## Form **990-EZ**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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/Form990EZ for instructions and the latest information.

Open to Public Inspection

A F	or the			nding	12	/31/202	23	
В	Check if ap	oplicable:	C Name of organization		D Emp	loyer id	entification number	
	Address c	change	BRIGHT WATER FOUNDATION			46-5674573		
	Name cha	•	ohone ni	umber				
=	Initial retur		5649 Milton Ranch Rd			53	0-677-5777	
$\equiv$		rn/terminated	City or town, state or province, country, and ZIP or foreign postal code		F Gro	up Exei	mption	
=	Amended Applicatio	return on pending	Shingle Springs, CA 95682			nber	•	
		ting Method:			H Check	✓ if the	e organization is <b>not</b>	
			htwaterfoundation.org				ach Schedule B	
			ck only one) — ☑ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or	 	(Form 9			
_			✓ Corporation ☐ Trust ☐ Association ☐ Other:	521	(, , , , , ,	/-		
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or mo	ore or if to	ntal assets			
			500,000 or more, file Form 990 instead of Form 990-EZ			. ф	94,877	
	art I		e, Expenses, and Changes in Net Assets or Fund Balance			rtions		
	arti		the organization used Schedule O to respond to any question in					
_	1		ns, gifts, grants, and similar amounts received			1	94,877	
	2					2		
	3	_	rvice revenue including government fees and contracts			3	0	
						4	0	
	4	Investment				4	0	
	5a		unt from sale of assets other than inventory		<u>0</u> 0	-		
	b			_				
	С	Gain or (los	5c	0				
	6	_	d fundraising events:					
<u>o</u>	а		ome from gaming (attach Schedule G if greater than					
Revenue	h	. , ,	<u> </u>	contribu	tions.	-		
ě	b		me from fundraising events (not including \$ 0 of aising events reported on line 1) (attach Schedule G if the	contribu	lions			
Œ			n gross income and contributions exceeds \$15,000)   6b					
			-		0	-		
	C d		expenses from gaming and fundraising events 6c sor (loss) from gaming and fundraising events (add lines 6a and	Sh and a	0 oubtroot	-		
	u	line 6c) .	e of (loss) from garming and fundraising events (add lines of and	ob and s	Subiraci	Cal		
		,				6d	0	
	7a		s of inventory, less returns and allowances		0	-		
	b		of goods sold		0		_	
	C		t or (loss) from sales of inventory (subtract line 7b from line 7a) .			7c	0	
	8		nue (describe in Schedule O)			8	0	
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9	94,877	
	10		similar amounts paid (list in Schedule O)			10	0	
	11	•	id to or for members			11	0	
Expenses	12		her compensation, and employee benefits			12	0	
eŭ	13		al fees and other payments to independent contractors			13	6,506	
ğ	14		, rent, utilities, and maintenance			14	3,524	
Ш	15		blications, postage, and shipping			15	0	
	16		nses (describe in Schedule O) .See Schedule O, Statement 1			16	71,685	
	17	Total expe	nses. Add lines 10 through 16			17	81,715	
ts	18	`	deficit) for the year (subtract line 17 from line 9)			18	13,162	
Se	19		or fund balances at beginning of year (from line 27, column (A)) (					
As			figure reported on prior year's return)			19	122,868	
Net Assets	20		ges in net assets or fund balances (explain in Schedule O)		<u></u>	20	0	
_	21	Net assets	or fund balances at end of year. Combine lines 18 through 20 .			21	136,030	

Form 990-EZ (2023) Page 2 Part II Balance Sheets (see the instructions for Part II)

	Check if the organization used Schedule	O to respond to ar	ny question in this	Part II		🗆
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			122,868	22	136,030
23	Land and buildings				23	0
24	Other assets (describe in Schedule O)				24	0
25	Total assets			122,868		136,030
26	Total liabilities (describe in Schedule O)				26	0
27	Net assets or fund balances (line 27 of column	· · ·	· · · · · · · · · · · · · · · · · · ·	122,868	27	136,030
Par	Statement of Program Service Accom					Expenses
∆/b o	Check if the organization used Schedule		<del>* •</del>	Part III	(Re	equired for section
	t is the organization's primary exempt purpose?					1(c)(3) and 501(c)(4)
	cribe the organization's program service accomplis					anizations; optional fo ers.)
	neasured by expenses. In a clear and concise mons benefited, and other relevant information for ea		e services provided	a, the number of	0	0.0.
28	Bright Water Foundation Accomplishments-2023 The		water education nr	niects were		
	launched in Atiwa West District, Eastern Region Gha					
	(Continued on Schedule O, Statement 3)	ina communica. 741	inalgenous ivoo uu	opted the BWI		
		includes foreign gra	nts. check here .		28	a 72,476
29						12,111
	(Grants \$ ) If this amount	includes foreign gra	nts, check here .		29	a
30						
	(Grants \$ ) If this amount	includes foreign gra	nts, check here .		30	a
31	Other program services (describe in Schedule O)	<u> </u>		<u> </u>		
		includes foreign gra			31	
	Total program service expenses (add lines 28a t				32	1= 111+
Par	List of Officers, Directors, Trustees, and Key Check if the organization used Schedule					<u> </u>
	Check if the organization used Schedule	U to respond to an		Partiv	<u>.</u>	
		(b) Average	(c) Reportable compensation	(d) Health benefits,		) Fatimated amount of
	(a) Name and title	hours per week	(Forms W-2/1099-MISC	contributions to employ benefit plans, and		other compensation
		devoted to position	1099-NEC) (if not paid, enter -0-)	deferred compensatio	n	·
Rich	ard Blodgett	15.00			0	0
	d Chair	10.00	·			· ·
	c Ferguson	40.00	(		0	0
	Chair					
Becl	ky Ward Fellows	2.00	(		0	0
Secr	etary					
Lind	a Hansen	8.00			0	0
Trea	surer					
Kier	a Rieterbusch	8.00	(		0	0
Boa	rd Member					
	Allen	4.00	(		0	0
	d Member					
	Conover	2.00	(		0	0
Boai	d Member					
					+	
					+	
					+	
		l .	İ	1	- 1	

Part V

	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	Part	۷.	
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		~
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	0.4		. 1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	34		~
ooa	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			-
37a	during the year? If "Yes," complete applicable parts of Schedule N	36		<b>✓</b>
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		~
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved   38b	Julia		·
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911:0; section 4912:0; section 4955:0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		~
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed: CA	406		•
	The state of the s	201-92	1-9131	1
	10 Cated at: 115 N 2860 E. Spanish Fork IIT 84660 71P ± 4	9/1	660	<u>.</u>
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		~
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country:	42c		~
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year			
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	No
<del>44</del> a	completed instead of Form 990-EZ	44a		~
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		~
С	Did the organization receive any payments for indoor tanning services during the year?	44c		<b>V</b>
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		~
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-F7. See instructions	15h		

Other Information (Note the Schedule A and personal benefit contract statement requirements in the

Form 990-EZ (	(2023)						Р	age -
							Yes	No
	the organization engage, directly or in							
	andidates for public office? If "Yes," of		Part I			. 46		<b>'</b>
Part VI	Section 501(c)(3) Organizations							
	All section 501(c)(3) organization	s must answer que	stions 47–49b an	d 52, and c	complete th	e tables to	or line	es
	50 and 51.							
	Check if the organization used Sch	nedule O to respond	to any question in	this Part V	<u> 1 </u>	<u></u>		L
							Yes	No
	the organization engage in lobbying					tax		
-	r? If "Yes," complete Schedule C, Part					. 47		~
	ne organization a school as described ir					. 48		~
	the organization make any transfers to							~
	es," was the related organization a se							
	nplete this table for the organization's							d key
emp	oloyees) who each received more than	\$100,000 of comper	_			e, enter "N	one."	
		(b) Average	(c) Reportable compensation		Ith benefits, ns to employee	(e) Estimate	d amoi	int of
(6	a) Name and title of each employee	hours per week devoted to position	(Forms W-2/1099-MIS	C/ benefit plan	s, and deferred			
			1099-NEC)	comp	pensation			
None								
<b>51</b> Con \$10	al number of other employees paid over nplete this table for the organization' 0,000 of compensation from the organ	s five highest compenization. If there is no	ensated independe					thar
(4	<ul> <li>a) Name and business address of each independ</li> </ul>	ent contractor	(b) Type of s	ervice	(0)	) Compensation	JII	
None								
<b>d</b> Tota	al number of other independent contra	actors each receiving	over \$100 000					
	the organization complete Schedu	<del>-</del>		·	must attack			
	ppleted Schedule A					∵ a · V Yes		No.
	es of perjury, I declare that I have examined this r	eturn including accompan	ving schedules and state	ments, and to t	he hest of my ki			
	and complete. Declaration of preparer (other than					lowicage and	Delici,	10 10
Sign	Signature of officer				ate			
Here	Linda Hansen, Treasurer							
	Type or print name and title							
Paid	Print/Type preparer's name	Preparer's signature		Date	Check	] if PTIN		
Paid Preparer	7				self-emplo	- 1		
Use Only		<del></del>	<u> </u>	F	irm's EIN			
	Firm's address			Р	hone no.			
May the IR	S discuss this return with the preparer	shown above? See i	nstructions			. Yes		lo l

### **SCHEDULE A** (Form 990)

**Public Charity Status and Public Support** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

BRIGHT WATER FOUNDATION 46-5674573								
Par	t I Reaso	n for Public Cha	rity Status. (All	l organizations mus	t comple	ete this p	oart.) See instructi	ons.
The c	•	•		s: (For lines 1 through		-	,	
1				on of churches descri			0(b)(1)(A)(i).	
2				(Attach Schedule E (F		•		
3		•		ganization described i			, , , , ,	/···
4		research organization name, city, and stat		onjunction with a hosp	oital desc	ribed in s	section 1/U(b)(1)(A)	(III). Enter the
5	-	-		college or university	owned o	r operate	d by a government	al unit described in
3		' <b>0(b)(1)(A)(iv)</b> . (Com		college of university	Owned 0	Operate	d by a government	ai unit described in
6								
7								
		in <b>section 170(b)(1</b> )			po	. a gere.		. and goneral passes
8				(1)(A)(vi). (Complete I	Part II.)			
9		-		d in section 170(b)(1)	•	erated in	conjunction with a l	and-grant college
	or university:	ty or a non-land-gra	nt college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or
10	An organiz	ation that normally	eceives (1) more	than 33 <sup>1</sup> /3% of its su	pport fro	m contrib	outions, membership	fees, and gross
	support fro	om activities related om gross investmen	to its exempt full income and uni	nctions, subject to ce related business taxal	ble incom	eptions; a ne (less se	and (2) no more than ection 511 tax) from	businesses
	•			75. See <b>section 509(</b> a		•	•	
11		-	•	sively to test for public	-			
12				vely for the benefit of,				
				escribed in <b>section 5</b> 6 the type of supporting				
а		ŭ		l, supervised, or contr			•	,
а				regularly appoint or e				
				ete Part IV, Sections			and directors or tract	000 01 1110
b	☐ Type II	. A supporting orga	nization supervis	sed or controlled in co	nnection	with its s	supported organizati	on(s), by having
				rganization vested in				
	organiz	ation(s). You must	complete Part I	V, Sections A and C	•			
С				ting organization oper				ally integrated with,
		•		ns). <b>You must comp</b>		-		
d				pporting organization				
				nization generally mus				d an attentiveness
_		•	•	•		-		
е				a written determinationally integrated sup				e II, Type III
f		mber of supported			oporting (	Jigariizat	ion.	
g				oorted organization(s).				•
		orted organization	(ii) EIN	(iii) Type of organization	1	organization	(v) Amount of monetary	(vi) Amount of
	()	, <b>.</b>		(described on lines 1–10		ur governing ment?	support (see	other support (see
				above (see instructions))	docu	nen:	instructions)	instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
/E\								
(E)								
Total	1							

Schedule A (Form 990) 2023 Page **2** 

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 **(e)** 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 84,095 131,550 21,566 40,714 94,877 372,802 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge . . . . 0 0 0 0 **Total.** Add lines 1 through 3 4 131,550 40,714 84,095 94.877 21,566 372,802 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . **Public support.** Subtract line 5 from line 4 372.802 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 . . . . . . 94,877 131,550 21,566 40,714 84,095 372,802 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . 0 0 0 0 0 9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 0 0 0 0 0 **Total support.** Add lines 7 through 10 11 372,802 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 0 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) 13 Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) . . . . . 100 % 14 15 Public support percentage from 2022 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . . 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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

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

Secti	on A. Public Support			, , -		,	
Calen	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	. ,		,	,	,	
2	Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
3	organization's tax-exempt purpose						
3	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	•						
с 8	Add lines 7a and 7b						
U	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	<b>(e)</b> 2023	(f) Total
9	Amounts from line 6	(0,7 = 0.10	(0) = 0 = 0	(0, 2021	(0, 2022	(0, =0=0	(-)
10a							
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	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						
10	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	L s first second	L L third fourth	or fifth tax ve	l Par as a sectio	n 501(c)(3)
• •	organization, check this box and <b>stop he</b>	•			-		. , . ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line 8	3, column (f), c	livided by line	13, column (f))		15	%
16	Public support percentage from 2022 Sch	nedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment In	come Perce	ntage				· · · · · ·
17	Investment income percentage for 2023 (			-			%
18	Investment income percentage from 2022						%
19a	331/3% support tests-2023. If the organ						
	17 is not more than 331/3%, check this box		_	-		=	_
b	33 <sup>1</sup> / <sub>3</sub> % support tests—2022. If the organiz						
	line 18 is not more than 331/3%, check this l	_	=		-		_
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions . $\square$

Schedule A (Form 990) 2023 Page 4

#### **Supporting Organizations** Part IV

(Complete only if you checked a box on line 12 of 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.)

### Se

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

Schedule A (Form 990) 2023 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a 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? 11a **b** A family member of a person described on line 11a above? 11b c 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 Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove 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. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 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 Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. *Complete line 2 below.* The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No 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 Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a 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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a 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 Part VI. 3a

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 **Part VI** the role played by the organization in this regard.

3b

Schedule A (Form 990) 2023 Page 6

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Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7_	Other expenses (see instructions)	7		
8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
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	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 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	Check here if the current year is the organization's first as a non-functional (see instructions).	_	integrated Type III suppo	rting organization

Schedule A (Form 990) 2023 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018 . . . . . From 2019 **c** From 2020 **d** From 2021 . . . . . **e** From 2022 . . . . . Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . .

Schedule A (Form 990) 2023 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.) Schedule A, Part II, Line 10 - All income received were from individual donations and grants. Schedule A, Part II, Line 12 - All income received were in the form of checks, credit cards, and donations through our website.

# SCHEDULE O (Form 990)

### 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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization	Employer identification number
BRIGHT WATER FOUNDATION	46-5674573
Form 990-EZ, Header, Line B - I failed to include a Grant from the LDS Church in the amount of \$14,757.80	

Schedule O, Statement 1 BRIGHT WATER FOUNDATION

Form: Form 990-EZ (2023) EIN: 46-5674573

Page: 1 Part I, Line 16

Other	<b>Expenses</b>	Structured	Explanation
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Description	Amount
Project Expenses	44,451
Advertising and Marketing	626
Expedition Expenses	19,608
Bank Charges and Fees	25
Insurance	1,259
Web Services	2,056
Meals	906
Travel	2,704
License	50
Total:	71,685

Schedule O, Statement 2 BRIGHT WATER FOUNDATION

Form: **Form 990-EZ (2023)** EIN: **46-5674573** 

Page: 2 Part III

### **Primary Exempt Purpose**

### **Primary Exempt Purpose**

Our Organization's Primary Exempt Purpose is to eliminate water-borne diseases worldwide through testing, training, and teaching.

Schedule O, Statement 3 BRIGHT WATER FOUNDATION

Form: Form 990-EZ (2023)

Page: 2

EIN: 46-5674573

Part III, Line 28

First Program Service Accomplishments Description

#### Description

point-of-use safe water education model, using its training and education manuals and evaluation app in nine (9) district community. This brings the number of BWF active projects to seven (7). Thirty-five local residents were trained as safe water educators. These projects are now reaching about 60,000 residents (12,000 families). The results of these efforts in 2023 include more than 3,000 education meetings held, 125,000 gratis chlorine tablets dispensed, and 1,200 25-liter Veronica buckets (bucket, lid, tap) delivered to local households to be used as drinking water containers. Outcomes include more than 75% of educated households treating their drinking water with chlorine after one year, dramatic reductions in childhood episodes of diarrheal illness are reported, and similar reductions of school and workday losses are also reported.