



A G E N D A

**NATIONAL WATER RESEARCH INSTITUTE
BOARD OF DIRECTORS MEETING**

Date: Wednesday, November 13, 2024
Time: 1:30 PM Local Time
Live Meeting Location: 18700 Ward Street Fountain Valley, CA 92708
 Conference Room C2
Zoom Meeting ID and Passcode: Meeting ID: 542 510 8331
 Passcode: None
Sites Open to the Public: 111 N. Hope Street Los Angeles, CA 90012
 12 S. Michigan Ave. Chicago, IL 60603
Contact: Tianna Manzon, Project Coordinator
Tmanzon@nwri-usa.org or 562-708-0123

The National Water Research Board of Directors will hold an in-person meeting on the date and time indicated above. The meeting may be accessed via the Zoom videoconferencing platform using the provided room ID. Please note that should any technical issues arise during the Zoom, meeting, the meeting will proceed as scheduled without interruption.

Directors receive no compensation from NWRI for participating.

PRELIMINARY ITEMS

- Roll Call
- Determination of Quorum
- Items Received After Publication of Agenda

Recommendation: Adopt resolution 2024 - ____ determining need to take immediate action on item(s) and that the need for action came to the attention of NWRI after the posting of this Agenda. The Resolution requires a 2/3rds vote of the Board or members present, or, if less than 2/3rds of the members are present, a unanimous vote of those present.

• **Visitor Participation**

This item allows up to 3 minutes for visitors to address the Board of Directors on matters not listed on the agenda, but within the authority of the Joint Powers Agency or pertaining to Consent Calendar Items. In accordance with legal requirements, the Board is prohibited from acting on comments made during this time. Directors may, when appropriate, provide direction to NWRI staff regarding the issues raised. Only a member of the Board of Directors may request the removal of a Consent Calendar item for separate discussion.

Kevin M. Hardy • Executive Director • khardy@nwri-usa.org • www.nwri-usa.org

JPA MEMBERS: Inland Empire Utilities Agency • Irvine Ranch Water District • Los Angeles Department of Water and Power
Metropolitan Water District of Southern California • Orange County Sanitation District • Orange County Water District



CONSENT CALENDAR

At the discretion of the Chair, items on the Consent Calendar may be approved with a single motion and vote by the Directors present, or by the unanimous consent of the Directors present.

1a. Meeting Minutes – September 11, 2024

Recommendation: Receive and file the meeting minutes for the NWRI Board of Directors meeting held September 11, 2024.

Attachments: September 11, 2024 – Meeting Minutes

1b. Financial Statements – Ending October 31, 2024

Recommendation: Receive and file NWRI’s unaudited financial reports for the period ending October 31, 2024.

Attachments: Unaudited Statement of Profit & Loss
Unaudited Balance Sheet
Unaudited Report on Account Receivables

ACTION ITEMS

The Board of Directors considers Action Items in the order presented, unless specific motion is made to amend the order of consideration. Each Action Item requires a separate motion and affirmative vote by majority vote of the present Directors. The Board is not obligated to action on any item presented for consideration.

2. Resolution 2024-05 Adopting and Establishing Policy for Yearly Staff Reimbursement Rates for Research Services for the Year Beginning January 1, 2025, and Ending December 31, 2025.

Recommendation: (a) Consider the proposed resolution regarding an increase in yearly staff reimbursement rates.
(b) Adopt the proposed Resolution 2024-05.

Attachments: Resolution 2024-05 Adopting and Establishing Staff Reimbursement Rates

3. NWRI’s 2023 Federal Income Tax Return and 2023 California Income Tax Return.

The Internal Revenue Service (IRS) Form 990, Return of Organization Exempt from Income Tax, is a public document that provides detailed financial information about nonprofit organizations. It is often the primary source of such information and is also used by government agencies to ensure compliance with tax-exempt regulations. The financial data from NWRI’s filed Form 990 is based on transactions from the calendar year 2023, supported by NWRI’s independently audited financial records for fiscal years 2022-23 and 2023-24.



Recommendation: (a) Receive and file the Tax Year 2023 IRS Form 990 Return of Organization Exempt from Income Tax.

(b) Direct the Executive Director to submit these documents as required by applicable law.

Attachments: Gruber & Lopez – 2023 Federal and California Income Tax Return for NWRI

4. Independent Advisory Panels Update

NWRI Research Project Manager, Suzanne Sharkey, will present updates on current NWRI Independent Advisory Panel Engagements.

5. Key Performance Indicators

This item is intended to provide an opportunity for the Board of Directors to review recent activities of the organization presented by Executive Director Hardy.

Recommendation: Provide feedback and/or direction on recent activity for operational improvement or strategic focus.

INFORMATION ITEMS

6. Executive Director's Report

- 2025 NWRI Board Meetings Calendared
- Resolution 2024-04 – Conflict of Interest Policy Approved by County of Orange
- New Appointments to NWRI's Board of Directors
 - Mickey Chaudhuri for Metropolitan Water District
- WateReuse Association Industrial Reuse Conference – November 19 (Indian Wells, Ca)
- Executive Director Travel November 22 – 25
- Hawaii Water Environment Association/AWWA Water Reuse Conference – December 5 (Honolulu, Hi)
- Pure Water San Diego Sub-Panel December 10 – 11 (San Diego, Ca)
- Lake Thunderbird IPR Panel December 17 (Remote)
- Executive Director Surgery Schedule progressing as planned
- Happy Holidays and See you in 2025!

7. Board of Directors Comments

8. Important Dates

- December 2024 – January 2025: Holiday Recess
- February 12, 2025, at 1:30 PM – 3:00 PM (Regular Board of Directors Meeting)

9. Adjournment



DATE: November 13, 2024
TO: NWRI Board of Directors
FROM: Kevin M. Hardy, Executive Director
SUBJECT: **Item 1a – Meeting Minutes**

Recommendation:

Receive and file the meeting minutes for the meeting held September 11, 2024

Discussion:

Duly approved minutes serve as the official and permanent public record of actions taken by the Board of Directors.

Attachments: Minutes of September 11, 2024

Kevin M. Hardy • Executive Director • khardy@nwri-usa.org • www.nwri-usa.org

JPA MEMBERS: Inland Empire Utilities Agency • Irvine Ranch Water District • Los Angeles Department of Water and Power
Metropolitan Water District of Southern California • Orange County Sanitation District • Orange County Water District



DATE: November 13, 2024
TO: NWRI Board of Directors
SUBJECT: Minutes of the Board of Directors Meeting Held on September 11, 2024

PRELIMINARY ITEMS

Roll Call

The meeting was called to order at **1:33 PM** local time by Executive Director Hardy.

The following NWRI Directors, Alternate Directors, and others were present:

- Chair Steve Elie, Inland Empire Utilities Agency (IEUA)
- Vice Chair Cathy Green, Orange County Water District (OCWD)
- Director Jesus Gonzalez, Los Angeles Department of Water and Power (LADWP) – Remote Attendance
- Director John Morris, Metropolitan Water District of Southern California (MWD)
- Director Bob Ooten, Orange County Sanitation District (OC San)
- Director John Withers, Irvine Ranch Water District (IRWD)
- Alt. Director Travis Sprague, IEUA
- Alt. Director Rafael Villegas, LADWP – Remote Attendance
- Alt. Director Jonathan Leung, LADWP – Remote Attendance
- Alt. Director Rob Thompson, OC San – Remote Attendance
- Secretary John Kennedy, OCWD
- Treasurer Jason Dadakis, OCWD
- Others: Jim Colston, IRWD , Lan Wiborg, OC San (Remote Attendance), Matt Lenton, Gruber & Lopez (Remote Attendance)
- NWRI Staff: Executive Director, Kevin M. Hardy, Project Manager, Suzanne Sharkey, Project Controller, Julie Abshire, Communications Manager, Mary Collins, Project Coordinator, Tianna Manzon.

Determination of Quorum. A quorum is established when at least four of the six member agencies are represented. Since all six member agencies by either a Board Director or Alternate Director, a quorum was determined.

Items Received After Publication of Agenda. None.

Visitor Participation. None.

Kevin M. Hardy • Executive Director • khardy@nwri-usa.org • www.nwri-usa.org

JPA MEMBERS: Inland Empire Utilities Agency • Irvine Ranch Water District • Los Angeles Department of Water and Power
 Metropolitan Water District of Southern California • Orange County Sanitation District • Orange County Water District



ACTION ITEMS

1a. July 10, 2024 – Meeting Minutes

1b. Institute Financial Statements Ending August 31, 2024

The Board reviewed July 2024 meeting minutes and discussed NWRI's unaudited Profit and Loss, Balance Sheet, and Open Invoice Report for the period through August 31, 2024.

- Upon a motion by Vice Chair Green, seconded by Director Morris, and unanimously carried, Items 1a and 1b were received and filed.

2. Presentation of NWRI's Independently Audited Financial Statements, Audit Notes, and Auditor's Communication's Report for the Fiscal Year Ending June 30, 2024.

Matt Lenton of Gruber and Lopez, Inc. joined remotely to present key findings from the annual independent audit of NWRI's financial statements for the fiscal year ending June 30, 2024. Lenton informed the Board of Directors that NWRI received a clean audit which indicates the organization's financial statements are accurate, transparent, and compliant with applicable regulations and standards.

- Upon a motion by Vice Chair Green, seconded by Director Morris, and unanimously carried, Item 2 was received and filed.

3. Resolution 24-04 Adopting an Amended Conflict of Interest Policy

NWRI is required by the State of California's Fair Political Practices Commission (FPPC) to review its Conflict of Interest (COI) Policy on a biennial basis. Present NWRI Directors and Alternate Directors reviewed the proposed 2024 COI policy.

- Before the amendment was adopted, the Directors instructed Executive Director Hardy to seek final review of the proposed policy from NWRI's General Counsel. Following the legal review, the Directors directed NWRI staff to file the required documents with the County of Orange.

4. Key Performance Indicators – Clarke Prize Events Friday, Oct. 4 – Saturday, Oct 5

With only a few weeks remaining until the event, Executive Director Hardy provided the Board of Directors with detailed updates on the activities scheduled for this year's Clarke Prize Award Ceremony.

- Directors of the Board requested ED Hardy to send important information about attending the event in a separate email.



INFORMATION ITEMS

5. **Executive Director's Report.** Executive Director Hardy reported to the Board on the following:
 - New Director Appointments to NWRI Board of Directors
 - Jesus Gonzalez and Rafael Villegas for LADWP
 - Bob Ooten for OC San
 - WateReuse CA Conference on September 15 – 17, 2024 (Garden Grove, Ca)
 - WateReuse OC/LA Chapter Joint Meeting on October 8, 2024 (Long Beach, Ca)
 - WateReuse and NWRI Workshop – November 7
 - OC Water Summit on September 27, 2024 (Costa Mesa, Ca)
 - WRF 5277 – CalVal
 - NWRI Panel Reviewing ROMS BEC Model
 - Clarke Prize Award Ceremony: Planning Updates
6. **Board of Directors Comments.** No Directors had additional comments.
7. **Important Dates.** ED Hardy highlighted upcoming important dates Clarke Prize Award Ceremony on October 5; October 2024 – Fall Recess; Next Scheduled Regular Board of Directors Meeting on November 13, 2024 at 1:30 PM
8. **Adjournment**

APPROVED BY: _____ DATE: _____

JOHN KENNEDY, SECRETARY, NWRI BOARD OF DIRECTORS



DATE: November 13, 2024
TO: NWRI Board of Directors
FROM: Kevin M. Hardy, Executive Director
SUBJECT: **Item 1b** – Institution’s Financial Statements

Recommendation:

Receive and file NWRI’s unaudited financial statements for the period ending October 31, 2024.

Discussion:

Monthly financial reports provide a current snapshot of the Institute’s financial position and resiliency. Variations from the annual income and expense plan are anticipated.

Attachments:

For the period ending October 31, 2024
Unaudited Statement of Profit and Loss
Unaudited Balance Sheet
Unaudited Report on Account Receivables

Kevin M. Hardy • Executive Director • khardy@nwri-usa.org • www.nwri-usa.org

JPA MEMBERS: Inland Empire Utilities Agency • Irvine Ranch Water District • Los Angeles Department of Water and Power
Metropolitan Water District of Southern California • Orange County Sanitation District • Orange County Water District

12:01 PM

National Water Research Institute

Profit & Loss

11/05/24

July through October 2024

Accrual Basis

	Jul - Oct 24
Income	
4000 · JPA Contributions (Member 50K)	300,000.00
4155 · Restricted Contributions	84,600.00
4250 · Grants	9,073.84
4300 · Conferences	
4302 · Co-Sponsors	450.00
Total 4300 · Conferences	450.00
4400 · Contract Svc/Reimbursable	
4401 · SCSC	9,597.77
4402 · Support Fee	5,000.00
4400 · Contract Svc/Reimbursable - Other	198,254.25
Total 4400 · Contract Svc/Reimbursable	212,852.02
4500 · NWRI Research Program	
4501 · JIS & Athalie Clark Foundation	30,000.00
Total 4500 · NWRI Research Program	30,000.00
4600 · Circle of Friends/Fellowship	10,000.00
4800 · Interest Income	-220.75
Total Income	646,755.11
Gross Profit	646,755.11
Expense	
6010 · Accounting/Audit	11,700.00
6030 · Charges/Tax & Other Fees	
6032 · Banking Fees	918.13
Total 6030 · Charges/Tax & Other Fees	918.13
6040 · Telephone/Communication	
6041 · Cell Phone/Conference Calls	720.00
Total 6040 · Telephone/Communication	720.00
6060 · Mailing Services	21.63
6090 · Subscriptions and Dues	835.98
6110 · Board / Ops Expenses	166.05
6120 · Misc Admin Expenses	
6121 · General Office Supplies	123.70
6124 · Insurance	2,300.00
6125 · Payroll Processing	348.00
Total 6120 · Misc Admin Expenses	2,771.70
6140 · Salary & Benefits	
6141 · Professional Services	120.00
6143 · Payroll Taxes	11,114.79
6144 · Director	20,132.94
6145 · Simple IRA Match	4,540.61
6140 · Salary & Benefits - Other	33,623.40
Total 6140 · Salary & Benefits	69,531.74
6160 · Membership	321.00
7010 · Admin Program Expenses	
7011 · Salary & Benefits	
7018 · Director	6,629.83
7011 · Salary & Benefits - Other	19,194.03
Total 7011 · Salary & Benefits	25,823.86

12:01 PM

National Water Research Institute

Profit & Loss

11/05/24

July through October 2024

Accrual Basis

	<u>Jul - Oct 24</u>
7013 · Registration	425.00
7016 · Travel/Lodging/Meals	1,547.74
Total 7010 · Admin Program Expenses	27,796.60
7020 · Advisory Panels	
7021 · Salary & Benefits	
7027 · Director	28,352.86
7021 · Salary & Benefits - Other	34,576.27
Total 7021 · Salary & Benefits	62,929.13
7022 · Professional Svc	86,059.50
7023 · Honorariums	11,031.25
7024 · Travel/Lodging/meals	1,080.66
7025 · Event Expenses	362.66
7026 · Printing/Copying/Mailing	56.57
Total 7020 · Advisory Panels	161,519.77
7030 · Clarke Prize	
7031 · Salary & Benefits	
7037 · Director	14,442.97
7031 · Salary & Benefits - Other	36,322.73
Total 7031 · Salary & Benefits	50,765.70
7032 · Professional Svc	2,381.25
7033 · Clarke Prize Award	50,000.00
7034 · Travel/Lodging/Meals	37,897.37
7035 · Event Expenses	16,952.07
7036 · Printing/Copying/Mailing	41.13
Total 7030 · Clarke Prize	158,037.52
7040 · Conf/Workshops/Contract Svc	
7041 · Salary & Benefits	
7049 · Director	8,373.93
7041 · Salary & Benefits - Other	3,451.09
Total 7041 · Salary & Benefits	11,825.02
7044 · Travel/Lodging/Meals	140.49
Total 7040 · Conf/Workshops/Contract Svc	11,965.51
7050 · Education & Outreach	
7051 · Salary & Benefits	
7059 · Director	7,940.44
7051 · Salary & Benefits - Other	16,540.14
Total 7051 · Salary & Benefits	24,480.58
7053 · Travel/Lodging/Meals	694.54
7056 · Fellowship Award	30,000.00
Total 7050 · Education & Outreach	55,175.12
7070 · Research/Proj/Grant - Specific	
7072 · Salary & Benefits	
7078 · Director	3,769.89
7072 · Salary & Benefits - Other	4,369.01
Total 7072 · Salary & Benefits	8,138.90
Total 7070 · Research/Proj/Grant - Specific	8,138.90
Total Expense	509,619.65
Net Income	137,135.46

12:03 PM

National Water Research Institute

Balance Sheet

As of October 31, 2024

11/05/24

Accrual Basis

	Oct 31, 24
ASSETS	
Current Assets	
Checking/Savings	
1000 · Wells Fargo Checking	258,829.90
1003 · Petty Cash	83.36
Total Checking/Savings	258,913.26
Accounts Receivable	
1201 · Accounts Receivable-General	143,384.89
Total Accounts Receivable	143,384.89
Other Current Assets	
SWEEP	633,769.36
1499 · Undeposited Funds	23,270.00
Total Other Current Assets	657,039.36
Total Current Assets	1,059,337.51
Fixed Assets	
1500 · Equipment-Office - >1 yr. >2.5k	13,679.62
1550 · Accum Depreciation	-13,679.62
Total Fixed Assets	0.00
Other Assets	
1650 · Investments	34,931.82
Total Other Assets	34,931.82
TOTAL ASSETS	1,094,269.33
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2000 · Accts Pay-Vendors	81,822.95
Total Accounts Payable	81,822.95
Other Current Liabilities	
2100 · Payroll Lia/Vac Accrual - Staff	8,130.41
2101 · Payroll Lia/Vac&Sick - Dir	33,180.70
2500 · Deferred Revenue	204,000.00
Total Other Current Liabilities	245,311.11
Total Current Liabilities	327,134.06
Total Liabilities	327,134.06
Equity	
3900 · Retained Earnings-Unrestricted	599,999.81
3910 · Retained Earnings-Temp Restrict	30,000.00
Net Income	137,135.46
Total Equity	767,135.27
TOTAL LIABILITIES & EQUITY	1,094,269.33

12:00 PM

11/05/24

National Water Research Institute
Open Invoices
 As of October 31, 2024

Date	Class	Aging	Open Balance
Anne Arundel			
09/30/24	Advisory Panels - 7020:Anne Arundel	1	1,258.11
Total Anne Arundel			1,258.11
Carollo			
06/30/24	Projects and Grants - 7070:FAT SAO BO...	123	3,220.65
09/30/24	Projects and Grants - 7070:FAT SAO BO...	31	643.13
Total Carollo			3,863.78
Colorado Wastewater Utility Council			
10/28/24	Advisory Panels - 7020:Colorado	3	50,600.00
Total Colorado Wastewater Utility Council			50,600.00
Colorado Water Quality Control Bd (CDPHE)			
09/30/24	Advisory Panels - 7020:Colorado	34	23,113.75
Total Colorado Water Quality Control Bd (CDPHE)			23,113.75
Garver LLC			
09/30/24	Projects and Grants - 7070:Fault Detecti...	31	6,562.13
Total Garver LLC			6,562.13
Greeley			
09/12/24	Advisory Panels - 7020:Colorado		4,000.00
Total Greeley			4,000.00
Las Virgenes Municipal Water District			
09/30/24	Advisory Panels - 7020:Las Virgenes Re...	24	8,404.75
Total Las Virgenes Municipal Water District			8,404.75
Orange County Sanitation			
10/31/24	Advisory Panels - 7020:CASA		574.09
Total Orange County Sanitation			574.09
Public Utilities Department			
09/30/24	Advisory Panels - 7020:SD Pure Water P...	24	6,311.85
10/31/24	Advisory Panels - 7020:SD Pure Water P...		14,753.60
Total Public Utilities Department			21,065.45
Truckee Meadows Water Authority			
09/30/24	Advisory Panels - 7020:OneWater Nevada	16	22,652.50
Total Truckee Meadows Water Authority			22,652.50
TOTAL			142,094.56



DATE: November 13, 2024
TO: NWRI Board of Directors
FROM: Kevin M. Hardy, Executive Director
SUBJECT: **Item 2** – Resolution 2024-05 – Adopting and Establishing Policy for Yearly Staff Reimbursement Rates for Research Services for the Year Beginning January 1, 2025, and Ending December 31, 2025

Recommendation:

- (a) Consider the proposed resolution regarding an increase in yearly staff reimbursement rates.
- (b) Adopt the proposed Resolution 2024-05

Attachments: Resolution 2024-05 Adopting and Establishing Staff Reimbursement Rates

Kevin M. Hardy • Executive Director • khardy@nwri-usa.org • www.nwri-usa.org

JPA MEMBERS: Inland Empire Utilities Agency • Irvine Ranch Water District • Los Angeles Department of Water and Power
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RESOLUTION NO. 2024-05 – ADOPTING AND ESTABLISHING POLICY FOR YEARLY STAFF REIMBURSEMENT RATES FOR RESEARCH SERVICES, FOR THE YEAR BEGINNING JANUARY 1, 2025, AND ENDING DECEMBER 31, 2025

Whereas, the Staff Reimbursement Rate Schedule allows the National Water Research Institute (NWRI) to recover research project-related staff time based on structure approved by the Board of Directors, which reflect the support received from the NWRI Joint Powers Agency member agencies; and,

Whereas, the Board of Directors most recent action to update NWRI’s staff reimbursement rates became effective on January 10, 2024.

NOW THEREFORE, BE IT RESOLVED as follows:

1. The Board of Directors hereby establishes the following rate tiers and rates for research services provided to the NWRI member agencies and to unaffiliated organizations outlined in Table 1 below.
2. The proposed rates reflect current rates adjusted to reflect the change in the Los Angeles – Long Beach – Anaheim CPI-U (All Urban Consumer Price Index - All Items, not seasonally adjusted) published by the United States Bureau of Labor Statistics since September 1, 2023. The proposed rate adjustment is 2.9%.
3. The Proposed Rates shall take effect for any new contracts signed after January 1, 2025. Staff will update rates on existing contracts as allowable.
4. Table 1: Staff Reimbursement Rates

	NWRI JPA Member Agency Rates				Unaffiliated Organization Rates			
	Current	Increase	Formula	Proposed	Current	Increase	Formula	Proposed
Executive Director	\$190.00	\$5.51	\$195.51	\$196.00	\$285.00	\$8.27	\$293.27	\$300.00
Project Manager	\$125.00	\$3.63	\$128.63	\$129.00	\$190.00	\$5.51	\$195.51	\$200.00
Communication Manager	\$115.00	\$3.34	\$118.34	\$118.00	\$175.00	\$5.08	\$180.08	\$180.00
Project Coordinator	\$100.00	\$2.90	\$102.90	\$103.00	\$155.00	\$4.50	\$159.50	\$160.00
Project Controller	\$100.00	\$2.90	\$102.90	\$103.00	\$155.00	\$4.50	\$159.50	\$160.00

Approved this 13th day of November 2024, at Fountain Valley, California.

Signed

Attest

Steve Elie, Chair

John Kennedy, Secretary

Kevin M. Hardy • Executive Director • khardy@nwri-usa.org • www.nwri-usa.org

JPA MEMBERS: Inland Empire Utilities Agency • Irvine Ranch Water District • Los Angeles Department of Water and Power
Metropolitan Water District of Southern California • Orange County Sanitation District • Orange County Water District



DATE: November 13, 2024
TO: NWRI Board of Directors
FROM: Kevin M. Hardy, Executive Director
SUBJECT: **Item 3** – 2023 Federal Income Tax Return and 2023 CA Income Tax Return

Recommendation:

- (a) Receive and file NWRI's Tax Year 2023 IRS Form 990 Return of Organization Exempt from Income Tax.
- (b) Direct the Executive Director to submit these documents as required by applicable law.

Discussion:

The Internal Revenue Service (IRS) Form 990, Return of Organization Exempt from Income Tax, is a public document that provides detailed financial information about nonprofit organizations. It is often the primary source of such information and is also used by government agencies to ensure compliance with tax-exempt regulations. The financial data from NWRI's filed Form 990 is based on transactions from the calendar year 2023, supported by NWRI's independently audited financial records for fiscal years 2022-23 and 2023-24.

Attachments: Gruber & Lopez – 2023 Federal and California Income Tax Return for NWRI

Kevin M. Hardy • Executive Director • khardy@nwri-usa.org • www.nwri-usa.org

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Metropolitan Water District of Southern California • Orange County Sanitation District • Orange County Water District

FOR TAX YEAR 2023

NATIONAL WATER RESEARCH INSTITUTE

GRUBER AND LOPEZ, INC.

438 OLD NEWPORT BLVD

Newport Beach, CA 92663

(949) 346-2900

GRUBER AND LOPEZ, INC.

17

438 OLD NEWPORT BLVD
Newport Beach, CA 92663

Phone: (949)346-2900 | Fax:

October 11, 2024

NATIONAL WATER RESEARCH INSTITUTE
18700 WARD STREET
Fountain Valley, CA 92708

NATIONAL WATER RESEARCH INSTITUTE:

Enclosed is the 2023 federal return for a tax-exempt organization, prepared for NATIONAL WATER RESEARCH INSTITUTE from the information provided. The return will be e-filed with the IRS once we receive a signed Form 8879-TE, IRS e-file Signature Authorization for an Exempt Organization.

The federal return reflects neither a refund nor a balance due.

Enclosed is the 2023 California Income Tax return for NATIONAL WATER RESEARCH INSTITUTE, prepared from the information provided. The return will be e-filed with the California taxing authority.

The organization's California Income Tax return reflects neither a refund nor a balance due.

Thank you for the opportunity to be of service. For further assistance with the organization's tax return needs, contact our office at (949)346-2900.

Sincerely,

RON LOPEZ
GRUBER AND LOPEZ, INC.

Return of Organization Exempt From Income Tax

2023

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/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning 07-01, 2023, and ending 06-30, 2024

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C Name of organization NATIONAL WATER RESEARCH INSTITUTE. D Employer identification number 33-0481107. E Telephone number (714) 378-3278. G Gross receipts \$ 1,647,040. H(a) Is this a group return for subordinates? No. H(b) Are all subordinates included? No. I Tax-exempt status: 501(c)(3). J Website: WWW.NWRI-USA.ORG. K Form of organization: Other JOINT POWERS. L Year of formation: 1991. M State of legal domicile: CA.

Part I Summary

Table with columns for Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, member counts, revenue breakdown, expenses, and net assets.

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.

Sign Here: Signature of officer KEVIN HARDY, Executive Director. Date.

Paid Preparer Use Only: Print/Type preparer's name RON LOPEZ, Preparer's signature RON LOPEZ, Date 10-11-2024, Check self-employed, PTIN P00758088, Firm's name GRUBER AND LOPEZ, INC., Firm's address 438 OLD NEWPORT BLVD Newport Beach CA 92663, Firm's EIN, Phone no. 949-346-2900.

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

1 Briefly describe the organization's mission:

TO PROVIDE FINANCIAL SUPPORT FOR THE RESEARCH, DEVELOPMENT, AND IMPLEMENTATION OF WATER PROJECTS FOR THE PURPOSE OF DEVELOPING AND CONSERVING WATER, PREVENTING OR REMEDIATING DEGRADATION OF WATER QUALITY AND EFFICIENTLY USING WATER RESOURCES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes 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 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 \$ 1,201,077 including grants of \$) (Revenue \$)

TO PROVIDE FINANCIAL SUPPORT FOR THE RESEARCH, DEVELOPMENT, AND IMPLEMENTATION OF WATER PROJECTS FOR THE PURPOSE OF DEVELOPING AND CONSERVING WATER, PREVENTING OR REMEDIATION DEGRADATION OF WATER QUALITY AND EFFICIENTLY USING WATER RESOURCES.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

4e Total program service expenses 1,201,077

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements for various schedules (A through H).

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various IRS requirements and schedules.

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 []

Table with 3 columns: Question, Yes, No. Rows 1a, 1b, 1c detailing Form 1096 and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			X
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			X
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			

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 [X]

Section A. Governing Body and Management

Table with 5 columns: Question, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, and governance decisions.

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

Table with 5 columns: Question, Yes, No. Rows include questions about local chapters, conflict of interest policies, whistleblower policies, and compensation review processes.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed California
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.
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.
JULIE ABSHIRE (562)556-9599, 18700 WARD ST, Fountain Valley, CA 92708

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, box 6 of 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 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 dotted 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) KEVIN HARDY EXECUTIVE DIRECTOR	40.00	X					0	205,930	0	
(2) SUZANNE SHARKEY SCIENTIST	40.00				X		136,977	0	0	
(3) MARY COLLINS COMMUNICATION MANAGER	40.00				X		126,894	0	0	
(4) JOHN MORRIS DIRECTOR	1.00	X					0	0	0	
(5) JESUS GONZALEZ DIRECTOR	1.00	X					0	0	0	
(6) JOHN WITHERS DIRECTOR	1.00	X					0	0	0	
(7) BOB OOTEN DIRECTOR	1.00	X					0	0	0	
(8) CATHY GREEN VICE CHAIR	1.00	X		X			0	0	0	
(9) STEVEN ELIE CHAIR	1.00	X		X			0	0	0	
(10) JASON DADAKIS TREASURER	1.00	X		X			0	0	0	
(11) JOHN KENNEDY SECRETARY	1.00	X		X			0	0	0	
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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			
(15) -----	-----									
(16) -----	-----									
(17) -----	-----									
(18) -----	-----									
(19) -----	-----									
(20) -----	-----									
(21) -----	-----									
(22) -----	-----									
(23) -----	-----									
(24) -----	-----									
(25) -----	-----									
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							263,871	205,930	0	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **2**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b	300,000			
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e	28,659			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,302,337			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		1,630,996			
Program Service Revenue	2a _____ Business Code _____						
	b	_____					
	c	_____					
	d	_____					
	e	_____					
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		15,783	15,783		
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross rents	(i) Real				
			(ii) Personal				
			6a				
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
			7a				
	b	Less: cost or other basis and sales expenses	7b				
	c	Gain or (loss)	7c				
	d	Net gain or (loss)					
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
b	Less: direct expenses	8b					
c	Net income or (loss) from fundraising events						
9a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11a _____ Business Code _____						
	b	OTHER 900099		261	261		
	c	_____					
	d	All other revenue					
	e	Total. Add lines 11a-11d		261			
12	Total revenue. See instructions		1,647,040	16,044	0	0	

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	469,801	469,801		
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	278,232	101,343	135,628	41,261
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . .				
9 Other employee benefits				
10 Payroll taxes	34,174		34,174	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17 . .				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . .	47,701	27,678	20,023	
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	70,124	70,124		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,431	19,431		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PRINTING, POSTAGE & SHIPPING	148	146	2	
b HONORARIUMS, AWARDS, & PRIZE	455,858	455,858		
c CHARITABLE CONTRIBUTIONS	52,101	50,271	1,830	
d OTHER PROGRAM & ADMIN COSTS	27,121	6,425	20,696	
e All other expenses	1,440		1,440	
25 Total functional expenses. Add lines 1 through 24e . .	1,456,131	1,201,077	213,793	41,261
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	392,954	1	630,885
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	8,240	3	4,592
	4 Accounts receivable, net	213,833	4	167,868
	5 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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	2,788	9	1,978
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 13,680		
	b Less: accumulated depreciation	10b 13,680	10c	
	11 Investments - publicly traded securities	28,581	11	41,283
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	646,396	16	846,606	
Liabilities	17 Accounts payable and accrued expenses	99,068	17	113,436
	18 Grants payable		18	
	19 Deferred revenue	108,240	19	103,173
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	207,308	26	216,609
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	439,088	27	629,997
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	439,088	32	629,997
33 Total liabilities and net assets/fund balances	646,396	33	846,606	

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	1,647,040
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,456,131
3	Revenue less expenses. Subtract line 2 from line 1	3	190,909
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	439,088
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	629,997

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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input 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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		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		

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 30

2023

**Open to Public
Inspection**

Name of the organization NATIONAL WATER RESEARCH INSTITUTE	Employer identification number 33-0481107
--	---

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc.; 13 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. Rows include: 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 89.91%; 15 Public support percentage from 2022 Schedule A, Part II, line 14 93.12%; 16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization [X]; 16b 33 1/3% support test - 2022. 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 stop here. The organization qualifies as a publicly supported organization []; 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 organization []; 17b 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 organization []; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions [].

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: Calendar year (or fiscal year beginning in), (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business under section 513; 4 Tax revenues levied for the organization's benefit; 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; 7c Add lines 7a and 7b; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (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; 12 Other income. Do not include gain or loss from the sale of capital assets; 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 3 columns: Description, Line number, Percentage. Row 15: Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) - 15 - %. Row 16: Public support percentage from 2022 Schedule A, Part III, line 15 - 16 - %.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Line number, Percentage. Row 17: Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) - 17 - %. Row 18: Investment income percentage from 2022 Schedule A, Part III, line 17 - 18 - %. Row 19a: 33 1/3% support tests - 2023. 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 - [] - %. Row 19b: 33 1/3% support tests - 2022. 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 - [] - %. Row 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 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.)

Section A. All Supporting Organizations

	Yes	No
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 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>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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>		
c 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>		
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)? <i>If "Yes," answer line 10b below.</i>		
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)

Table with 3 columns: Question, Yes, No. Rows 11, 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2.

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1.

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3.

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3, 3a, 3b.

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	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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	

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

**Schedule B
(Form 990)**

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Attach to Form 990, 990-EZ, or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

2023

Name of the organization NATIONAL WATER RESEARCH INSTITUTE	Employer identification number 33-0481107
--	---

Organization type (check one):

- | | |
|--------------------|---|
| Filers of: | Section: |
| Form 990 or 990-EZ | <input checked="" type="checkbox"/> 501(c)(3) (enter number) organization |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation |
| | <input type="checkbox"/> 527 political organization |
| Form 990-PF | <input type="checkbox"/> 501(c)(3) exempt private foundation |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | <input type="checkbox"/> 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

NATIONAL WATER RESEARCH INSTITUTE

Employer identification number

33-0481107

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	ORANGE COUNTY WATER DISTRICT PO BOX 83000 Fountain Valley CA 92708	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	ORANGE COUNTY SANITATION DISTRICT 10844 ELLIS AVE Fountain Valley CA 92708	\$ 52,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	IRVINE RANCH WATER DISTRICT PO BOX 57000 Irvine CA 92619	\$ 54,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	INLAND EMPIRE UTILITIES AGENCY 6075 KIMBALL AVE Chino CA 91710	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	LADWP PO BOX 51111 Los Angeles CA 90051	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	METROPOLITAN WATER DISTRICT PO BOX 54153 Los Angeles CA 90054	\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization NATIONAL WATER RESEARCH INSTITUTE	Employer identification number 33-0481107
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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
7	<u>JIS & A CLARKE FOUNDATION</u> <u>19200 VON KARMAN AVE 700</u> <u>Irvine CA 92612</u>	\$ _____ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047 41

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Table with 2 columns: Name of the organization (NATIONAL WATER RESEARCH INSTITUTE) and Employer identification number (33-0481107)

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.

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements

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

Table with 3 columns: Question number, Description, and Held at the End of the Tax Year. Includes questions 1-9 regarding 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.

Table with 3 columns: Question number, Description, and Amount. Includes questions 1a, 1b, 2, a, b regarding art and historical treasures.

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				
d Equipment		13,680	13,680	
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, line 15 col. (B))	

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) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
Total. (Column (b) must equal Form 990, Part X, line 25 col. (B))		

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

SCHEDULE J (Form 990)

Compensation Information

OMB No. 1545-0047

2023

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 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

NATIONAL WATER RESEARCH INSTITUTE

33-0481107

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.

- First-class or charter travel
Travel for companions
Tax indemnification and gross-up payments
Discretionary spending account
Housing allowance or residence for personal use
Payments for business use of personal residence
Health or social club dues or initiation fees
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.

- Compensation committee
Independent compensation consultant
Form 990 of other organizations
Written employment contract
Compensation survey or study
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?

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?

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?

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)?

Table with 3 columns: Question ID, Yes, No. Rows correspond to questions 1a, 1b, 2, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, 8, 9.

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 KEVIN HARDY EXECUTIVE DIRECTOR	(i)	0	0	0	0	0	0	0
	(ii)	205,930	0	0	0	0	205,930	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

01. Related organization compensation method (Part I, line 3)

THE EXECUTIVE DIRECTOR'S PAY IS BASED ON THE MARKET RATE.

02. Unrelated organization compensation (Part II - officer info)

THE EXECUTIVE DIRECTOR WAS PAID BY A RELATED PARTY. NWRI REIMBURSES THE RELATED PARTY FOR THE COMPENSATION PAID BY THE RELATED PARTY.

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 48

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

2023

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

**Open to Public
Inspection**

Name of the organization

NATIONAL WATER RESEARCH INSTITUTE

Employer identification number

33-0481107

01. Members or stockholder classes and rights (Part VI, line 6)

THE ORGANIZATION IS FUNDED PRIMARILY THROUGH CONTRIBUTIONS FROM MEMBERS IN THE AREA OF
WATER RESEARCH. THERE ARE NO CLASSES OF MEMBERS.

02. Member election for additional members (Part VI, line 7a)

MEMBERS OF THE ORGANIZATION ARE APPOINTED AND NOT ELECTED.

03. Governing body decisions (Part VI, line 7b)

GOVERNING BODY DECISIONS ARE MADE BY VOTE.

04. Form 990 governing body review (Part VI, line 11)

COPIES OF THE FORM 990 ARE MADE AVAILABLE TO ALL BOARDMEMBERS. DISCUSSION AND REVIEW MAY
OR MAY NOT HAPPEN BEFORE FILING BASED ON MEETING DATES.

05. Conflict of interest policy compliance (Part VI, line 12c)

ALL BOARDMEMBERS ARE REQUIRED TO COMPLETE A DETAILED FORM WHICH DISCLOSES ANY FINANCIAL
CONFLICT OF INTEREST. BOARDMEMBERS ARE REQUIRED TO RECLUSE THEMSELVES FROM VOTING ON ANY
MATTERS IN WHICH THERE IS A CONFLICT OF INTEREST.

06. CEO, executive director, top management comp (Part VI, line 15a)

COMPENSATION FOR OFFICERS, DIRECTORS, AND KEY EMPLOYEES IS APPROVED BY THE BOARD OF
DIRECTORS. A SALARY SURVEY IS USED TO DETERMINE THAT THE APPROVED SALARIES ARE NOT
EXCESSIVE OR UNREASONABLE.

07. Other officer or key employee compensation (Part VI, line 15b)

SEE COMPENSATION DISCLOSURE ABOVE.

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

Schedule O (Form 990) 2023

Name of the organization

NATIONAL WATER RESEARCH INSTITUTE

Employer identification number

33-0481107

08. Governing documents, etc, available to public (Part VI, line 19)

GOVERNING DOCUMENTS AND TAX RETURNS ARE MADE AVAILABLE ON REQUEST.

09. List of other fees for services expenses (Part IX, line 11g)

OTHER PROFESSIONAL FEES REPRESENT PAYMENTS TO WATER RESEARCH CONSULTANTS.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047 50

2023

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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 for instructions and the latest information.

Name of the organization

NATIONAL WATER RESEARCH INSTITUTE

Employer identification number

33-0481107

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
(1)					
(2)					
(3)					
(4)					
(5)					

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
(1) ORANGE COUNTY WATER DISTRICT, 18700 WARD STREET Fountain Valley CA 92708	SAFEGUARD OC WATER SUPPLY	CA	115		N/A		X
(2)							
(3)							
(4)							
(5)							

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	
(1)												
(2)												
(3)												
(4)												
(5)												

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
(1)									
(2)									
(3)									
(4)									
(5)									

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
1 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?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		<input checked="" type="checkbox"/>
b Gift, grant, or capital contribution to related organization(s)		<input checked="" type="checkbox"/>
c Gift, grant, or capital contribution from related organization(s)		<input checked="" type="checkbox"/>
d Loans or loan guarantees to or for related organization(s)		<input checked="" type="checkbox"/>
e Loans or loan guarantees by related organization(s)		<input checked="" type="checkbox"/>
f Dividends from related organization(s)		<input checked="" type="checkbox"/>
g Sale of assets to related organization(s)		<input checked="" type="checkbox"/>
h Purchase of assets from related organization(s)		<input checked="" type="checkbox"/>
i Exchange of assets with related organization(s)		<input checked="" type="checkbox"/>
j Lease of facilities, equipment, or other assets to related organization(s)		<input checked="" type="checkbox"/>
k Lease of facilities, equipment, or other assets from related organization(s)		<input checked="" type="checkbox"/>
l Performance of services or membership or fundraising solicitations for related organization(s)	<input checked="" type="checkbox"/>	
m Performance of services or membership or fundraising solicitations by related organization(s)	<input checked="" type="checkbox"/>	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	<input checked="" type="checkbox"/>	
o Sharing of paid employees with related organization(s)	<input checked="" type="checkbox"/>	
p Reimbursement paid to related organization(s) for expenses		<input checked="" type="checkbox"/>
q Reimbursement paid by related organization(s) for expenses		<input checked="" type="checkbox"/>
r Other transfer of cash or property to related organization(s)		<input checked="" type="checkbox"/>
s Other transfer of cash or property from related organization(s)		<input checked="" type="checkbox"/>

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)			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(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		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													

990

Overflow Statement

2023

Page 1

(This page is not filed with the return. It is for your records only.)

Name(s) as shown on return

FEIN

NATIONAL WATER RESEARCH INSTITUTE

33-0481107

FORM 990, PART IX, LINE 24E, OTHER EXPENSES-GEN & ADMIN

Description

Amount

TELEPHONE

\$ 1,440

Total: \$ 1,440

TAXABLE YEAR

2023

California Exempt Organization Annual Information Return

FORM

199

Calendar Year 2023 or fiscal year beginning (mm/dd/yyyy) 07-01-2023, and ending (mm/dd/yyyy) 06-30-2024

Corporation/Organization name NATIONAL WATER RESEARCH INSTITUTE California corporation number 9768556

Additional information. See instructions. FEIN 33-0481107

Street address (suite or room) 18700 WARD STREET PMB no.

City FOUNTAIN VALLEY State CA ZIP code 92708

Foreign country name Foreign province/state/county Foreign postal code

A First return B Amended return C IRC Section 4947(a)(1) trust D Final information return? E Check accounting method F Federal return filed? G Is this a group filing? H Is this organization in a group exemption I Did the organization have any changes to its guidelines J If exempt under R&TC Section 23701d, has the organization engaged in political activities? K Is the organization exempt under R&TC Section 23701g? L Is the organization a limited liability company? M Did the organization file Form 100 or Form 109 to report taxable income? N Is the organization under audit by the IRS or has the IRS audited in a prior year? O Is federal Form 1023/1024 pending?

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

Table with 16 rows and 3 columns: Description, Amount, and Balance. Rows include Receipts and Revenues (1-8), Expenses (9-10), and Payments (11-15). Total gross income is 1,647,040.

Sign Here: Signature of officer KEVIN HARDY, Title EXECUTIVE DIR, Date 10/06/2024, Telephone 714-378-3278. Paid Preparer's Use Only: Preparer's signature Ron Lopez, Date 10/11/2024, Firm's name GRUBER AND LOPEZ, INC., Address 438 OLD NEWPORT BLVD NEWPORT BEACH, CA 92663, Telephone 949-346-2900.

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.

33-0481107

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	1	261	00
	2	Interest	2	15,783	00
	3	Dividends	3		00
	4	Gross rents	4		00
	5	Gross royalties	5		00
	6	Gross amount received from sale of assets (See instructions)	6		00
	7	Other income. Attach schedule	7		00
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	8	16,044	00
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule	9		00
	10	Disbursements to or for members	10		00
	11	Compensation of officers, directors, and trustees. Attach schedule	11	469,801	00
	12	Other salaries and wages	12	312,406	00
	13	Interest	13		00
	14	Taxes	14		00
	15	Rents	15		00
	16	Depreciation and depletion (See instructions)	16		00
	17	Other expenses and disbursements. Attach schedule	17	673,924	00
	18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	18	1,456,131	00

Schedule L Balance Sheet		Beginning of taxable year		End of taxable year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash		392,954		630,885
2	Net accounts receivable		222,073		172,460
3	Net notes receivable				
4	Inventories				
5	Federal and state government obligations				
6	Investments in other bonds				
7	Investments in stock		28,581		41,283
8	Mortgage loans				
9	Other investments. Attach schedule				
10 a	Depreciable assets	13,680			
b	Less accumulated depreciation	13,680			
11	Land				
12	Other assets. Attach schedule		2,788		1,978
13	Total assets		646,396		846,606
Liabilities and net worth					
14	Accounts payable		99,068		113,436
15	Contributions, gifts, or grants payable				
16	Bonds and notes payable				
17	Mortgages payable				
18	Other liabilities. Attach schedule		108,240		103,173
19	Capital stock or principal fund				
20	Paid-in or capital surplus. Attach reconciliation				
21	Retained earnings or income fund		439,088		629,997
22	Total liabilities and net worth		646,396		846,606

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	190,909	7	Income recorded on books this year not included in this return. Attach schedule	
2	Federal income tax		8	Deductions in this return not charged against book income this year. Attach schedule	
3	Excess of capital losses over capital gains		9	Total. Add line 7 and line 8	
4	Income not recorded on books this year. Attach schedule		10	Net income per return. Subtract line 9 from line 6	190,909
5	Expenses recorded on books this year not deducted in this return. Attach schedule				
6	Total. Add line 1 through line 5	190,909			

California Form 199 Supporting Statements

2023

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California Form 199

Part I - Line 3 -- Gross contributions, gifts, grants, and similar amounts received, Part I, Line 3

PG01

Name(s) shown on return

Identifying Number

NATIONAL WATER RESEARCH INSTITUTE

33-0481107

(a) Contributor's Name	(b) Contributor's Address	(c) Date Received	(d) Amount Received
INLAND EMPIRE UTILI	6075 KIMBALL AVE Chino, CA 91710	06-30-2024	50,000
IRVINE RANCH WATER	PO BOX 57000 Irvine, CA 92619	06-30-2024	54,000
LADWP	BOX 51111 Los Angeles, CA 90051	06-30-2024	50,000
METRO WATER DIST	PO BOX 54153 Los Angeles, CA 90054	06-30-2024	50,000
OC SANITATION	10844 ELLIS AVE Fountain Valley, CA 92708	06-30-2024	52,500
OC WATER DIST	PO BOX 8300 Fountain Valley, CA 92708	06-30-2024	50,000

PAGE TOTAL:

306,500

CAOVFLOW

State Supporting Statements

2023 Page 1

Name(s) as shown on return

SSN/FEIN

NATIONAL WATER RESEARCH INSTITUTE

33-0481107

FORM 100, PART II, LINE 17 - OTHER EXPENSES

Description	Amount
CONFERENCES	\$ 19,431
PRINTING	148
HONORARIUMS	455,858
CONTRIBUTIONS	52,101
ADMIN	27,121
TELEPHONE	1,440
TRAVEL	70,124
PROFESSIONAL FEES	47,701
Total:	\$ <u>673,924</u>

FORM 199, SCH L, LINE 18 - OTHER LIABILITIES

Description	Amount
DEFERRED REVENUE	\$ 103,173
Total:	\$ <u>103,173</u>

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

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.

(For Registry Use Only)

<p><u>NATIONAL WATER RESEARCH INSTITUTE</u> Name of Organization</p> <hr/> <p>List all DBAs and names the organization uses or has used</p> <p><u>18700 WARD STREET</u> Address (Number and Street)</p> <hr/> <p><u>FOUNTAIN VALLEY, CA 92708</u> City or Town, State, and ZIP Code</p> <hr/> <p><u>714-378-3278</u> <u>WWW.NWRI-USA.ORG</u> Telephone Number E-mail Address</p>	<p>Check if:</p> <p><input type="checkbox"/> Change of address</p> <p><input type="checkbox"/> Amended report</p> <hr/> <p>State Charity Registration Number <u>CT-134174</u></p> <hr/> <p>Corporation or Organization No. <u>9768556</u></p> <hr/> <p>Federal Employer ID No. <u>33-0481107</u></p>
--	---

**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 07-01-2023 ending 06-30-2024) list:

Total Revenue \$
(including noncash contributions) 1,647,040 **Noncash Contributions \$** _____ **Total Assets \$** 846,606

Program Expenses \$ 1,201,077 **Total Expenses \$** 1,456,131

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?		X
5. During this reporting period, did the organization receive any governmental funding?	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.

Signature of Authorized Agent	KEVIN HARDY	EXECUTIVE DIRE	10-06-2024
	Printed Name	Title	Date

National Water Research Institute
 July 1, 2023 through June 30, 2024
 CA Attorney General Supporting Statement

FORM RRF-1, PART B, LINE 5 - GOVERNMENTAL FUNDING:

33-0481107

<u>Name</u>	<u>Address</u>	<u>Amount</u>
Inland Empire Utilities Agency	6075 Kimball Avnue Chino, CA 91710	\$50,000.00
Irvine Ranch Water District	PO Box 57000, Irvine CA 92619-7000 949/252-8990	\$54,000.00
LADWP	Box 51111 Los Angeles, CA 90051-0100 213/367-3191	\$50,000.00
Metropolitan Water District	P.O. Box 54153, Los Angeles, CA 90054-0153 213/217-6000	\$50,000.00
Orange County Sanitation	10844 Ellis Avenue Fountain Valley, CA 92708 714/595-2192	\$52,500.00
Orange County Water District	PO Box 8300 Fountain Valley, CA 92729 714/454-2003	\$50,000.00