Lee M. Forrester, CPA

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August 15, 2016

Rudolph B. Shaffer, CEO Water4Life Ministry, Inc. PO Box 23361 San Diego, CA 92193

Re: Your Donation to Water4Life Ministry

Dear Rudy,

In response to your request for confirmation of your donation to the Ministry, this letter is to confirm that you personally donated \$50,000 in February 2015 to Water4Life Ministry, Inc.

For 2015 the Ministry filed with the Internal Revenue Service form 990EZ which does not require the completion of Schedule B (list of donors contributing \$5,000 or more). Therefore this letter can be used as supplemental information in the absence of Schedule B.

If a reader of the Ministry's 2015 form 990EZ seeks additional information regarding your donation, they are free to contact me.

Sincerely,

Lee M. Forrester, CPA

La Sancesta

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form, as it may be made public. Go to www.irs.gov/Form990EZ for instructions and the latest information.

A	For the 2022 calendar year, or tax year beginning , 2022, and ending					, 20			
В	Check if ap	ck if applicable: C Name of organization		D Employer identification number					
	Address c	change	Water4Life Ministry, Inc.	90-	90-0653224				
	Name change		Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone number		er			
H	Initial return		PO Box 23361	858	215080	1			
H	Amended	n/terminated	City or town, state or province, country, and ZIP or foreign postal code	F Grou	p Exempt	ion			
=		on pending	San Diego, CA 92193	Num	ber				
G	Account	ting Method:	X Cash	Check 2	Check 🗵 if the organization is not				
1 1	N ebsite	N/A			quired to attach Schedule B				
JI	ax-exen	npt status (che	eck only one) — 🗵 501(c)(3) 🔲 501(c) () (insert no.) 🔲 4947(a)(1) or 🔲 527	(Form 99	90).				
K	Form of	organization:	▼ Corporation						
L	Add lines	s 5b, 6c, and	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	al assets					
(Pa	rt II, col	umn (B)) are \$	\$500,000 or more, file Form 990 instead of Form 990-EZ		\$	182,653.			
P	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	instruc	tions for	r Part I)			
		Check if	the organization used Schedule O to respond to any question in this Part I			🔀			
	1	Contribution	ons, gifts, grants, and similar amounts received		1	105,204.			
	2	Program s	ervice revenue including government fees and contracts		2				
	3	Membersh	ip dues and assessments	[3				
	4	Investment	t income	[4				
	5a	Gross amo	ount from sale of assets other than inventory 5a						
	b	Less: cost	or other basis and sales expenses						
	С	Gain or (los		5c					
	6	Gaming an	d fundraising events:						
	а	Over the same from a series (attack Oaks take							
E		\$15,000)							
Revenue	b	Gross inco	me from fundraising events (not including \$ 0. of contribution)	ons					
æ			aising events reported on line 1) (attach Schedule G if the						
		sum of suc	ch gross income and contributions exceeds \$15,000) 6b 77	,449.					
	С			,883.					
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and su	btract					
		line 6c) .			6d	56,566.			
	7a		s of inventory, less returns and allowances						
	b		of goods sold						
	С		it or (loss) from sales of inventory (subtract line 7b from line 7a)		7c				
	8		nue (describe in Schedule O)	_	8				
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	161,770.			
Net Assets Expenses	10		d similar amounts paid (list in Schedule O)		10				
	11		aid to or for members		11				
	12		ther compensation, and employee benefits	-	12				
	13		al fees and other payments to independent contractors	-	13	2,563.			
	14		y, rent, utilities, and maintenance	-	14				
	.0	0.1	ublications, postage, and shipping	_	15	903.			
	16			16	141,758.				
	17	Total expe	enses. Add lines 10 through 16		17	145,224.			
	18		deficit) for the year (subtract line 17 from line 9)		18	16,546.			
	19		r figure reported on prior year's return)		10	14 017			
	00			_	19	14,017.			
	20		nges in net assets or fund balances (explain in Schedule O)		20	30 563			
_	21		or fund balances at end of year. Combine lines 18 through 20	<u> </u>	21	30,563.			
LOI	-raper\	work Reduct	ion Act Notice, see the separate instructions.		F	orm 990-EZ (2022			

REV 02/26/23 PRO

Form 990-EZ (2022)							Page 2	
	lance Sheets (see the in:		,					
Che	Check if the organization used Schedule O to respond to							
					(A) Beginning of year		(B) End of year	
	vings, and investments .				18,030.	22	23,054.	
	d buildings					23	00.00	
	sets (describe in Schedule (•		-	14,404.	24	23,695.	
	sets			_		25	46,749. 16,186.	
	bilities (describe in Schedu ets or fund balances (line 2					26 27	30,563.	
	tement of Program Serv		1 /			21	30,303.	
	eck if the organization use						Expenses	
	nization's primary exempt p			· ·			uired for section	
	ganization's program service	-					:)(3) and 501(c)(4) nizations; optional for	
as measured by	y expenses. In a clear and ed, and other relevant inform	d concise ma	anner, describe the			others		
	uted water filtrat			ons				
primari	ly in Africa and A			9.1.5				
	.							
(Grants \$	0.) If	this amount	includes foreign gra	ants, check here .		28a	87,356.	
29	,						•	
(Grants \$) If	this amount	includes foreign gra	ants, check here .		29a		
30								
	30							
(Grants \$) If	this amount	includes foreign gra	ants, check here .		30a		
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Form 99	990-EZ (2022)			P	age 4					
				Yes	No					
46	Did the organization engage, directly or indirectly, in political car									
	to candidates for public office? If "Yes," complete Schedule C, F	'art I	46		<u>×</u> _					
Part										
	All section 501(c)(3) organizations must answer quest	oles t	or line	es						
	50 and 51.				_					
	Check if the organization used Schedule O to respond to	o any question in this Part VI								
				Yes	No					
47		Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax								
		year? If "Yes," complete Schedule C, Part II								
48	Is the organization a school as described in section 170(b)(1)(A)(ii)?		48	_	×					
49a	,, g	49a 49b								
b	If "Yes," was the related organization a section 527 organization?									
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, t									
	employees) who each received more than \$100,000 of compens		iter "N	ione."						
	(b) Average									
	(a) Name and title of each employee hours per week devoted to position	(Forms W-2/1099-MISC/ benefit plans, and deferred ot	her com							
	· ·	1099-NEC) compensation								
None	e e									
	f Total number of other employees paid over \$100,000	· ·								
51	Complete this table for the organization's five highest compen \$100,000 of compensation from the organization. If there is none		eived	more	than					
	\$100,000 of compensation from the organization. If there is note	s, enter None.								
	(a) Name and business address of each independent contractor	(b) Type of service (c) Com	pensati	on						
None										
None	le									
	1. Total number of other independent contractors each receiving ov	ver \$100 000								
52	otal number of other independent contractors each receiving over \$100,000									
32	completed Schedule A	_	< Yes		No					
l Index n	penalties of perjury, I declare that I have examined this return, including accompanying									
	r penalties of perjury, i declare that i have examined this return, including accompanying correct, and complete. Declaration of preparer (other than officer) is based on all inform		age and	i bellet,	It is					
		04/04/2023								
Sign	Signature of officer	Date								
Here										
	Type or print name and title									
	Preparer's signature	Date	PTIN							
Paid	Too M Formator	O4/05/2023 Self-employed		9260	1					
•	parer	22.50								
Use (Only Firm's name LEE M. FORRESTER - CPA Firm's address 1515 TZENA WAY, ENCINITAS, CA	00004			<u> </u>					
May +	the IRS discuss this return with the preparer shown above? See ins		_							
iviay ti	the mo discuss this return with the preparer shown above? See life	structions	<u>_ res</u>	<u>×</u> 1	40					