signature		Date Check	PTIN
Pai	1	TED M. TELLER, CPA		2/13/19 self-employ	
		Firm's name RASMUSSEN, TELLER, O'NEIL & CHRIS	J'I'MAN	PC Firm's EIN ▶	38-2268582
Use	Only	Firm's address 555 MICHIGAN STREET			21\ 240 555
_		PETOSKEY, MI 49770		Phone no. (2	
Ма	y the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No

Total program service expenses ▶

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	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	Х	
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
Ü	, ,	8		x
9	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	۰		<del></del>
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		x
40	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	40		x
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			,,
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			.,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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		X
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
-	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		T -
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

	· (continued)			T
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
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		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		X
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	X	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	22-	
83300	1 10 21 10	Form	990	(2018)

### Page 5 Form 990 (2018) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **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 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 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). **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts Х were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 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 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. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.

X

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," complete Form 4720, Schedule O.

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
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	Х	
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	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	•		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers or key employees of the organization	15b		Х
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3):	s onlv)	availal	ole
-	for public inspection. Indicate how you made these available. Check all that apply.	,/		
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l financ	ial	
=	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MICHAEL COLASURDO - 732-833-9574			
	130 FOXWOOD ROAD, LAKEWOOD, NJ 08701-5767			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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.

Check this box if neither the organization nor any related (A) (B)			(C)					(D)	(E)	(F)
Name and Title	Average		Position (do not check more than one box, unless person is both an					Reportable	Reportable	Estimated
ivaine and title	hours per							compensation	compensation	amount of
	week	offic	cer ar	id a d	irecto	or/trus	tee)	from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	r dire				ted		organization	(W-2/1099-MISC)	from the
	related	stee	ruste			seusa		(W-2/1099-MISC)		organization
	organizations	ıal tru	onal t		ploye	luo a				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	rmer			organizations
(1) PETER KYLE	1.00	드	트	5	32	王吉	윤			
DIRECTOR	1.00	х						0.	0.	0.
(2) RAMESH AGGARWAL	1.00									
DIRECTOR		Х						0.	0.	0.
(3) MICHAEL BARRINGTON	1.00									
DIRECTOR		Х						0.	0.	0.
(4) CHRIS MUTALYA	1.00									
DIRECTOR		Х						0.	0.	0.
(5) BHARAT PANDYA	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(6) MARK BALLA	1.00	1								_
DIRECTOR		Х				_		0.	0.	0.
(7) MONICA LOUIE	1.00	l								
DIRECTOR	1 00	Х				_		0.	0.	0.
(8) NEIL VAN DINE	1.00	ļ								•
DIRECTOR	0.00	Х				├		0.	0.	0.
(9) MICHAEL WEBB	2.00	.,		,,						•
CHAIR	2 00	Х		Х		<u> </u>		0.	0.	0.
(10) MICHAEL COLASURDO	2.00	3,7		,,					0	0
TREASURER		Х		Х		-		0.	0.	0.
		1								
		1								
						$\vdash$				
		1								
		1								
		1	l	l						

Section A. Officers, L	Directors, Trustees, Key Em	ploye	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)		ı	<b>(C</b> Posi		1		(D)	(E)		(F)	
Name and title	Average hours per		not ch	neck r	more	than o s both		Reportable compensation	Reportable compensation		Estimat amount	
	week					r/trust		from	from related		other	
	(list any hours for	rector						the	organizations		mpens	
	related	e or di	stee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	- 1	from th rganiza	
	organizations	truste	al trus		ıyee	ompen		(VV 2/ 1033 WIIGO)		- 1	nd rela	
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			or	ganizat	ions
	line)	ju L	lust	) Offi	Key	Hig	윤			_		
		-										
		++										
		1										
		$\perp \perp$										
		-										
		++								+		
		1										
		<b>↓</b>										
		+										
		-										
		$\forall$										
1b Sub-total								0.		•		0.
c Total from continuation sh							>	0.		•		0.
d Total (add lines 1b and 1c)							<b>&gt;</b>		000 of reportable	•		0.
2 Total number of individuals ( compensation from the orga	(including but not limited to the inization	iose	iiste	u ab	ove	y wric	o re	eceived more than \$100,	DOU OF reportable			0
- compondation from the erga	anzadon P										Yes	No
3 Did the organization list any	former officer, director, or tr	ustee	e, ke	y en	nplo	yee,	or ł	highest compensated en	nployee on			
	Schedule J for such individual									3		X
•	ine 1a, is the sum of reportab		•					•	J			77
	eater than \$150,000? <i>If</i> "Yes	•	•							. 4		X
	e1a receive or accrue comperer? If "Yes." complete Schedul									. 5		х
Section B. Independent Contract		<del>- 0 /</del> C	JI SU	CIIĻ	Jers	<u> </u>				<u>. ,                                    </u>		
1 Complete this table for your	five highest compensated inc	deper	nder	nt cc	ontra	actor	s th	nat received more than \$	100,000 of comper	sation	rom	
the organization. Report con	npensation for the calendar y	<u>ear e</u>	ndin	g w	ith c	or wit	hin	the organization's tax ye	ear.			
Name	(A) e and business address	NC	ONE	,				<b>(B)</b> Description of s	ervices	Comr	(C) ensatio	nn .
- Trains	c and basiness address	11/	ЛИЕ				+	Decomplian of a	0111000	001115	Oriodic	211
							$\dashv$					
2 Total number of independen	t contractors (including but n	ot lin	nited	l to t	_		ed	above) who received mo	ore than			
\$100,000 of compensation f	rom the organization				(	)					000	<b></b>
										Forr	n <b>990</b>	(2018)

Pai	t VI			or note to and !	o in this Dest VIII			
		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII (A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
इ इ	1 a	a Federated campaigns	1a					
ts, Grants Amounts	k	<b>b</b> Membership dues		17,425.				
Ω.Ε		Fundraising events		-				
Gifts, ilar An		d Related organizations						
nii G		e Government grants (contribut						
Sir		f All other contributions, gifts, gran						
e ti	•	similar amounts not included abo	1 1	62,790.				
흥판	,	Noncash contributions included in lines		0277500				
Contributions, Gift and Other Similar	ŀ	h Total. Add lines 1a-1f			80,215.			
<u> </u>		Total / lad iii los Ta II		Business Code	00/2201			
	2 8	a WORLD WATER SUM	мтт	900099	136,160.	136,160.		
Ş		MISCELLANEOUS		900099	17.	17.		
ser ue	_			300033	<u> </u>	± / •		
m S		cd						
gra Re								
Program Service Revenue		6						
_		f All other program service reve			136,177.			
-	3	g Total. Add lines 2a-2f			130,177.			
	3	other similar amounts)	•		1,727.			1,727.
	4				1,7276			1,7276
	4	Income from investment of tax		- 1				
	5	Royalties						
		- Currente	(i) Real	(ii) Personal				
	_	a Gross rents						
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)						
	/ 8	a Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	r	b Less: cost or other basis						
		and sales expenses						
		c Gain or (loss)						
		d Net gain or (loss)		······				
ē	8 8	a Gross income from fundraisin						
ē		including \$						
Ş.		contributions reported on line	•					
ē		Part IV, line 18						
Other Revenue		b Less: direct expenses						
		Net income or (loss) from fund		·····				
	9 a	a Gross income from gaming ac						
		Part IV, line 19						
		b Less: direct expenses						
		Net income or (loss) from gam		<b>D</b>				
	10 a	a Gross sales of inventory, less						
	-	and allowances						
		b Less: cost of goods sold						
-	(	Net income or (loss) from sale						
}		Miscellaneous Revenu	ie	Business Code				
	11 a							
		b						
		C						
		d All other revenue						
		e Total. Add lines 11a-11d		<b>&gt;</b>	210 110	136.177.	0.	1 727.
	1')	Total revenue See instructions			7.10 IIY.	ו מרו ו	11.	1 1/./-

### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 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 ....... Benefits paid to or for members ..... Compensation of current officers, directors, trustees, and key employees ..... Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (non-employees): 22,600. 22,600. Management Legal 1,400. 1,400. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 947. 947. Office expenses 13 7,423. 7,423. Information technology 14 Royalties 15 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 103,714. 103,714. Conferences, conventions, and meetings 19 20 Payments to affiliates \_\_\_\_\_ 21 22 Depreciation, depletion, and amortization ..... 501. 501. 23 Other expenses. Itemize expenses not covered 24 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.) 10,000. 10,000. WORLD WATER FORUM - BRA d 2,687. 2,687. All other expenses 149,272. 121,137. 28,135. 0. Total functional expenses. Add lines 1 through 24e 25 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) Beginning of year (B) End of year 158,360. 188,081. 1 Cash - non-interest-bearing 110,727. Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 400. 0. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 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 organizations (see instr). Complete Part II of Sch L 6 7 7 Notes and loans receivable, net 8 Inventories for sale or use 8,740. 3,386. 9 Prepaid expenses and deferred charges **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D \_\_\_\_\_\_ 10a b Less: accumulated depreciation \_\_\_\_\_\_ 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 10,000. 10,000. 15 Other assets. See Part IV, line 11 15 207,221. Total assets. Add lines 1 through 15 (must equal line 34) 16 282,473. 16 17 11,300. 17 Accounts payable and accrued expenses 18 18 Grants payable 20,175. 15,280. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 20,175. 26,580. **Total liabilities.** Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 129,836. 239,893. 27 27 Unrestricted net assets 57,210. 16,000. 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 187,046. 255,893. Total net assets or fund balances 33 33 207.221. 282,473. 34 Total liabilities and net assets/fund balances

Form **990** (2018)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

832012 12-31-18

### **SCHEDULE C**

(Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

2018

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	(see separate instructions), then	iana Campleta Dest III					
	Section 501(c)(4), (5), or (6) organizat ne of organization	lons: Complete Part III.		1	Employe	er identification	number
1 1011	· ·	SANITATION ROTAR	TAN ACTION (			20-86567	
Pa		anization is exempt under					00
	mer rej				3		
4	Provide a description of the organiz	ation's direct and indirect political	compoign activities in	Dort IV			
	1	'	. 0		•		
	Political campaign activity expendit				Φ_		
3	Volunteer hours for political campai	gri activities					
Pa	art I-B Complete if the org	anization is exempt under	r section 501(c)(3	).			
1	Enter the amount of any excise tax	•		•	▶\$_		
	Enter the amount of any excise tax						
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 fo	or this year?			Yes	☐ No
	Was a correction made?					Yes	☐ No
k	If "Yes," describe in Part IV.						
Pa	art I-C Complete if the org	anization is exempt under	r section 501(c), e	except section 50	01(c)(3)	).	
1	Enter the amount directly expended	by the filing organization for sect	ion 527 exempt function	on activities	▶\$		
2	Enter the amount of the filing organ	ization's funds contributed to other	er organizations for sec	ction 527			
	exempt function activities				▶\$		
3	Total exempt function expenditures						
	line 17b				▶\$		
4	Did the filing organization file Form					Yes	No
5	Enter the names, addresses and em					e filing organiza	tion
	made payments. For each organization	tion listed, enter the amount paid	from the filing organiza	tion's funds. Also ente	er the an	nount of politica	al
	contributions received that were pro-	omptly and directly delivered to a	separate political organ	nization, such as a sep	oarate se	egregated fund	or a
	political action committee (PAC). If	additional space is needed, provid	e information in Part IV	<i>I</i> .			
	<b>(a)</b> Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization funds. If none, enter	ı's co r -0	(e) Amount of partributions recupromptly and odelivered to a spolitical organ If none, enter	eived and directly eparate ization.

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Sche	dule C (Form 990 or 990-EZ) 2018	WATER	& SAN	ITATION ROTA	ARIAN ACTION	I GROU 20-8	3656760 Page <b>2</b>
	t II-A Complete if the or section 501(h)).						
A Ch	neck 🕨 🔲 if the filing organiz	zation belon	gs to an affi	liated group (and list in	Part IV each affiliated	group member's nam	ne, address, EIN,
	expenses, and sh						, , ,
B Ch	neck  if the filing organiz	zation check	ed box A ar	nd "limited control" pro	visions apply.		
		nits on Lobl nditures" m		nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
	Total lobbying expenditures to in	fluence pub	lic opinion (	grass roots lobbying)			
	Total lobbying expenditures to in						
		-	-	• • • • •			
	Other exempt purpose expenditu						
	Total exempt purpose expenditur						
	Lobbying nontaxable amount. En						
٦	If the amount on line 1e, column (a)			bying nontaxable am			
ŀ	Not over \$500,000	0. (2) 10.		the amount on line 1e.	ount ioi		
ŀ	Over \$500,000 but not over \$1,0	00 000		00 plus 15% of the exc	ess over \$500,000		
ŀ	Over \$1,000,000 but not over \$1,	<i></i>		00 plus 10% of the exc			
ŀ	Over \$1,500,000 but not over \$1	<i></i>		00 plus 5% of the exce			
ŀ	Over \$17,000,000	,,000,000	\$1,000,	•	σο στοι φτ,σσο,σσο.		
			Ψ1,000,				
g	Grassroots nontaxable amount (e	enter 25% of	line 1f)				
h	Subtract line 1g from line 1a. If ze	ero or less, e	enter -0-				
i	Subtract line 1f from line 1c. If ze	ro or less, e					
j	If there is an amount other than z	ero on eithe					
	reporting section 4911 tax for this						Yes No
	(Some organizations	Sec	a section 50 e the separ	ate instructions for lir	nave to complete all c nes 2a through 2f.)	of the five columns b	elow.
		Lobi	oying Expe	nditures During 4-Yea	r Averaging Period		
	Calendar year (or fiscal year beginning in)	(a)	2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	(e) Total
2a	Lobbying nontaxable amount						
	Lobbying ceiling amount						
	(150% of line 2a, column(e))						
c	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount						
	(150% of line 2d, column (e))						

Schedule C (Form 990 or 990-EZ) 2018

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2018 WATER & SANITATION ROTARIAN ACTION GROU 20-8656760 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)		(k	)
	for each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description  for the lobbying activity.  1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying and political campaign activity expenditures from the prior year?  1 Dues, assessments and similar amounts from members 2 Section 162(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) ondeductible lobbying and political expenditures (do not include amounts of political expenses for which the se			lo	Amo	ount
1	local legislation, including any attempt to influence public opinion on a legislative matter					
•						
	, I					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5	ō), o	r sec	tion	
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Х	
	Did the organization agree to carry over lobbying and political campaign activity expenditures from th	e prior year?	?	3		X
_	answered "Yes."			Part 1	III-A, IINe	9 3, IS
_	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
				0-		
				2a		
				2b		
				2c		
				3		
4						
		Jillicai		4		
5				5		
_						
		list); Part II-A	A, lin	es 1 aı	nd 2 (see	

## SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

## **Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990.

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

2018
Open to Public Inspection

Name of the organization

**Employer identification number** 

Schedule F (Form 990) 2018

NA'	TER & SANITAT	ION ROTAI	RIAN ACT	ION GROUP		20-865676	50
Pa	rt I General Info	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "	Yes" on
	Form 990, Part I\			·			
1	For grantmakers. Does	the organization	maintain record	ds to substantiate the amount of its grai	nts and other a	assistance,	
	the grantees' eligibility for	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	tance?	Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and otl	ner assistance outs	side the
3	Activities per Region. (T	he following Part	I, line 3 table ca	n be duplicated if additional space is n	eeded.)		
	(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, pro- gram services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, specific type (s) in the region	(f) Total expenditures for and investments in the region
IOR!	TH AMERICA -		•				
ANZ	ADA AND MEXICO,						
BUT	NOT THE UNITED						
TAT	res	1	1	MEMBERSHIP SERVICES			22,600.
2 -	Subtotal	1	1				22,600.
	Subtotal						22,000.
	sheets to Part I	0	0				0.
С	Totals (add lines 3a and 3b)	1	1				22,600.

832071 10-31-18

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the					1
by the IRS, or for whice <b>3</b> Enter total number of			ion 501(c)(3) equivalency lette	r				

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

(a) Type of grant or as	dublicated if a		1					
		dditional space is neede	(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	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	X 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	X 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	X 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	X No

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

WATER & SANITATION ROTARIAN ACTION GROUP

**Employer identification number** 20-8656760

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

TO CLEAN WATER THROUGH HYGIENE EDUCATION AND BY PROVIDING PROJECT

COORDINATION AND TECHNICAL SUPPORT.

FORM 990, PART VI, SECTION A, LINE 6:

CLASSES OF MEMBERS OR STOCKHOLDERS THE ORGANIZATION IS A NON-STOCK MEMBERS HAVE EOUAL RIGHTS TO PARTICIPATE IN THE NONPROFIT WITH MEMBERS. ORGANIZATION'S GOVERNANCE, AND APPROVE SIGNIFICANT DECISIONS OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7A:

ELECTION OF MEMBERS AND THEIR RIGHTS A NOMINATING COMMITTEE CALLS FOR APPLICATIONS FROM THE MEMBERSHIP, AND DEVELOPS A SLATE OF CANDIDATES. CANDIDATES' NAMES ARE E-MAILED TO THE MEMBERSHIP, AND THE MEMEBERSHIP MAY MEMBERSHIP THEN HAS 30 DAYS TO VOTE THEIR CHOICE. ADD NAMES. ELECTED BOARD SELECTS OFFICERS DURING FIRST MEETING OF THE YEAR.

FORM 990, PART VI, SECTION A, LINE 7B:

DECISIONS SUBJECT TO APPROVAL OF MEMBERS MEMBERSHIP MAY OVERTURN BOARD DECISIONS WITH A TWO-THIRDS VOTE

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

FORM 990 IS RECEIVED BY ACCOUNTANT PRIOR TO DUE DATE AND IS REVIEWED BY BOARD OF DIRECTORS FOR ACCURACY AND COMPLETENESS. AUTHORIZATION TO FILE IS DETERMINED UPON REVIEW, AND ACCOUNTANT IS NOTIFIED.

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization  WATER & SANITATION ROTARIAN ACTION GROUP	Employer identification number 20-8656760
FORM 990, PART VI, SECTION B, LINE 12C:	
CONFLICT OF INTEREST POLICY IS DISTRIBUTED ANNUALLY TO BOX	ARD FOR REVIEW AND
SIGNATURE.	
FORM 990, PART VI, SECTION C, LINE 19:	
GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON	REQUEST.