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CLIENT'S COPY

# TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING  
DECEMBER 31, 2021

<b>Prepared for</b>	FOOD & WATER WATCH 1616 P STREET NW 300 WASHINGTON, DC 20036
<b>Prepared by</b>	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930
<b>Amount due or refund</b>	NOT APPLICABLE
<b>Make check payable to</b>	NOT APPLICABLE
<b>Mail tax return and check (if applicable) to</b>	NOT APPLICABLE
<b>Return must be mailed on or before</b>	NOT APPLICABLE
<b>Special Instructions</b>	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

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

**A** For the **2021** calendar year, or tax year beginning and ending

<b>B</b> Check if applicable:	<b>C</b> Name of organization <b>FOOD &amp; WATER WATCH</b>	<b>D</b> Employer identification number <b>32-0160439</b>
<input type="checkbox"/> Address change	Doing business as	<b>E</b> Telephone number <b>(202) 683-2447</b>
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1616 P STREET NW 300</b>	
<input type="checkbox"/> Initial return	City or town, state or province, country, and ZIP or foreign postal code <b>WASHINGTON, DC 20036</b>	<b>G</b> Gross receipts \$ <b>23,184,018.</b>
<input type="checkbox"/> Final return/terminated	<b>F</b> Name and address of principal officer: <b>WENONAH HAUTER</b> <b>SAME AS C ABOVE</b>	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Amended return		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Application pending	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	If "No," attach a list. See instructions
<b>J</b> Website: ▶ <b>WWW.FOODANDWATERWATCH.ORG</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>2005</b> <b>M</b> State of legal domicile: <b>DC</b>

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>SEE PART III, LINE 1.</b>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>Activities &amp; Governance</b>	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>7</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>6</b>
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<b>129</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>848</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>
	<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 16,913,869.
<b>9</b> Program service revenue (Part VIII, line 2g)		0.	0.
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)		103,205.	97,605.
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		81,149.	58,542.
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		17,098,223.	21,548,788.
<b>Expenses</b>		<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	299,350.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	10,554,736.	10,721,758.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	454,902.	431,250.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>3,531,084.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,681,838.	5,085,692.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	15,990,826.	16,667,688.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	1,107,397.	4,881,100.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 14,732,909.	<b>End of Year</b> 17,415,353.
	<b>21</b> Total liabilities (Part X, line 26)	6,084,571.	3,929,902.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	8,648,338.	13,485,451.

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>WENONAH HAUTER, EXECUTIVE DIRECTOR</b>	Date	
	Type or print name and title		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>RICHARD J. LOCASTRO, CPA</b>	Preparer's signature <i>Richard J. Locastro</i>	Date <b>11/15/2022</b>
	Firm's name ▶ <b>GELMAN, ROSENBERG &amp; FREEDMAN</b>	Firm's EIN ▶ <b>52-1392008</b>	Check if self-employed <input type="checkbox"/> PTIN <b>P00288314</b>
	Firm's address ▶ <b>4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930</b>	Phone no. (301) <b>951-9090</b>	

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: FOOD & WATER WATCH CONDUCTS EXTENSIVE RESEARCH AND PUBLIC EDUCATION TO ENSURE THE FOOD AND WATER WE CONSUME IS SAFE, ACCESSIBLE AND SUSTAINABLY PRODUCED. SO WE CAN ALL ENJOY AND TRUST IN WHAT WE EAT AND DRINK, WE HELP PEOPLE TAKE CHARGE OF WHERE THEIR FOOD COMES FROM, KEEP

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [X] Yes [ ] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 5,121,714. including grants of \$ 238,132. ) (Revenue \$ ) FOOD - FOOD & WATER WATCH PROVIDES PUBLIC EDUCATION ABOUT HEALTH AND ENVIRONMENTAL ISSUES IN REGARD TO FOOD PRODUCTION THAT IS SUSTAINABLE, LOCAL, CHEMICAL-FREE, CLEARLY LABELED, FAMILY-FARMED, AND HUMANELY RAISED.

4b (Code: ) (Expenses \$ 3,904,500. including grants of \$ 190,856. ) (Revenue \$ ) WATER - THE WATER WATCH PROGRAM EDUCATES AND ADVOCATES ABOUT AFFORDABLE, PUBLICLY CONTROLLED DRINKING WATER, HEALTH AND ENVIRONMENTAL DANGERS OF BOTTLED WATER, HEALTH AND ENVIRONMENTAL DANGERS OF FRACKING AND FOSSIL FUELS, THE IMPORTANCE OF MOVING FROM FOSSIL FUELS TO SAFE, RENEWABLE ENERGY AND THE IMPORTANCE OF PUBLIC INVESTMENT IN INFRASTRUCTURE.

4c (Code: ) (Expenses \$ 2,325,096. including grants of \$ ) (Revenue \$ ) CLIMATE - WORKING AT THE STATE AND LOCAL LEVEL TO PASS MEANINGFUL LEGISLATION TO STOP CATASTROPHIC CLIMATE CHANGE BY ELIMINATING THE PRODUCTION AND USE OF FOSSIL FUELS WHICH MAKES PROGRESS TOWARDS BANNING FRACKING AND STOPPING NEW AND EXISTING FOSSIL FUEL INFRASTRUCTURE.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 11,351,310.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i> .....	X	
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> .....		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....	X	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....	X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....	X	
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	X	
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions .....	X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	X	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> 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	X	
<b>23</b> 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	X	
<b>24a</b> 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		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
<b>b</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		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> 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		X
<b>34</b> 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	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
<b>b</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		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	X	
<b>37</b> 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		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax filings, and organizational compliance.

**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 on Schedule O. See instructions.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	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 on Schedule O.		
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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 on Schedule O		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</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?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **SEE SCHEDULE O**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **▶**  
**CALAND BARNEY - (202) 683-2447**  
**1616 P STREET NW, 300, WASHINGTON, DC 20036**



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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) WENONAH HAUTER EXECUTIVE DIRECTOR	36.00 4.00	X		X				219,768.	0.	38,118.
(2) MICHELE MERKEL MANAGING DIRECTOR OF ADVOCACY	40.00 0.00				X			188,015.	0.	37,058.
(3) MALCOLM DOUG LAKEY DEVELOPMENT DIRECTOR	40.00 0.00				X			183,261.	0.	36,245.
(4) TAMARA TRIPP MANAGING DIRECTOR OF PHILANTHROPY	40.00 0.00					X		158,472.	0.	30,328.
(5) MICHAEL DOERRER MANAGING DIRECTOR OF COMMUNICATIONS	40.00 0.00					X		164,894.	0.	20,313.
(6) UZURA MARIE GARVIN FINANCE DIRECTOR	40.00 0.00			X				172,514.	0.	11,986.
(7) LANE BROOKS FUNDING ADVISOR	40.00 0.00					X		139,939.	0.	38,342.
(8) EMILY WURTH MANAGING DIRECTOR OF ORGANIZING	40.00 0.00					X		163,554.	0.	12,147.
(9) CALAND BARNEY CHIEF OPERATING OFFICER	40.00 0.00					X		142,340.	0.	12,832.
(10) MAUDE BARLOW CHAIR	0.50 0.00	X		X				0.	0.	0.
(11) MARY RICCI TREASURER	0.50 1.00	X		X				0.	0.	0.
(12) LISA SCHUBERT SECRETARY	0.50 0.00	X		X				0.	0.	0.
(13) RUDOLF AMENGA-ETEGO DIRECTOR	0.50 0.00	X						0.	0.	0.
(14) ELYZABETH PAREDO BELTRAN DIRECTOR	0.50 0.00	X						0.	0.	0.
(15) ROBERT HOWARTH DIRECTOR	0.50 0.00	X						0.	0.	0.



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>	115,860.				
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	2,006,800.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	19,269,981.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 215,802.				
	<b>h Total.</b> Add lines 1a-1f .....		21,392,641.				
	<b>Program Service Revenue</b>	<b>2 a</b> _____	<b>Business Code</b>				
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> _____							
<b>e</b> _____							
<b>f</b> All other program service revenue .....							
<b>g Total.</b> Add lines 2a-2f .....							
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		94,421.			94,421.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real	70,775.			
			(ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>	0.				
	<b>c</b> Rental income or (loss)	<b>6c</b>	70,775.				
	<b>d</b> Net rental income or (loss) .....		70,775.			70,775.	
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	1,624,400.	312.		
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	1,621,528.	0.			
	<b>c</b> Gain or (loss) .....	<b>7c</b>	2,872.	312.			
<b>d</b> Net gain or (loss) .....		3,184.			3,184.		
<b>8 a</b> Gross income from fundraising events (not including \$ 115,860. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>		800.				
<b>b</b> Less: direct expenses .....	<b>8b</b>	13,702.					
<b>c</b> Net income or (loss) from fundraising events .....		-12,902.			-12,902.		
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>	<b>11 a</b> OTHER REVENUE	<b>Business Code</b>	900099	669.		669.	
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....		669.				
<b>12 Total revenue.</b> See instructions .....		21,548,788.	0.	0.	156,147.		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	417,725.	417,725.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	11,263.	11,263.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	863,778.	528,798.	196,235.	138,745.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,439,561.	5,936,553.	681,298.	821,710.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	559,980.	437,367.	64,769.	57,844.
9 Other employee benefits	1,190,234.	937,270.	119,075.	133,889.
10 Payroll taxes	668,205.	521,081.	70,544.	76,580.
11 Fees for services (nonemployees):				
a Management				
b Legal	15,405.	-7,881.	23,286.	
c Accounting	82,179.	1,317.	80,769.	93.
d Lobbying	106,730.	101,000.	5,730.	
e Professional fundraising services. See Part IV, line 17	431,250.			431,250.
f Investment management fees	19,938.		19,938.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	182,192.	130,671.	50,853.	668.
12 Advertising and promotion	1,241.	1,141.		100.
13 Office expenses	1,388,364.	226,137.	31,279.	1,130,948.
14 Information technology	731,571.	559,975.	63,965.	107,631.
15 Royalties	215,383.		98,482.	116,901.
16 Occupancy	1,043,375.	786,279.	137,576.	119,520.
17 Travel	39,870.	29,899.	8,231.	1,740.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,402.	4,051.	1,115.	236.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	389,041.	304,561.	34,585.	49,895.
23 Insurance	108,998.	86,178.	10,608.	12,212.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a <b>UBI TAXES</b>	14,070.	260.	13,810.	
b <b>MAILHOUSE</b>	213,993.			213,993.
c <b>DUES &amp; SUBSCRIPTIONS</b>	149,440.	122,519.	705.	26,216.
d <b>STAFF DEVELOPMENT</b>	84,987.	66,688.	8,536.	9,763.
e All other expenses	293,513.	148,458.	63,905.	81,150.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	<b>16,667,688.</b>	<b>11,351,310.</b>	<b>1,785,294.</b>	<b>3,531,084.</b>
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	1,592,364.	919,930.	538,582.	133,852.

**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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	2,519,137.	<b>1</b>	3,378,655.
	<b>2</b> Savings and temporary cash investments .....	3,104,704.	<b>2</b>	4,221,612.
	<b>3</b> Pledges and grants receivable, net .....	735,789.	<b>3</b>	507,786.
	<b>4</b> Accounts receivable, net .....	1,163.	<b>4</b>	2,415.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	438,760.	<b>9</b>	425,562.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 3,111,397.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,790,972.		
	<b>11</b> Investments - publicly traded securities .....	1,674,991.	<b>10c</b>	1,320,425.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	4,767,635.	<b>11</b>	6,362,241.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>12</b>	
	<b>14</b> Intangible assets .....		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	1,490,730.	<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	14,732,909.	<b>15</b>	1,196,657.	
		<b>16</b>	17,415,353.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,861,182.	<b>17</b>	1,850,975.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	2,006,800.	<b>24</b>	
	<b>25</b> 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 .....	2,216,589.	<b>25</b>	2,078,927.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	6,084,571.	<b>26</b>	3,929,902.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	8,517,088.	<b>27</b>	11,327,534.
	<b>28</b> Net assets with donor restrictions .....	131,250.	<b>28</b>	2,157,917.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> <b>Total net assets or fund balances</b> .....	8,648,338.	<b>32</b>	13,485,451.
<b>33</b> <b>Total liabilities and net assets/fund balances</b> .....	14,732,909.	<b>33</b>	17,415,353.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,548,788.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,667,688.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,881,100.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,648,338.
5	Net unrealized gains (losses) on investments	5	-43,987.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	13,485,451.

**Part XII Financial Statements and Reporting**

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis	X	
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 on Schedule O.	X	
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? _____		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2021)



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	16,684,205.	17,035,146.	17,764,798.	16,986,718.	21,392,641.	89,863,508.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>4 Total.</b> Add lines 1 through 3 .....	16,684,205.	17,035,146.	17,764,798.	16,986,718.	21,392,641.	89,863,508.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						1,588,649.
<b>6 Public support.</b> Subtract line 5 from line 4.						88,274,859.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	16,684,205.	17,035,146.	17,764,798.	16,986,718.	21,392,641.	89,863,508.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	91,676.	96,869.	113,491.	93,869.	165,196.	561,101.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	4,829.	36,709.	14,564.	86,188.	669.	142,959.
<b>11 Total support.</b> Add lines 7 through 10						90,567,568.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	18,000.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)).....	<b>14</b>	97.47 %
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	98.17 %
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	▶ <input checked="" type="checkbox"/>	
<b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	▶ <input type="checkbox"/>	
<b>17a 10% -facts-and-circumstances test - 2021.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....	▶ <input type="checkbox"/>	
<b>b 10% -facts-and-circumstances test - 2020.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....	▶ <input type="checkbox"/>	
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	▶ <input type="checkbox"/>	



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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c 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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

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

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
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	<b>Adjusted Net Income</b> (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	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

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

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

**Part VI**

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

Multiple horizontal lines for supplemental information.



**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

**FOOD & WATER WATCH**

Employer identification number

**32-0160439**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).



Name of organization  <b>FOOD &amp; WATER WATCH</b>	Employer identification number  <b>32-0160439</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SILICON VALLEY COMMUNITY FOUNDATION  2440 W EL CAMINO REAL, #300  MOUNTAIN VIEW, CA 94040	\$ 6,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	GREATER KANSAS CITY COMMUNITY FOUNDATION  1055 BROADWAY BLVD, #130  KANSAS CITY, KS 64105	\$ 4,870,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	COLUMBUS FOUNDATION  1234 E BROAD STREET  COLUMBUS, OH 43205	\$ 2,150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	SMALL BUSINESS ADMINISTRATION  409 3RD STREET, SW  WASHINGTON, DC 20416	\$ 2,006,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	FIDELITY CHARITABLE  200 SEAPORT BLVD MZ NM43A  BOSTON, MA 02210	\$ 1,289,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	SCHMIDT FAMILY FOUNDATION  555 BRYANT STREET  PALO ALTO, CA 94301	\$ 750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>FOOD &amp; WATER WATCH</b>	Employer identification number  <b>32-0160439</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization <b>FOOD &amp; WATER WATCH</b>	Employer identification number <b>32-0160439</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2021**

Department of the Treasury  
Internal Revenue Service

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

**Open to Public Inspection**

**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**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>FOOD &amp; WATER WATCH</b>	Employer identification number <b>32-0160439</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990) 2021

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	149,199.													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) .....	85,819.													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) .....	235,018.													
<b>d</b>	Other exempt purpose expenditures .....	16,432,670.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) .....	16,667,688.													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	983,384.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) .....	245,846.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- .....	0.													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- .....	0.													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
<b>2a</b> Lobbying nontaxable amount	891,259.	923,566.	949,541.	983,384.	3,747,750.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					5,621,625.
<b>c</b> Total lobbying expenditures	230,153.	477,146.	254,984.	235,018.	1,197,301.
<b>d</b> Grassroots nontaxable amount	222,815.	230,892.	237,385.	245,846.	936,938.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,405,407.
<b>f</b> Grassroots lobbying expenditures	97,316.	230,725.	64,392.	149,199.	541,632.

**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)).**

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
<b>1</b> 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:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures. See instructions .....	<b>5</b>	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization **FOOD & WATER WATCH** Employer identification number **32-0160439**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....	1	
2 Aggregate value of contributions to (during year) .....	16,640.	
3 Aggregate value of grants from (during year) .....	6,951.	
4 Aggregate value at end of year .....	71,420.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

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

Schedule D (Form 990) 2021

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  \_\_\_\_\_ %
  - b Permanent endowment  \_\_\_\_\_ %
  - c Term endowment  \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes    | No |
|--|--------|----|
| (i) Unrelated organizations  | 3a(i)  |    |
| (ii) Related organizations   | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,565,219.	478,588.	1,086,631.
d Equipment		516,937.	465,471.	51,466.
e Other		1,029,241.	846,913.	182,328.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,320,425.



**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1) DUE FROM RELATED PARTY	1,015,785.
(2) SECURITY DEPOSITS	172,472.
(3) OTHER CURRENT ASSETS	8,400.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	1,196,657.

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FUNDS HELD ON BEHALF OF OTHERS	1,273.
(3) DEFERRED RENT	2,072,154.
(4) SECURITY DEPOSITS	5,500.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	2,078,927.

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	21,503,253.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	-43,987.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	5,000.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	13,702.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-25,285.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	21,528,538.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	19,938.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	312.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	20,250.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	21,548,788.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	16,666,140.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	5,000.
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	13,702.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	18,702.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	16,647,438.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	19,938.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	312.
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	20,250.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	16,667,688.

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

FOR THE YEAR ENDED DECEMBER 31, 2021, THE ORGANIZATION HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

**PART XI, LINE 2D - OTHER ADJUSTMENTS:**

SPECIAL EVENT EXPENSES RECORDED AS AN EXPENSE ON THE 13,702.  
AUDITED FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON  
FORM 990, PART VIII, LINE 8B.

**Part XIII** Supplemental Information (continued)

PART XI, LINE 4B - OTHER ADJUSTMENTS:

GAIN ON DISPOSAL OF EQUIPMENT RECORDED AS AN EXPENSE ON THE 312.  
AUDITED FINANCIAL STATEMENTS AND REPORTED WITH REVENUE ON FORM  
990, PART VIII, LINE 7C.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES RECORDED AS AN EXPENSE ON THE 13,702.  
AUDITED FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE ON  
FORM 990, PART VIII, LINE 8B.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

GAIN ON DISPOSAL OF EQUIPMENT RECORDED AS AN EXPENSE ON THE 312.  
AUDITED FINANCIAL STATEMENTS AND REPORTED WITH REVENUE ON FORM  
990, PART VIII, LINE 7C.

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

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

FOOD & WATER WATCH

Employer identification number

32-0160439

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  Yes  No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in 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
EUROPE	1	4	PROGRAM SERVICES	WORK WITH COALITION PARTNERS TO TRACK GLOBAL IMPACT	234,971.
<b>3 a</b> Subtotal .....	1	4			234,971.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	1	4			234,971.

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

Schedule F (Form 990) 2021





**Part IV Foreign Forms**

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

**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.

Multiple horizontal lines for supplemental information.



**SCHEDULE G  
(Form 990)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

**2021**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

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

Name of the organization: **FOOD & WATER WATCH** Employer identification number: **32-0160439**

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a  Mail solicitations
  - b  Internet and email solicitations
  - c  Phone solicitations
  - d  In-person solicitations
  - e  Solicitation of non-government grants
  - f  Solicitation of government grants
  - g  Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
O'BRIEN GARRETT - 1133 19TH STREET, NW #300, WASHINGTON, MISSIONWIRED - 650 MASSACHUSETTS AVE NW,	DIRECT MAIL		X	59,902.	158,072.	-98,170.
	DIGITAL ADVOCACY		X	59,902.	273,178.	-213,276.
<b>Total</b>				119,804.	431,250.	-311,446.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.  
AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		ANNUAL ANNIVERSARY (event type)	(event type)	NONE (total number)	
Revenue	1	Gross receipts	116,660.		116,660.
	2	Less: Contributions	115,860.		115,860.
	3	Gross income (line 1 minus line 2)	800.		800.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes	7,705.		7,705.
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	5,997.		5,997.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-12,902.

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

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

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
 

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_  
 Gaming manager compensation ▶ \$ \_\_\_\_\_  
 Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: O'BRIEN GARRETT

(I) ADDRESS OF FUNDRAISER: 1133 19TH STREET, NW #300, WASHINGTON, DC 20005

(I) NAME OF FUNDRAISER: MISSIONWIRED

(I) ADDRESS OF FUNDRAISER: 650 MASSACHUSETTS AVE NW, WASHINGTON, DC 20001



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **FOOD & WATER WATCH** Employer identification number **32-0160439**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
FOOD AND WATER ACTION FUND 1616 P STREET, #400 WASHINGTON, DC 20003	32-0160436	501(C)(4)	125,000.	0.			GRASSROOTS LOBBYING
TRADE JUSTICE EDUCATION FUND PO BOX 77043 WASHINGTON, DC 20013	84-3810105	501(C)(3)	245,000.	0.			PASS THRU GRANT
NY COMMUNITIES ORGANIZING FUND, INC - 470 VANDERBILT AVE 9TH FL - BROOKLYN, NY 20013	27-2332649	501(C)(3)	47,500.	0.			STOP FRACKING

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **2.**

**3** Enter total number of other organizations listed in the line 1 table **1.**

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

Schedule I (Form 990) 2021

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
GRASSROOTS GRANTS	5	10,000.	0.		
2021 SENTINEL AWARD SPONSORSHIP FOR ENVIRONMENTAL STEWARDSHIP	1	250.	0.		
2021 ONE EARTH FILM FESTIVAL SPONSORSHIP	1	500.	0.		
HONORING MARSHAL - ELIZABETH SCHUSTERS HUSBAND	1	513.	0.		

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

GRANT BUDGETS ARE CREATED EACH YEAR BASED ON STAFF TIME ALLOCATIONS FOR DIFFERENT ACTIVITIES AS LAID OUT IN INDIVIDUAL WORKPLANS. STAFF MEET REGULARLY WITH SUPERVISORS TO UPDATE WORKPLANS, AND ANY CHANGES (WITH A VARIANCE +/- 10%) ARE REPORTED TO FINANCE AND INTERNAL GRANT TEAM. FINANCE CREATES FINANCIAL REPORT SHOWING BUDGET SUBMITTED WITH GRANT V. ACTUALS AT THE END OF THE GRANT TERM, AS REQUIRED BY FOUNDATIONS.

THERE WAS A GRANT MADE TO A POLITICAL ORGANIZATION HOWEVER, THIS GRANT WAS

**Part IV** Supplemental Information

MONITORED AND USED SPECIFICALLY FOR A BALLOT MEASURE AND NOT FOR POLITICAL  
ACTIVITY.

Multiple horizontal lines for supplemental information.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization

**FOOD & WATER WATCH**

Employer identification number

**32-0160439**

**Part I Questions Regarding Compensation**

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

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

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

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

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

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                     | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input type="checkbox"/> Compensation survey or study                               |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2021



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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WENONAH HAUTER EXECUTIVE DIRECTOR	(i)	219,768.	0.	0.	26,000.	12,118.	257,886.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MICHELE MERKEL MANAGING DIRECTOR OF ADVOCACY	(i)	188,015.	0.	0.	26,000.	11,058.	225,073.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MALCOLM DOUG LAKEY DEVELOPMENT DIRECTOR	(i)	183,261.	0.	0.	24,000.	12,245.	219,506.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) TAMARA TRIPP MANAGING DIRECTOR OF PHILANTHROPY	(i)	158,472.	0.	0.	19,500.	10,828.	188,800.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MICHAEL DOERRER MANAGING DIRECTOR OF COMMUNICATIONS	(i)	164,894.	0.	0.	8,068.	12,245.	185,207.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) UZURA MARIE GARVIN FINANCE DIRECTOR	(i)	172,514.	0.	0.	1,200.	10,786.	184,500.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) LANE BROOKS FUNDING ADVISOR	(i)	139,939.	0.	0.	26,000.	12,342.	178,281.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) EMILY WURTH MANAGING DIRECTOR OF ORGANIZING	(i)	163,554.	0.	0.	1,200.	10,947.	175,701.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) CALAND BARNEY CHIEF OPERATING OFFICER	(i)	142,340.	0.	0.	1,300.	11,532.	155,172.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **FOOD & WATER WATCH** Employer identification number **32-0160439**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	10	215,802.FMV	
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( )				
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** **0**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2021

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

SCHEDULE M, PART I, COLUMN (B):

THE AMOUNT IN COLUMN (B) REPRESENTS THE NUMBER OF CONTRIBUTIONS.

SCHEDULE M, LINE 32B:

THE ORGANIZATION USES CONSIGNMENT SERVICES TO SOLICIT, PROCESS, AND SELL NON-CASH CONTRIBUTIONS.

**SCHEDULE O**  
**(Form 990)**

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 Form 990-EZ.

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

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

FOOD & WATER WATCH

Employer identification number

32-0160439

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

CLEAN, AFFORDABLE, PUBLIC TAP WATER FLOWING FREELY TO OUR HOMES,  
PROTECT THE ENVIRONMENTAL QUALITY OF OCEANS, FORCE GOVERNMENT TO DO ITS  
JOB PROTECTING CITIZENS, AND EDUCATE ABOUT THE IMPORTANCE OF KEEPING  
SHARED RESOURCES INCLUDING OCEANS AND WATER UNDER PUBLIC CONTROL.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

THE ORGANIZATION BEGAN THE CLIMATE PROGRAM DURING THE YEAR. SEE PART  
II, LINE 4C FOR ADDITIONAL INFORMATION.

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

THE FORM 990 WAS PREPARED AND REVIEWED BY OUTSIDE ACCOUNTANTS. THE BOARD OF  
DIRECTORS REVIEWED THE FORM 990 PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS REVIEWS THE CONFLICT OF INTEREST POLICY ANNUALLY. IF  
THERE IS A POTENTIAL CONFLICT OF INTEREST, THE PERSON WITH THE CONFLICT IS  
EXCLUDED FROM THE DISCUSSION AND APPROVAL OF SUCH TRANSACTIONS. THE BOARD  
OR A DULY CONSTITUTED COMMITTEE DETERMINES IF A CONFLICT EXISTS AND IN THE  
CASE OF AN EXISTING CONFLICT, WHETHER THE CONTEMPLATED TRANSACTION MAY BE  
AUTHORIZED AS JUST, FAIR, AND REASONABLE TO FOOD & WATER WATCH. THE  
DECISION OF THE BOARD OR DULY CONSTITUTED COMMITTEE ON THESE MATTERS RESTS  
IN THEIR SOLE DISCRETION, AND THEIR CONCERN MUST BE THE WELFARE OF FOOD &  
WATER WATCH AND THE ADVANCEMENT OF ITS PURPOSE.

FORM 990, PART VI, SECTION B, LINE 15:

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization FOOD & WATER WATCH	Employer identification number 32-0160439
--	--

COMPENSATION FOR THE EXECUTIVE DIRECTOR AND TOP MANGEMENT IS APPROVED BY THE BOARD OF DIRECTORS. COMPENSATION IS PART OF THE OPERATING BUDGET APPROVED BY THE BOARD MEMBERS AND IS BASED ON COMPARABLE DATA OF EMPLOYEE COMPENSATION AT NON PROFIT ORGANIZATIONS THAT ARE SIMILAR IN SIZE AND MISSION TO FOOD & WATER WATCH. THE COMPENSATION FOR HIGHEST PAID EMPLOYEES IS APPROVED BY THE BOARD OF DIRECTORS BASED ON JOB PERFORMANCE EVALUATIONS AND MANAGEMENT'S RECOMMENDATION. THE LAST COMPENSATION REVIEW TOOK PLACE DECEMBER 2019.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL, AR, CA, FL, GA, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, UT, VA  
WV, WI

FORM 990, PART VI, SECTION C, LINE 19:  
FOOD & WATER WATCH MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTERET POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.

**Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.

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

Name of the organization **FOOD & WATER WATCH** Employer identification number **32-0160439**

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
FOOD & WATER ACTION FUND - 32-0160436 1616 P STREET, NW SUITE 300 WASHINGTON, DC 20036	ADVOCATE FOR ISSUES OF SAFE FOOD, WATER AND A LIVEABLE CLIMATE.	DISTRICT OF COLUMBIA	501(C)(4)		N/A		X

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

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

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

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



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

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

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....	X	
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....	X	
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) FOOD & WATER ACTION FUND	N	27,717.	CASH
(2) FOOD & WATER ACTION FUND	O	124,388.	CASH
(3) FOOD & WATER ACTION FUND	Q	50,728.	CASH
(4) FOOD & WATER ACTION FUND	B	125,000.	CASH
(5) FOOD & WATER ACTION FUND	D	785,785.	ACUTAL
(6)			



**Part VII** Supplemental Information

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

Lined area for providing supplemental information.

# 2021 TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM 199

FOR THE YEAR ENDING

DECEMBER 31, 2021

<b>Prepared for</b>	FOOD & WATER WATCH 1616 P STREET NW 300 WASHINGTON, DC 20036
<b>Prepared by</b>	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930
<b>To be signed and dated by</b>	NOT APPLICABLE
<b>Amount of tax</b>	Total tax \$ 0.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 NO PMT REQUIRED \$
<b>Overpayment</b>	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
<b>Make check payable to</b>	NOT APPLICABLE
<b>Mail tax return and check (if applicable) to</b>	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE FTB, AND NO FURTHER ACTION IS REQUIRED. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE FTB.
<b>Return must be mailed on or before</b>	NOT APPLICABLE
<b>Special Instructions</b>	

# California Exempt Organization Annual Information Return

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) \_\_\_\_\_, and ending (mm/dd/yyyy) \_\_\_\_\_

Corporation/Organization name: **FOOD & WATER WATCH** California corporation number: **2940331**

Additional information. See instructions. FEIN: **32-0160439**

Street address (suite or room): **1616 P STREET NW, NO. 300** PMB no. \_\_\_\_\_

City: **WASHINGTON** State: **DC** ZIP code: **20036**

Foreign country name \_\_\_\_\_ Foreign province/state/country \_\_\_\_\_ Foreign postal code \_\_\_\_\_

**A** First return  Yes  No

**B** Amended return  Yes  No

**C** IRC Section 4947(a)(1) trust  Yes  No

**D** Final information return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
 Enter date: (mm/dd/yyyy) \_\_\_\_\_

**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other

**F** Federal return filed? (1)  990T (2)  990PF (3)  Sch H (990) (4)  Other 990 series

**G** Is this a group filing? See instructions  Yes  No

**H** Is this organization in a group exemption  Yes  No  
 If "Yes," what is the parent's name? \_\_\_\_\_

**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No

**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No

**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
 If "Yes," enter the gross receipts from nonmember sources \$ \_\_\_\_\_

**L** Is the organization a limited liability company?  Yes  No

**M** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No

**N** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No

**O** Is federal Form 1023/1024 pending?  Yes  No  
 Date filed with IRS \_\_\_\_\_

**Part I Complete Part I unless not required to file this form. See General Information B and C.**

Receipts and Revenues	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	1,791,377	00	
	2	Gross dues and assessments from members and affiliates	2		00	
	3	Gross contributions, gifts, grants, and similar amounts received <b>STMT 1</b>	3	21,392,641	00	
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. <b>STMT 2</b> <b>This line must be completed.</b> If the result is less than \$50,000, see General Information B	4	23,184,018	00	
	5	Cost of goods sold	5		00	
	6	Cost or other basis, and sales expenses of assets sold	6	1,621,528	00	
	7	Total costs. Add line 5 and line 6	7	1,621,528	00	
	8	Total gross income. Subtract line 7 from line 4	8	21,562,490	00	
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	16,681,389	00	
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	4,881,101	00	
Filing Fee	11	Total payments	11		00	
	12	Use tax. See General Information K	12		00	
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00	
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00	
	15	Penalties and interest. See General Information J	15		00	
	16	<b>Balance due.</b> Add line 12 and line 15. Then subtract line 11 from the result	16		00	
Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.					
	Signature of officer	Title <b>EXECUTIVE DIRE</b>	Date	Telephone		
Paid Preparer's Use Only	Preparer's signature	Date 11/15/2022	Check if self-employed <input type="checkbox"/>	PTIN <b>P00288314</b>		
	Firm's name (or yours, if self-employed) and address	<b>GELMAN, ROSENBERG &amp; FREEDMAN</b>			Firm's FEIN <b>52-1392008</b>	
	<b>4550 MONTGOMERY AVE SUITE 800N</b>			Telephone <b>(301) 951-9090</b>		
	<b>BETHESDA, MD 20814-2930</b>					
May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						

**Part II** Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

128951 01-19-22

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1	800	00	
	2	Interest	•	2	94,421	00	
	3	Dividends	•	3		00	
	4	Gross rents	•	4	70,775	00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See instructions)	STATEMENT 3 •	6	1,624,712	00	
	7	Other income	SEE STATEMENT 4 •	7	669	00	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8	1,791,377	00	
	9	Contributions, gifts, grants, and similar amounts paid	STATEMENT 5 •	9	428,988	00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees	SEE STATEMENT 6 •	11	863,777	00	
	12	Other salaries and wages	•	12	7,439,561	00	
	<b>Expenses and Disbursements</b>	13	Interest	•	13		00
		14	Taxes	•	14	682,275	00
		15	Rents	•	15	1,043,375	00
		16	Depreciation and depletion (See instructions)	•	16	389,041	00
		17	Other expenses and disbursements	SEE STATEMENT 7 •	17	5,834,372	00
		18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18	16,681,389	00

Schedule L Balance Sheet	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash		5,623,841		7,600,267
2 Net accounts receivable		1,163		2,415
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments STMT 8		4,767,635		6,362,241
10 a Depreciable assets	3,249,694		3,111,397	
b Less accumulated depreciation	( 1,574,703 )	1,674,991	( 1,790,972 )	1,320,425
11 Land				
12 Other assets STMT 9		2,665,279		2,130,005
13 <b>Total assets</b>		14,732,909		17,415,353
<b>Liabilities and net worth</b>				
14 Accounts payable		1,861,182		1,850,975
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities STMT 10		4,223,389		2,078,927
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		8,648,338		13,485,451
22 <b>Total liabilities and net worth</b>		14,732,909		17,415,353

Schedule M-1 Reconciliation of income per books with income per return			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.			
1 Net income per books	•	4,837,114	7 Income recorded on books this year not included in this return. Attach schedule *
2 Federal income tax	•		• -43,987
3 Excess of capital losses over capital gains	•		8 Deductions in this return not charged against book income this year.
4 Income not recorded on books this year. Attach schedule	•		•
5 Expenses recorded on books this year not deducted in this return. Attach schedule	•		9 Total. Add line 7 and line 8
6 Total. Add line 1 through line 5	•	4,837,114	• -43,987
			10 Net income per return.
			Subtract line 9 from line 6
			4,881,101

\* SEE STATEMENT

CA 199 CASH CONTRIBUTIONS STATEMENT 1  
 INCLUDED ON PART I, LINE 3

CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
SILICON VALLEY COMMUNITY FOUNDATION	2440 W EL CAMINO REAL, #300 MOUNTAIN VIEW, CA 94040	12/31/21	6,500,000.
GREATER KANSAS CITY COMMUNITY FOUNDATION	1055 BROADWAY BLVD, #130 KANSAS CITY, KS 64105	12/31/21	4,870,000.
COLUMBUS FOUNDATION	1234 E BROAD STREET COLUMBUS, OH 43205	12/31/21	2,150,000.
SMALL BUSINESS ADMINISTRATION	409 3RD STREET, SW WASHINGTON, DC 20416	12/31/21	2,006,800.
FIDELITY CHARITABLE	200 SEAPORT BLVD MZ NM43A BOSTON, MA 02210	12/31/21	1,289,000.
SCHMIDT FAMILY FOUNDATION	555 BRYANT STREET PALO ALTO, CA 94301	12/31/21	750,000.
PARK FOUNDATION	140 SENECA WAY, #100 ITHACA, NY 14850	12/31/21	310,000.
ROCKEFELLER'S BROTHERS FUND	475 RIVERSIDE DRIVE, #900 NEW YORK, NY 10115	12/31/21	340,000.
HEINZ FOUNDATION	625 LIBERTY AVENUE, 30TH FL PITTSBURGH, PA 15222	12/31/21	275,000.
CHICAGO COMMUNITY FOUNDATION	225 N. MICHIGAN AVENUE, NO. 2200 CHICAGO, IL 60601	12/31/21	150,000.
LPL FINANCIAL	75 STATE ST FL 22 BOSTON, MA 02109	12/31/21	173,939.
SCHWAB CHARITABLE	211 MAIN STREET SAN FRANCISCO, CA 94105	12/31/21	161,927.
BUILDERS INITIATIVE	PO BOX 2030 BENTONVILLE, AR 72712	12/31/21	150,000.
TORTUGA FOUNDATION	380 RIVERSIDE DRIVE, 1-D NEW YORK, NY 10025	12/31/21	60,000.
CARROLL PETRIE FOUNDATION	28 LIBERTY STREET NEW YORK, NY 10005	12/31/21	100,000.

## FOOD &amp; WATER WATCH

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J SPERLINGTON FOUNDATION	5115 N DYSART ROAD, #202 LITCHFIELD PARK, AZ 85340	12/31/21	100,000.
NORTHERN TRUST CHARITABLE GIVING PROGRAM	PO BOX 803878 CHICAGO, IL 60680	12/31/21	100,000.
EUROPEAN CLIMATE FOUNDATION	RIVIERVISMART 5 THE HAGUE NETHERLANDS 2513 AM	12/31/21	100,000.
FUNDERS COLLABORATIVE ON OIL & GAS	475 RIVERSIDE DRIVE, #900 NEW YORK, NY 10115	12/31/21	90,000.
WALLACE GLOBAL FUND	2040 S STREET, NW WASHINGTON, DC 20009	12/31/21	75,000.
LAUREN STEINER	1725 CLEAR VIEW DR BEVERLY HILLS, CA 90210	12/31/21	60,000.
MARGARET ANN JOHNSON SRUBEK	21125 CARDINAL POND TERR, #402 ASHBURN, VA 20147	12/31/21	60,000.
M. SHAPIRO	65 SHADY LANE DR LAKEWOOD, NJ 08701	12/31/21	50,229.
QUINN FOUNDATION	11460 TOMAHAWK CREEK PKWY, STE 300 LEAWOOD, KS 66211	12/31/21	50,000.
CLIMATE IMPERATIVE FOUNDATION	98 BATTERY ST, STE. 202 SAN FRANCISCO, CA 94111	12/31/21	50,000.
TAITANCHI FOUNDATION	675 SEMINOLE AVE NE NO 112 ATLANTA, GA 30307	12/31/21	50,000.
NANCY NORDHOFF	P.O. BOX 306 LANGLEY, WA 98260	12/31/21	50,000.
CLYDE LAWRENCE SMITH	2125 BENTON BLVD KANSAS CITY, MO 64127	12/31/21	50,000.
WALTER MILLER	PO BOX 600 VINEBURG, CA 95487	12/31/21	45,000.
NATIONAL PHILANTHROPIC TRUST	165 TOWNSHIP LINE RD, SUITE 1200 JENKINTOWN, PA 19046	12/31/21	42,500.
ABELL FOUNDATION	111 S CALVERT STREET BALTIMORE, MD 21202	12/31/21	40,000.
KERRY MADIGAN	1219 COUNTY ROAD 83 PINE PLAINS, NY 12567	12/31/21	40,000.
CLOUD MOUNTAIN FOUNDATION	120 KELLOGG ROAD SHEFFIELD, MA 01257	12/31/21	30,000.
MCCUNE FOUNDATION	345 EAST ALAMEDA STREET SANTA FE, NM 87501	12/31/21	30,000.



## FOOD &amp; WATER WATCH

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ROBERT & TINA SOHN FOUNDATION	825 3RD AVE FL 20 NEW YORK, NY 10022-9541	12/31/21	15,000.
AMERICAN ENDOWMENT FOUNDATIONS	5700 DARROW RD, STE 118 HUDSON, OH 44236	12/31/21	29,050.
FRANCES POSEL	1315 KNOX AVENUE BELLINGHAM, WA 98225	12/31/21	25,000.
MARISLA FOUNDATION	668 N COAST HIGHWAY PMB 1400 LAGUNA BEACH, CA 92651	12/31/21	25,000.
ALLEN HOWARD	21 BALLANTINE LN SKILLMAN, NJ 08558	12/31/21	25,000.
ANN SRUBEK	21125 CARDINAL POND TERR #402 ASHBURN, VA 20147	12/31/21	25,000.
B. EILISH	1616 P STREET, NW, SUITE 300 WASHINGTON, DC 20036	12/31/21	25,000.
RUTHANNE SHIPINER	1616 P STREET, NW, SUITE 300 WASHINGTON, DC 20036	12/31/21	25,000.
VANGUARD CHARITABLE	PO BOX 9509 WARWICK, RI 02889	12/31/21	24,950.
MORGAN STANLEY GIFT FUND	2000 WESTCHESTER AVE PURCHASE, NY 10577	12/31/21	23,350.
BANK OF AMERICA CHARITABLE FOUNDATION	100 N TRYON ST NC1-007-27-03 CHARLOTTE, NC 28255	12/31/21	20,002.
FINE & GREENWALD FOUNDATION	19501 BISCAYNE BLVD #400 AVENTURA, FL 33180	12/31/21	20,000.
KAY FAMILY FOUNDATION	20300 SENECA MEADOWS PKWY SUITE 202 GERMANTOWN, MD 20876	12/31/21	20,000.
SHEILA, DAVE, & SHERRY GOLD FOUNDATION	3940 LAUREL CANYON BLVD #139 STUDIO CITY, CA 91604	12/31/21	10,000.
SOLLEE FAMILY FOUNDATION	FOUNDATION SOURCE 501, SILVERSIDE RD WILMINGTON, DE 19809	12/31/21	10,000.
COMMUNITY FOUNDATION FOR ALLEGHENIES	216 FRANKLIN ST, SUITE 400 JOHNSTOWN, PA 15901	12/31/21	18,000.
ENVIRONMENTAL ENDOWMENT FOR NJ	PO BOX 3446 TRENTON, NJ 08619	12/31/21	18,000.
B. TRAINER	PO BOX 629 CARMEL VALLEY, CA 93924	12/31/21	17,552.

## FOOD &amp; WATER WATCH

32-0160439

FUND FOR CHANGE	101 WEST MOUNT ROYAL AVE BALTIMORE, MD 21201	12/31/21	15,000.
ROBERT D. MCNEIL	301 FIVE POINT ROAD COATESVILLE, PA 19320	12/31/21	15,000.
ZANVLY & ISABELLE KRIEGER FUND	101 WEST MOUNT ROYAL AVE BALTIMORE, MD 21201	12/31/21	15,000.
FINNEAS O'CONNELL CHARITABLE FUND	1616 P STREET, NW, SUITE 300 WASHINGTON, DC 20036	12/31/21	15,000.
ESTATE OF ELEANOR BOGERT	607 HILLSIDE XING POMPTON PLAINS, NJ 07444	12/31/21	13,514.
GARFIELD FOUNDATION	204 SPRING STREET MARION, MA 02738	12/31/21	7,500.
FIDELITY BROKERAGE SERVICES, LLC	900 SALEM STREET SMITHFIELD, RI 02917	12/31/21	11,201.
PUBLIC JUSTICE FOUNDATION	1620 L ST NW STE 630 WASHINGTON, DC 20036	12/31/21	10,125.
MAD ROSE FOUNDATION, INC.	1219 ROUTE 83 PINE PLAINS, NY 12567	12/31/21	10,000.
EDUCATION FOUNDATION OF AMERICA	1923 E 47TH ST TULSA, OK 74105	12/31/21	10,000.
CULTURAL VISION FUND	4041 MACARTHUR BLVD, #150 NEWPORT BEACH, CA 92660	12/31/21	10,000.
PRENTICE FOUNDATION	360 ISLAND CREEK DR. VERO BEACH, FL 32963	12/31/21	10,000.
WELLINGTON SHIELDS & CO, LLC	ONE NORTH JEFFERSON ST. LOUIS, MO 63103	12/31/21	10,000.
TAUBERT MEMORIAL FOUNDATION	PO BOX 700 COTTAGE GROVE, OR 97424	12/31/21	10,000.
TIDES FOUNDATION	PO BOX 889389 LOS ANGELES, CA 90088	12/31/21	10,000.
ELIZABETH (CORDY) BECKSTEAD	3804 W EAGLEROCK DRIVE WENATCHEE, WA 98801	12/31/21	10,000.
J. BRAVERMAN	1616 P STREET, NW, SUITE 300 WASHINGTON, DC 20036	12/31/21	10,000.
M. MCKINLEY	31 MOSER ST NORTHAMPTON, MA 01060	12/31/21	10,000.

## FOOD &amp; WATER WATCH

32-0160439

CHARLES SCHWAB	9875 SCHWAB WAY LONE TREE, CO 80124	12/31/21	9,700.
NETWORK FOR GOOD	1140 CONNECTICUT AVE NW, STE 700 WASHINGTON, DC 20036	12/31/21	7,650.
FORREST C. & FRANCES H. LATTNER FOUNDATION	1375 GATEWAY BLVD, STE 55 BOYNTON BEACH, FL 33426	12/31/21	6,175.
BIG A, LLC	31 LORRIE LANE PRINCETON JCT, NJ 08550-5112	12/31/21	6,000.
KAREN AZARCHI	33 QUAKER ROAD PRINCETON JUNCTION, NJ 08550	12/31/21	6,000.
CAMBRIDGE CHARITABLE GIFT	1374 MASSACHUSETTS AVE CAMBRIDGE, MA 02138	12/31/21	5,000.
ANNE POWELL RILEY	2363 TREMONT RD COLUMBUS, OH 43221	12/31/21	5,000.
CSP FOUNDATION	33 POND AVE # B1219 BROOKLINE, MA 02445-7163	12/31/21	5,000.
FRANKLIN CONKLIN FOUNDATION	6015 NW ROSEWOOD DR CORVALLIS, OR 97330	12/31/21	5,000.
MAZOR FOUNDATION	3601 CONNECTICUT AVE NW APT 700B WASHINGTON, DC 20008-2467	12/31/21	5,000.
OREGON COMMUNITY	1221 SW YAMHILL STREET, #100 PORTLAND, OR 97205	12/31/21	5,000.
A. COVERT	385 CHESTNUT HILL, APT. 612 BRIGHTON, MA 02135	12/31/21	5,000.
C. HANNAFORD	5718 WAINWRIGHT AVE ROCKVILLE, MD 20851	12/31/21	5,000.
EUGENE & DORTHY MARTIN FOUNDATION	5002 WEDGEFIELD ROAD GRANDBURY, TX 76049	12/31/21	5,000.
MADELINE GLICK	22 BERRYBUSH LANE HASTINGS ON HUDSON, NY 10706	12/31/21	5,000.
PNC INSTITUTIONAL ASSET MANAGEMENT	116 ALLEGHENY CENTER MALL PITTSBURGH, PA 15212	12/31/21	5,000.
SARAH A. DELANEY	3 BATTERY WHARF BOSTON, MA 02109	12/31/21	5,000.
TILMAN ELSON DODD, JR.	320 D STREET CAYUCOS, CA 93430	12/31/21	5,000.
TOTAL INCLUDED ON LINE 3			<u>21,078,164.</u>

CA 199 NONCASH CONTRIBUTIONS STATEMENT 2  
 INCLUDED ON PART I, LINE 3

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
CHARLES NUNZIO	45 ALPINE DRIVE LINCOLN PARK, NJ 07035		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
200 SHARES OF VANGUARD	01/26/21	24,591.	24,591.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
ELIZABETH A. KELLEY	91 CENTRAL PARK WEST 32C NEW YORK, NY 10023		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
75 SHARES OF APPLE	11/19/21	11,299.	16,443.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
ELIZABETH A. KELLEY	91 CENTRAL PARK WEST 32C NEW YORK, NY 10023		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
120 SHARES OF AMERICAN	07/26/21	5,144.	16,443.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
LAURA TOWNSEND	900 WRIGHT STREET SANTA ROSA, CA 95404		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
776 SHARES OF APPLE	04/12/21	98,567.	98,567.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
ELLEN WHITT	20 SOUTH 1ST AVENUE HIGHLAND PARK, NJ 08904		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
120 SHARES OF EXXON	12/28/21	28,824.	28,824.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
ANONYMOUS	1616 P STREET NW, SUITE 300 WASHINGTON, DC 20036		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
55 SHARES OF ROPER TECH	06/22/21	24,877.	24,877.
<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
NANCY M. HUGHES	2373 BROADWAY #1528 NEW YORK, NY 10024		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
70 SHARES OF APPLE	09/22/21	10,310.	10,310.
<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
ABIGAIL ROME	605 RAY DRIVE SILVER SPRING, MD 20910		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>FMV OF GIFT</u>	<u>TOTAL AMOUNT</u>
35 SHARES OF APPLE	12/30/21	5,036.	5,036.
TOTAL INCLUDED ON LINE 3		208,648.	225,091.



CA 199	CASH CONTRIBUTIONS, GIFTS, GRANTS AND SIMILAR AMOUNTS PAID	STATEMENT 5
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## ACTIVITY CLASSIFICATION: GRANTS

<u>DONEES NAME</u>	<u>DONEES ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
FOOD AND WATER ACTION FUND	1616 P STREET, NW, SUITE 400 - WASHINGTON, DC 20003	NONE	125,000.

<u>DONEES NAME</u>	<u>DONEES ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
TRADE JUSTICE EDUCATION FUND	PO BOX 77043 - WASHINGTON, DC 20013	NONE	245,000.

<u>DONEES NAME</u>	<u>DONEES ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
NY COMMUNITIES ORGANIZING FUND, INC.	470 VANDERBILT AVE 9TH FL - BROOKLYN, NY 11238	NONE	47,500.

<u>DONEES NAME</u>	<u>DONEES ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
VARIOUS ORGANIZATIONS RECEIVING LESS THA	1616 P STREET, NW, SUITE 300 - WASHINGTON, DC 20036	NONE	11,488.

TOTAL FOR THIS ACTIVITY	428,988.
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TOTAL INCLUDED ON FORM 199, PART II, LINE 9	428,988.
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CA 199                    COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES                    STATEMENT    6

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NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
WENONAH HAUTER 1616 P STREET NW, 300 WASHINGTON, DC 20036	EXECUTIVE DIRECTOR 36.00	234,698.
MICHELE MERKEL 1616 P STREET NW, 300 WASHINGTON, DC 20036	MANAGING DIRECTOR OF ADVOC 40.00	225,073.
MALCOLM DOUG LAKEY 1616 P STREET NW, 300 WASHINGTON, DC 20036	DEVELOPMENT DIRECTOR 40.00	219,506.
UZURA MARIE GARVIN 1616 P STREET NW, 300 WASHINGTON, DC 20036	FINANCE DIRECTOR 40.00	184,500.
MAUDE BARLOW 1616 P STREET NW, 300 WASHINGTON, DC 20036	CHAIR 0.50	0.
MARY RICCI 1616 P STREET NW, 300 WASHINGTON, DC 20036	TREASURER 0.50	0.
LISA SCHUBERT 1616 P STREET NW, 300 WASHINGTON, DC 20036	SECRETARY 0.50	0.
RUDOLF AMENGA-ETEGO 1616 P STREET NW, 300 WASHINGTON, DC 20036	DIRECTOR 0.50	0.
ELYZABETH PAREDO BELTRAN 1616 P STREET NW, 300 WASHINGTON, DC 20036	DIRECTOR 0.50	0.
ROBERT HOWARTH 1616 P STREET NW, 300 WASHINGTON, DC 20036	DIRECTOR 0.50	0.

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TOTAL TO FORM 199, PART II, LINE 11

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863,777.

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CA 199	OTHER EXPENSES	STATEMENT	7
DESCRIPTION		AMOUNT	
MAILHOUSE		213,993.	
DUES & SUBSCRIPTIONS		149,440.	
STAFF DEVELOPMENT		84,987.	
DIRECT EXPENSES OF FUNDRAISING EVENTS		13,702.	
PENSION PLAN CONTRIBUTIONS		559,980.	
OTHER EMPLOYEE BENEFITS		1,190,234.	
LEGAL FEES		15,405.	
ACCOUNTING FEES		82,179.	
LOBBYING FEES		106,730.	
PROFESSIONAL FUNDRAISING FEES		431,250.	
INVESTMENT MANAGEMENT FEES		19,938.	
OTHER PROFESSIONAL FEES		182,192.	
ADVERTISING AND PROMOTION		1,241.	
OFFICE EXPENSES		1,388,364.	
INFORMATION TECHNOLOGY		731,571.	
ROYALTIES		215,383.	
TRAVEL		39,870.	
CONFERENCES AND CONVENTIONS		5,402.	
INSURANCE		108,998.	
ALL OTHER EXPENSES		293,513.	
TOTAL TO FORM 199, PART II, LINE 17		5,834,372.	

CA 199	OTHER INVESTMENTS	STATEMENT	8
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
OTHER PUBLICLY TRADED SECURITIES	4,767,635.	6,362,241.	
TOTAL TO FORM 199, SCHEDULE L, LINE 9	4,767,635.	6,362,241.	

CA 199	OTHER ASSETS	STATEMENT	9
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
PLEDGES AND GRANTS RECEIVABLE	735,789.	507,786.	
PREPAID EXPENSES AND DEFERRED CHARGES	438,760.	425,562.	
DUE FROM RELATED PARTY	1,296,040.	1,015,785.	
SECURITY DEPOSITS	186,290.	172,472.	
OTHER CURRENT ASSETS	8,400.	8,400.	
TOTAL TO FORM 199, SCHEDULE L, LINE 12	2,665,279.	2,130,005.	

CA 199	OTHER LIABILITIES	STATEMENT 10
DESCRIPTION	BEG. OF YEAR	END OF YEAR
FUNDS HELD ON BEHALF OF OTHERS	8,215.	1,273.
DEFERRED RENT	2,202,874.	2,072,154.
SECURITY DEPOSITS	5,500.	5,500.
UNSECURED NOTES AND LOANS PAYABLE	2,006,800.	0.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	4,223,389.	2,078,927.

CA 199	INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED IN THIS RETURN	STATEMENT 11
DESCRIPTION		AMOUNT
UNREALIZED LOSS		-43,987.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 7		-43,987.

2021

**Political or Legislative Activities by  
Section 23701d Organizations**

**3509**

For calendar year 2021 or fiscal year beginning (mm/dd/yyyy) \_\_\_\_\_, and ending (mm/dd/yyyy) \_\_\_\_\_.

**Attach to Form 199.** FTB 199N filers see instructions.

Corporation/Organization name <b>FOOD &amp; WATER WATCH</b>			California corporation number <b>2940331</b>
Street address (suite, room, or PMB no.) <b>1616 P STREET NW, NO. 300</b>			FEIN <b>32-0160439</b>
City <b>WASHINGTON</b>	State <b>DC</b>	ZIP code <b>20036</b>	

**Part I - Political Activities**

Complete if the organization supported or opposed a candidate for public office. See instructions.

**1** Has the organization participated or intervened in any political campaign on behalf of any elective public office candidate? **1**  Yes  No  
If "Yes," describe the activities. Provide a summary of any published material relating to the activities.

**2** Has the organization contributed funds to support or oppose any individual public office candidate, or any organizations formed to support or oppose a public office candidate? **2**  Yes  No  
If "Yes," describe the activities. Include the name of the individual or organization the organization contributed to, the amount paid, and date of contribution.

**Part II - Legislative Activities**

Complete if the organization attempted to influence legislation.

**3** Has the organization attempted to influence any national, state or local legislation, or ballot measure and not filed a federal Form 5768, Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation? **3**  Yes  No  
If "Yes," See instructions.

**4a** Has the organization, during the 2021 taxable year, filed a federal Form 5768? **4a**  Yes  No  
If "Yes," attach a copy of federal Form 5768 filed with the Internal Revenue Service and skip question 4b. This fulfills the organization's need to file an election for state purposes.  
If "No", go to question 4b and see instructions.

**4b** Has the organization filed a federal Form 5768 in a prior year that has not been revoked? **4b**  Yes  No  
Note: The organization **cannot** make this election if it is a church, an integrated auxiliary of a church, a private foundation, or an affiliated organization.

Furnish the following financial information for the taxable year:

**5 Exempt Purpose Expenditures**

The total amount paid or incurred to accomplish the charitable, educational, religious, etc. purpose ..... **5** 16,416,880 00

**6 Lobbying Expenditures**

The total amount expended for the purpose of influencing legislation through communication with any member or employee of a legislative body or any government official or employee who may participate in the formation of legislation ..... **6** 85,819 00

**7 Grass Roots Expenditures**

The amount expended to influence any legislation through attempts to affect the opinions of the general public or any segment of it ..... **7** 149,199 00

# TAX RETURN FILING INSTRUCTIONS

CALIFORNIA FORM RRF-1

FOR THE YEAR ENDING  
DECEMBER 31, 2021

<b>Prepared for</b>	FOOD & WATER WATCH 1616 P STREET NW 300 WASHINGTON, DC 20036
<b>Prepared by</b>	GELMAN, ROSENBERG & FREEDMAN 4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930
<b>Amount due or refund</b>	BALANCE DUE OF \$800.00
<b>Make check payable to</b>	DEPARTMENT OF JUSTICE
<b>Mail tax return and check (if applicable) to</b>	REGISTRY OF CHARITABLE TRUSTS P.O. BOX 903447 SACRAMENTO, CA 94203-4470
<b>Return must be mailed on or before</b>	PLEASE MAIL AS SOON AS POSSIBLE.
<b>Special Instructions</b>	THE REPORT SHOULD BE SIGNED AND DATED BY THE AUTHORIZED INDIVIDUAL(S).

**ANNUAL REGISTRATION RENEWAL FEE REPORT  
TO ATTORNEY GENERAL OF CALIFORNIA**  
Sections 12586 and 12587, California Government Code  
11 Cal. Code Regs. sections 301-306, 309, 311, and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

MAIL TO:  
Registry of Charitable Trusts  
P.O. Box 903447  
Sacramento, CA 94203-4470  
STREET ADDRESS:  
1300 I Street  
Sacramento, CA 95814  
(916) 210-6400  
WEBSITE ADDRESS:  
www.oag.ca.gov/charities

<p><b>FOOD &amp; WATER WATCH</b> Name of Organization</p> <hr/> <p>List all DBAs and names the organization uses or has used</p> <p><b>1616 P STREET NW, NO. 300</b> Address (Number and Street)</p> <p><b>WASHINGTON, DC 20036</b> City or Town, State, and ZIP Code</p> <p><b>(202) 683-2447</b>      <b>MGARVIN@FWWATCH.ORG</b> Telephone Number      E-mail Address</p>	<p>Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report</p> <hr/> <p>State Charity Registration Number <b>CT131854</b></p> <p>Corporation or Organization No. <b>2940331</b></p> <p>Federal Employer ID No. <b>32-0160439</b></p>
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**ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)**  
Make Check Payable to Department of Justice

Total Revenue	Fee	Total Revenue	Fee	Total Revenue	Fee
Less than \$50,000	\$25	Between \$250,001 and \$1 million	\$100	Between \$20,000,001 and \$100 million	\$800
Between \$50,000 and \$100,000	\$50	Between \$1,000,001 and \$5 million	\$200	Between \$100,000,001 and \$500 million	\$1,000
Between \$100,001 and \$250,000	\$75	Between \$5,000,001 and \$20 million	\$400	Greater than \$500 million	\$1,200

**PART A - ACTIVITIES**

For your most recent full accounting period (beginning 01/01/2021 ending 12/31/2021) list:

Total Revenue (including noncash contributions) \$ 21,548,788 Noncash Contributions \$ 215,802 Total Assets \$ 17,415,353  
 Program Expenses \$ 11,351,310 Total Expenses \$ 16,667,688

**PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT**

**Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.**

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof, either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		X
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used? <span style="float: right;"><b>SEE STATEMENT 12</b></span>	X	
5. During this reporting period, did the organization receive any governmental funding? <span style="float: right;"><b>SEE STATEMENT 13</b></span>	X	
6. During this reporting period, did the organization hold a raffle for charitable purposes?		X
7. Does the organization conduct a vehicle donation program?		X
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?	X	
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?		X

**I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.**

<b>WENONAH HAUTER</b>	<b>EXECUTIVE DIRECTOR</b>		
Signature of Authorized Agent	Printed Name	Title	Date

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CA RRF-1

INFORMATION REGARDING COMMERCIAL  
FUNDRAISING SERVICES  
PART B, LINE 4

STATEMENT 12

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O'BRIEN GARRETT   PHONE: (202) 467-0048  
1133 19TH STREET, NW, #300  
WASHINGTON, DC 20005

