-.... 8879-TE

IRS e-file Signature Authorization for a Tax Exempt Entity

Exempt Entity	
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For calendar year 2021, or fiscal year beginning

, 2021, and ending _____

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Do not send to the IRS. Keep for your records.Go to www.irs.gov/Form8879TE for the latest information.

Name of filer

EIN or SSN 91-1937417

Name and title of officer or person subject to tax MITCHELL BATEMAN

TREASURER

Part I	Type of Retur	n and Return	Information
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WASHINGTON WATER TRUST

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

lai i Oi	io iii io ii i i dit i.		
1a	Form 990 check here ► X	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b <u>1,645,764</u>
2a	Form 990-EZ check here >	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a	Form 1120-POL check here ▶	b Total tax (Form 1120-POL, line 22)	3b
4a	Form 990-PF check here >	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b
5a	Form 8868 check here	b Balance due (Form 8868, line 3c)	5b
6a	Form 990-T check here >	b Total tax (Form 990-T, Part III, line 4)	6b
7a	Form 4720 check here >	b Total tax (Form 4720, Part III, line 1)	7b
8a	Form 5227 check here	b FMV of assets at end of tax year (Form 5227, Item D)	8b
9a	Form 5330 check here >	b Tax due (Form 5330, Part II, line 19)	9b
10a	Form 8038-CP check here	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b
Part	II Declaration and Signat	ure Authorization of Officer or Person Subject to Tax	
Jnder _I	penalties of perjury, I declare that $oxed{X}$	I am an officer of the above entity or I am a person subject to tax with r	espect to (name
of entity	y)	, (EIN) and that I ha	ave examined a copy of the
021 e	ectronic return and accompanying sch	edules and statements, and, to the best of my knowledge and belief, they are	true, correct, and

2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

ΡI	N:	check	one	box	only
----	----	-------	-----	-----	------

X authorize BPM LLP	to enter my PIN	08081
ERO firm name		Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the

return. If I have indicated within this return that a copy of the return is being filed with a state agency(les) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Date

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

91398698015

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS _{e-file} Providers for Business Returns.

ERO's signature ▶ JEFFREY K. MOCK

______ Date **>** __11/14/22

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print WASHINGTON WATER TRUST 91-1937417 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 1500 WESTLAKE AVE N, SUITE 202 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 98109 SEATTLE, WA Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 12 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (corporation) WASHINGTON WATER TRUST The books are in the care of ► 1500 WESTLAKE AVE N, SUITE 202 - SEATTLE, WA 98109 Telephone No. ► 206-675-1585 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2022 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2021 or ___ tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

MAIL TO: DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0045

EXTENDED TO NOVEMBER 15, 2022

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

▶ 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

OMB No. 1545-0047

A F	or th	e 2021 calendar year, or tax year beginning	and	ending	_	
B	Check if applicab	C Name of organization			D Employer identific	cation number
Г	Addre					
	Name chang				91-19374	17
	Initial return	Number and street (or P.0. box if mail is not deli	vered to street address)	Room/suite	E Telephone number	
	☐Final return	1500 WESTLAKE AVE N, SU	UITE 202		206-675-	
	termir ated		ZIP or foreign postal code		G Gross receipts \$	1,645,764.
Ļ	Amen	SEATTLE, WA 90109			H(a) Is this a group re	
	Application pendi	F Name and address of principal officer: O AND			for subordinates	·····= =
_		1500 WESTLAKE AVE N, SUI			H(b) Are all subordinates in	
			(insert no.) 4947(a)(1)	or 527	1 ′	list. See instructions
		te: ► WWW.WASHINGTONWATERTRUS forganization: X Corporation Trust Ass	Sociation Other	I Voor	H(c) Group exemptio	n number ► 1 State of legal domicile: WA
	art I		Sociation Unite	L Year	or formation: 1990 N	A State of legal domicile: WA
•	1	Briefly describe the organization's mission or most s	significant activities: SEE	SCHEDII	LE O	
e	'	briefly describe the organization's mission of most	significant activities. DDD	БСППБО		
Governance	2	Check this box if the organization discon	tinued its operations or dispos	sed of more	than 25% of its net ass	sets.
Ver	3	Number of voting members of the governing body (•		3	15
	4	Number of independent voting members of the government				15
ري م	5	Total number of individuals employed in calendar years				12
/itie	6	Total number of volunteers (estimate if necessary)				0
Activities &	7 a	Total unrelated business revenue from Part VIII, colu				0.
_	b	Net unrelated business taxable income from Form 9	990-T, Part I, line 11	<u></u>	7b	0.
					Prior Year	Current Year
<u>o</u>	8				1,410,730.	1,402,462.
Revenue	9				105,370.	242,740.
Şe.	10	Investment income (Part VIII, column (A), lines 3, 4,			811.	562.
_	11	Other revenue (Part VIII, column (A), lines 5 , $6d$, $8c$,			6,443.	0.
	12	Total revenue - add lines 8 through 11 (must equal F			1,523,354.	1,645,764.
	13	Grants and similar amounts paid (Part IX, column (A			0.	0.
	14	Benefits paid to or for members (Part IX, column (A)			0. 845,911.	0. 959,578.
ses	15	Salaries, other compensation, employee benefits (P			0.	959,578.
Expenses	16a	Professional fundraising fees (Part IX, column (A), lir Total fundraising expenses (Part IX, column (D), line			0.	0.
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d,			756,133.	757,999.
		Total expenses. Add lines 13-17 (must equal Part IX			1,602,044.	1,717,577.
		Revenue less expenses. Subtract line 18 from line 1			-78,690.	-71,813.
Or Se	1.0			Be	ginning of Current Year	End of Year
ets	20	Total assets (Part X, line 16)			1,219,318.	1,408,790.
ASS	21	Total liabilities (Part X, line 26)			614,404.	875,689.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from I	ine 20		604,914.	533,101.
Pa	art II	Signature Block				
		alties of perjury, I declare that I have examined this return, i				knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer	r) is based on all information of wh	nich preparer	has any knowledge.	
		Signature of officer			Doto	
Sig		' -	IIIDED		Date	
Her	е	MITCHELL BATEMAN, TREAS Type or print name and title	UKEK			
		,	Duanauaula aismakuua	Τr	Date Check	PTIN
Paid			Preparer's signature JEFFREY K. MOCK		1/14/22 Self-employ	
	ı Darer	Firm's name BPM LLP	JEFREI R. MOCK	<u> </u>		81-4234542
-	Only	Firm's address 12600 SE 38TH STF	REET. SUITER 245		FIIIII S EIIV	<u> </u>
	Jy	BELLEVUE, WA 9800			Phone no 42	5-401-5061
May	/ the I	RS discuss this return with the preparer shown above			I Holle Ho. 42	X Yes No

1 0	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: SEE SCHEDULE O	
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 X No
	If "Yes," describe these new services on Schedule O.	—
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	al expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$1,088,159. including grants of \$) (Revenue \$)	242,740.
	SEE SCHEDULE O	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$,
40	(Code:) (Expenses \$	
4c	(Code:) (Expenses \$) (Revenue \$)	
1 4	Other program convices (Describe on Schodule O.)	
4d	Other program services (Describe on Schedule O.)	1
40	(Expenses \$ including grants of \$) (Revenue \$	J

Form 990 (2021) WASHINGTON WATER TRUST
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	_
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			,,
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			,,
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			ا
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

91-1937417

Form 990 (2021) WASHINGTON WATER TRUST

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			۱
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		X
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		-25
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		<u> </u>
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
25.0	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		\vdash^{Δ}
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 00		
•	and that is treated as a partnership for federal income tax purposes? If "Yes." complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
		38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

Form 990 (2021) WASHINGTON WATER TRUST

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		7.7	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4-		X
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	4a		
b	See instructions for filling 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		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		Х
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).			
а	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	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
0	sponsoring organization have excess business holdings at any time during the year?	8		
9 a	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	0.0		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.			
D	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			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	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?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2021) WASHINGTON WATER TRUST 91-1937417 Page
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
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	5		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1	킬		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		v	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		v	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Λ	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45	Х	
	The organization's CEO, Executive Director, or top management official	15a		₩
b	Other officers or key employees of the organization	15b		X
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		Х
	taxable entity during the year?	16a		
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		
800	exempt status with respect to such arrangements? tion C. Disclosure	16b		
17	• • • • • • • • • • • • • • • • • • • •	ادامه ما	مانمىرە	
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 for public inspection. Indicate how you made these available. Check all that apply.	jo Urily)	avallä	υI C
10	Own website Another's website W Upon request Other (explain on Schedule O)	d finan	nio!	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	iu iinan	Jidl	
00	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 NASHINGTON WATER TRUST - 206-675-1585			
	1500 WESTLAKE AVE N, SUITE 202, SEATTLE, WA 98109			
	TOOO HEDIELLINE IN THE DOTTE AVAI DEBTIEL, MY JOIN			

Page 7

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

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

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

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

See the instructions for the order in which to list the persons above.

Check this box if neither the organization r	nor any related	orga	niza	tion	con	nper	sate	ed any current officer, d	irector, or trustee.	
(A)	(B)			_ (0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos heck		າ than ເ	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is both or/trus	n an	compensation	compensation	amount of
	week		Cer ai	lu a u	recic	Tritus	iee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee		1099-NEC)	1000 NEO)	and related
	below	dualt	ution	<u></u>	Key employee	st co	er			organizations
	line)	Indiv	Instit	Officer	Key e	Highe	Former			
(1) JAMES KRAFT	40.00									
EXECUTIVE DIRECTOR				Х				103,600.	0.	0.
(2) TOM RING	1.00									
COMMITTEE CHAIR		Х				<u> </u>		0.	0.	0.
(3) BEN EICKHOFF	1.00									
COMMITTEE CHAIR		Х				_		0.	0.	0.
(4) WILL STELLE	2.00								_	_
PRESIDENT		Х				_		0.	0.	0.
(5) SUZANNE SKINNER	0.50								_	_
SECRETARY		Х				_		0.	0.	0.
(6) MITCHELL BATEMAN	0.50								_	_
TREASURER		Х				_		0.	0.	0.
(7) DALE BAMBRICK	1.00								_	_
VPRESIDENT; COMMITTEE CHAIR		Х				_		0.	0.	0.
(8) CHRISTIE TRUE	0.50								_	_
DIRECTOR		Х				_		0.	0.	0.
(9) KIM MUELLER	0.50									
DIRECTOR		Х				_		0.	0.	0.
(10) ROB LOTHROP	0.50								_	_
DIRECTOR		Х				_		0.	0.	0.
(11) AMANDA CRONIN	0.50									
DIRECTOR	<u> </u>	Х				_		0.	0.	0.
(12) LA TRISHA SUGGS	0.50	l								
DIRECTOR		Х				_		0.	0.	0.
(13) JESSICA LEVIN	0.50	l								
DIRECTOR	0.50	Х	_			┝		0.	0.	0.
(14) LORRI BODI	0.50	.,								
DIRECTOR	0.50	X	-			┢		0.	0.	0.
(15) CLEVE STEWARD	0.50	₹,							_	_
OIRECTOR (16) RICK KIRKBY	0.50	Х				-		0.	0.	0.
	0.50	X						0.	0.	_
DIRECTOR		^	\vdash	\vdash	-	\vdash		1	U •	0.
		1								
						1				

Form 990 (2021) 132007 12-09-21

	990 (2021) WASHINGTO									91-193	741	.7	Page 8
Pai	t VII Section A. Officers, Directors, Trust		oloy	ees,			ghes	st C	compensated Employee	s (continued)			
	(A) Name and title	(B) Average hours per week	box	not c , unle:	ss per	ition more rson i	than of strus	n an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amour othe	ated nt of
		(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	ompen from organiz and rel organiza	the ation ated	
									100 500				
С	Subtotal Total from continuation sheets to Part VII Total (add lines 1b and 1c)							>	103,600. 0. 103,600.	0 0 0			0. 0.
2	Total number of individuals (including but no compensation from the organization							o re	•				1
3	Did the organization list any former officer,											Ye	s No X
4	line 1a? If "Yes," complete Schedule J for so For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	е со	mpe	ensa	tion	and	oth	ner compensation from t	ne organization		í	X
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes." comtion B. Independent Contractors	ccrue comper	sati	on fr	om	any	unre	elate	ed organization or individ	dual for services		5	X
1	Complete this table for your five highest cor the organization. Report compensation for t										sation	from	
	(A) Name and business			ONE					(B) Description of s		Com	(C) pensat	ion
	Total number of independent contractors (in	ncludina but n	ot lin	nited	d to 1	thos	se lis	ted	above) who received mo	ore than			
	\$100,000 of compensation from the organiz	ŭ				C					Fo	990	(2021)

91-1937417

Form 990 (2021) WASHINGTON WATER TRUST
Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
		Officer if Confeder C Confeder a response	or riote to arry in	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
S so	1	a Federated campaigns 1a					
ant				1			
9			30,035.	1			
Ŧ\$,			30,033.				
ig ig			151,701.	-			
Sir			131,701.				
atio		f All other contributions, gifts, grants, and	220,726.				
έş		similar amounts not included above 1f	220,720.	-			
Contributions, Gifts, Grants and Other Similar Amounts		g Noncash contributions included in lines 1a-1f		1,402,462.			
O a		h Total. Add lines 1a-1f	Business Code	1,402,402.			
	_	WAMED DICUM DDOCDAM	900099	242,740.	242 740		
<u>ic</u>	2		300033	242,740.	242,740.		
er Ne		b					
n S		c					
Jrar Be		d					
Program Service Revenue		e					
۱ ۵		f All other program service revenue		242 740			
		g Total. Add lines 2a-2f		242,740.			
	3	,		F.C.2			F 6 2
		other similar amounts)		562.			562.
	4	' '					
	5	,					
		(i) Real	(ii) Personal	-			
	6						
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
		b Less: cost or other basis					
ne		and sales expenses 7b					
Ver		c Gain or (loss)					
her Revenue		d Net gain or (loss)	<u> </u>				
	8	a Gross income from fundraising events (not					
₽		including \$ 30 , 035 . of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		b Less: direct expenses 8b	0.				
		c Net income or (loss) from fundraising events	<u> </u>	0.			
	9	a Gross income from gaming activities. See					
		Part IV, line 199a	1				
		b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities	.				
	10	a Gross sales of inventory, less returns					
		and allowances 10	a				
		b Less: cost of goods sold10l	b				
		c Net income or (loss) from sales of inventory .	<u> </u>				
σ			Business Code				
on e	11	a					
Miscellaneous Revenue		b					
Sek Sek		c					
Ais H		d All other revenue					
		e Total. Add lines 11a-11d)				
	12	Total revenue See instructions		1.645.764.	242.740.	1. 0.	562.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (B)
Program service
expenses (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 103,600. 67,385. 7,656. 28,559. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 183,330. Other salaries and wages 665,056. 432,578. 49,148. 7 Pension plan accruals and contributions (include 14,275. 5,858. 7,397. 1,020. section 401(k) and 403(b) employer contributions) 112,301. 112,301. Other employee benefits 9 64,346. 36,715. 23,316. 4,315. 10 Payroll taxes 11 Fees for services (nonemployees): Management 17,605. 17,605. Legal 29,151. 29,151. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 234,936. 231,328. 2,864. 744. column (A), amount, list line 11g expenses on Sch O.) 10,631. 3,427.7,033. 171. Advertising and promotion 12 41,227. 7,360. 28,528. 5,339. Office expenses 13 72,289. 230. 72,002. 57. Information technology 14 15 Royalties 61,854. 61,854. 16 Occupancy 10,884. 10,712. 972. -800. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 4,632. 4,632. Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 24 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.) 256,017. 256,017. WATER RIGHTS PROGRAM EX FUNDRAISING AND DEVELOP 18,773. 13,799. 4,668. 306. С d All other expenses 1,717,577. 1,088,159. 561,462. 67,956. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

Form 990 (2021)
Part X Balance Sheet

Par	<u> t X</u>	Balance Sheet					
		Check if Schedule O contains a response or r	note to a	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	255,195.	1	387,351.		
	2	Savings and temporary cash investments			444,252.	2	774,067.
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net	495,926.	4	231,986.		
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul	ostantial	contributor, or 35%			
		controlled entity or family member of any of the	nese per	sons		5	
	6	Loans and other receivables from other disqu	alified p				
		under section 4958(f)(1)), and persons describ	ed in se	ction 4958(c)(3)(B)		6	
ş	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			13,771.	9	9,844.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	64,661.			
	b	Less: accumulated depreciation	. 10k	59,119.	10,174.	10c	5,542.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, lin			12		
	13	Investments - program-related. See Part IV, lin			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must e	qual line	33)	1,219,318.	16	1,408,790.
	17	Accounts payable and accrued expenses			147,505.	17	252,773.
	18	Grants payable		18			
	19	Deferred revenue			251,764.	19	384,117.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	te Part I	of Schedule D		21	
Se	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, sul					
iab		controlled entity or family member of any of the	nese per	sons		22	
_	23	Secured mortgages and notes payable to unr		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lir		′ '	015 105		000 500
		of Schedule D			215,135.		238,799.
	26	Total liabilities. Add lines 17 through 25			614,404.	26	875,689.
s		Organizations that follow FASB ASC 958, c	heck he	re 🕨 🔼			
JCe		and complete lines 27, 28, 32, and 33.			222 500		222 500
alar	27	Net assets without donor restrictions			223,598.	27	223,598.
Ä	28	Net assets with donor restrictions			381,316.	28	309,503.
Ĭ.		Organizations that do not follow FASB ASC	958, cl	ieck here			
Ϋ́		and complete lines 29 through 33.					
ts (29	Capital stock or trust principal, or current fund				29	
SSE	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			604,914.	31	533,101.
ž	32	Total lightilities and not see the first balances			1,219,318.	32	1,408,790.
	33	Total liabilities and net assets/fund balances			1,419,310.	33	1,408,790.

Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,64		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,71		
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>13.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	60	4,9	14.
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	53	3,1	01.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
	•			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing				
	Act and OMB Circular A-133?	-	. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2021)

SCHEDULE A

(Form 990)

Total

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

2021

Open to Public Inspection

Employer identification number Name of the organization WASHINGTON WATER TRUST 91-1937417 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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: 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). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 X 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other vour governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

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16a 33 1/3% support test - 2021. 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 b 33 1/3% support test - 2020. 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 - 2021. 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 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, 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	14	Public support percentage for 2021 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	%
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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	18	•				•		▶ □

Schedule A (Form 990) 2021 WASHINGTON WATER TRUST | 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 \

Se	ction A. Public Support	elow, please comp	lete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	(4) =0	(2) = 0 : 0	(0) =0 :0	(4) = = = =	(5) = 5 = 1	(1)
-	membership fees received. (Do not						
	include any "unusual grants.")	199,916.	310,895.	179,782.	455,244.	250,761.	1396598.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1404106.	1267823.	1402957.	1067299.	1394441.	6536626.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	1604022.	1578718.	1582739.	1522543.	1645202.	7933224.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
(Add lines 7a and 7b						0.
8	Public support. (Subtract line 7c from line 6.)						7933224.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	1604022.	1578718.	1582739.	1522543.	1645202.	7933224.
10a	dross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	529.	1,333.	1,550.	811.	562.	4,785.
k	Unrelated business taxable income (less section 511 taxes) from businesses		,	,			,
	acquired after June 30, 1975		1 222	4	0.1.1		4 505
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	529.	1,333.	1,550.	811.	562.	4,785.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	1604551.	1580051.	1584289.	1523354.	1645764.	7938009.
14	First 5 years. If the Form 990 is for the	e organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3) organizatio	n,
							>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2021 (li	ine 8, column (f), d	ivided by line 13, c	olumn (f))		15	99.94 %
	Public support percentage from 2020					16	99.94 %
Se	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	21 (line 10c, colun	nn (f), divided by lir	ne 13, column (f))		17	.06 %
18	Investment income percentage from 2	2020 Schedule A,	Part III, line 17			18	.06 %
19a	a 33 1/3% support tests - 2021. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 33	3 1/3%, and line 17	
k	more than 33 1/3%, check this box ar 33 1/3% support tests - 2020. If the	-	-	•	•		▶ X
	line 18 is not more than 33 1/3%, che						>
20	Private foundation. If the organizatio						

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in 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).
- **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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **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? If "Yes." provide detail in **Part VI.**
- 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? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations	-		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one	or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	ers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one suppor organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations	•		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualif	ying trust on N	ov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations m		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	ınization (see

Schedule A (Form 990) 2021

instructions).

Par	t v Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continu}	<u>ied) </u>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	1	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	ıs	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
ее	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i_	Carryover from 2016 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
<u>b</u>	Applied to 2021 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
	Excess from 2018				
с	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

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

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization Employer identification number

WASHINGTON WATER TRUST 91-1937417

Organization type (check one):

Filers of: Section:

Form 990 or 990-EZ X 501(c)(3) (enter number) organization

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

527 political organization

Form 990-PF 501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

X 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 ______ \bigsim \frac{\text{\$\

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).

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

Schedule B (Form 990) (2021)

Name of organization Employer identification number

WASHINGTON WATER TRUST

91-1937417

Part I	Contributors (see instructions). Use duplicate copies of Part I if an	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$125,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

WASHINGTON WATER TRUST

91-1937417

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	Cabadala P. (Farra 000) (0004)

Name of organization Employer identification number

ırt III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a)			(c)(7), (8), or (10) that total more than \$1,000 for the
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 o	try. For org	e year. (Enter this info. once.) \$
	Use duplicate copies of Part III if additional	space is needed.		
No. om art I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
			_	
-		(e) Transfer of gi	 ft	
	Transferee's name, address, ar	nd ZIP + 4	Rel	lationship of transferor to transferee
No. om	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
nrt I				
			f t	
	Transferee's name, address, ar	(e) Transfer of gi		lationship of transferor to transferee
	Transferee's name, address, ar			lationship of transferor to transferee
No	Transferee's name, address, an			lationship of transferor to transferee
No. om irt I	Transferee's name, address, an (b) Purpose of gift			(d) Description of how gift is held
No. om art I		nd ZIP + 4		
No. om art I		nd ZIP + 4	Rel	
No. om art I		(c) Use of gift (e) Transfer of gi	Rel	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

WASHINGTON WATER TRUST

Employer identification number 91-1937417

organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of prants from (during year) Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, for far ny other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a certified historic structure Preservation of open space Complete inse 2 at through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements included in (a) qualified conservation contribution in the form of a conservation easement in the last day of the tax year. Number of conservation easements included in (a) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year P A mount of expenses incurred in the conservation easements is holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year P S Does each conservation easement reported on line 2(d) above satisfy
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b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance
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provide the following amounts relating to these items:
(i) Revenue included on Form 990, Part VIII, line 1 * \$
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide
the following amounts required to be reported under FASB ASC 958 relating to these items:
the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$\Bigsim \frac{1}{2} = \fra

Par	t III Organizations Maintaining Co	ollections of Ar	t, Histo	orical Tre	easures, or	Other \$	Similar	Assets	(continu	ıed)	
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the	following that	make sigr	nificant u	se of its			
	collection items (check all that apply):										
а	Public exhibition	c	i 🔲 i	Loan or exc	hange progra	m					
b	Scholarly research	e	• 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	n how th	ey further th	ne organizatio	n's exemp	t purpos	se in Part	XIII.		
5	During the year, did the organization solicit or	r receive donations	of art, his	storical treas	sures, or othe	r similar a	ssets				
	to be sold to raise funds rather than to be ma	intained as part of t	he organ	nization's co	llection?				Yes		No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	organizatio	n answered "	Yes" on F	orm 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an or other intermed	liary for o	contribution	s or other ass	ets not ind	cluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amount		
С	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo						?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planatio	n has been	provided on F	Part XIII					
Par	t V Endowment Funds. Complete if	f the organization an	swered	"Yes" on Fo	rm 990, Part	IV, line 10					
		(a) Current year	(b) P	rior year	(c) Two year	s back (c	i) Three y	ears back	(e) Four y	ears b	ack
1a	Beginning of year balance										
	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g	, column (a)) held as:	•			•		
а	Board designated or quasi-endowment		%	,,	,						
	Permanent endowment		_								
	. · · · · · · · · · · · · · · · · · · ·	 %									
	The percentages on lines 2a, 2b, and 2c should equal 100%.										
За	Are there endowment funds not in the posses	ssion of the organiza	ation that	t are held ar	nd administere	ed for the	organiza	tion			
	by:	-							\[\bar{\gamma}\]	/es	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizate	tions listed as requir	red on So	chedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Par											
	Complete if the organization answered	d "Yes" on Form 990), Part IV	, line 11a. S	See Form 990,	Part X, lir	ne 10.				
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Acc	umulate	d	(d) Book	value	
	,	basis (investr	ment)	basis	(other)	depr	eciation		. ,		
1a	Land										
	Buildings										
	Leasehold improvements										
d	Equipment		661.			į	59,11	L9.	5	,54	2.
е	Other										
	Add lines 1a through 1e. (Column (d) must ed		X colum	n (R) line 1	0c.)			ightharpoonup	5	,54	2.

Schedule D	(Form 990) 2021	WASHINGTON	WATER	TRUST		91-193741
Part VII	Investments - Of	ther Securities.				
	Complete if the organ	ization answered "Yes'	on Form 99	90, Part IV, lir	e 11b. See Form 990, Part X, line 12.	

(b) Book value	(c) Method of valuation: Cost or end-of-year market value
	(b) Book value

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 (Col. (h) must equal Form 990, Part X, col. (B) line 13.)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►
Part IX Other Assets.

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

(a) Description		(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)	_	
Total (Column /b) must equal Form 000 Port V and (D) line 15		

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.

<u>1. </u>	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	ACCRUED PAYROLL LIABILITIES	60,857.
(3)	PPP LOAN	177,942.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	238,799.

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 G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization Employer identification number WASHINGTON WATER TRUST 91-1937417 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С g In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration

or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events FESTIVAL & NONE (add col. (a) through AUCTIONS col. (c)) (event type) (event type) (total number) 30,035. 30,035. Gross receipts 30,035. 30,035. 2 Less: Contributions **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990) 2021 WASHINGTON WATER TRUST 91-1937417 11 Does the organization conduct gaming activities with nonmembers? Yes 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes 13 Indicate the percentage of gaming activity conducted in: a The organization's facility 13a	 No № % % %
to administer charitable gaming? 13 Indicate the percentage of gaming activity conducted in: a The organization's facility b An outside facility 13a 13b	% %
13 Indicate the percentage of gaming activity conducted in: a The organization's facility 13a b An outside facility 13b	% %
a The organization's facility b An outside facility 13a 13b	%
b An outside facility	
Name ▶	
Address >	☐ No
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes	
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount	
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
Name	
Address ▶	
16 Gaming manager information:	
Name	
Gaming manager compensation ▶ \$	
,	
Description of services provided	
Diversity of the second section of the second section of the section of the second section of the section	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes	□ No
retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	
organization's own exempt activities during the tax year ▶ \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9l 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	b, 10b,
135, 136, 16, and 175, as applicable. Also provide any additional mormation. See instructions.	

Schedule G	(Form 990)	WASHINGTON	WATER	TRUST	91-1937417	Page 4
Part IV	(Form 990) Supplemental Info	ormation (continued)				

SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 **Open to Public** Inspection

Name of the organization

WASHINGTON WATER TRUST

Employer identification number 91-1937417

FORM 990 , ORGANIZATION'S MISSION:
WASHINGTON WATER TRUST IS A NONREGULATORY, NONPROFIT, DEDICATED TO
IMPROVING AND PROTECTING STREAM FLOWS AND WATER QUALITY THROUGHOUT
WASHINGTON STATE. WE USE VOLUNTARY, MARKET-BASED TRANSACTIONS AND
COOPERATIVE PARTNERSHIPS TO CREATE BALANCED SOLUTIONS SO FISH,
AGRICULTURE, BUSINESS AND WILDLIFE - UPON WHICH WE ALL DEPEND - CAN
THRIVE.
FORM 990 , PART III, LINE 4A-FIRST ACCOMPLISHMENT:
WATER RIGHTS PROGRAM: WE LEASE AND BUY WATER FROM WATER RIGHTS HOLDER,
TEMPORARILY OR PERMANENTLY TO LEAVE INSTREAM, TO IMPROVE AND PROTECT
FLOWS, ESPECIALLY DURING PERIODS THAT ARE CRITICAL TO THE SURVIVAL OF
IMPERILED SALMON AND STEELHEAD.WASHINGTON WATER TRUST ALSO WORKS TO
DEVELOP INNOVATIVE SOLUTIONS WITH WATER RIGHTS HOLDERS WHO ARE LOOKING
FOR A MORE COST-EFFECTIVE WAYS TO USE THEIR WATER. DRAWING FROM AN
EXTENSIVE NETWORK OF PARTNERSHIPS WITH AGRICULTURAL PRODUCERS,
CONSERVATION DISTRICTS, IRRIGATION DISTRICTS, LAND TRUST, LANDOWNERS,
LEGAL EXPERTS, STATE AGENCIES, TRIBES AND OTHER STAKEHOLDERS,
WASHINGTON WATER TRUST IS ABLE TO BRING TO THE TABLE BALANCED, MUTUALLY
BENEFICIAL IDEAS THAT ARE PROVEN TO WORK.
WATER RICHTS ACCUITSITION AND TRANSFER

IN WASHINGTON, WATER RIGHTS REPRESENT LEGAL AUTHORITY BY STATE, FEDERAL Schedule O (Form 990) 2021 Page **2**

Name of the organization

WASHINGTON WATER TRUST

Employer identification number 91-1937417

AND TRIBAL GOVERNMENTS FOR WATER RIGHT HOLDERS TO WITHDRAW SURFACE OR

GROUNDWATER FOR MULTIPLE USES. WATER RIGHTS IDENTIFY THE SOURCE OF

WATER WITHDRAWAL, HOW IT MAY BE USED, WHEN IT CAN BE DIVERTED, HOW MUCH

CAN BE DIVERTED, AND ITS SENIORITY RELATIVE TO OTHER RIGHTS IN THE SAME

WATERSHED. IF WATER IS EVER IN SHORT SUPPLY, AN INDIVIDUAL HOLDING A

"SENIOR" WATER RIGHT MAY BE THE ONLY ONE ABLE TO DRAW WATER FROM THIS

SOURCE. THE RIGHT TO USE WATER MAY BE TRANSFERRED FROM ONE USER TO

ANOTHER, AND RIGHTS CAN BE BOUGHT AND SOLD. ACQUISITION IS AN IMPORTANT

TOOL FOR STREAMFLOW RESTORATION BECAUSE WATER RIGHTS MAY ALSO BE

PURCHASED AND TRANSFERRED TO THE STATE TRUST WATER PROGRAM WHERE THEY

CAN BE PROTECTED AGAINST WITHDRAWAL FOR FLOW RESTORATION. THE WATER

TRUST ENGAGES IN THE PURCHASE, LEASING AND SALE OF WATER RIGHTS IN

PRIORITY BASINS AS A STRATEGY TO BENEFIT FLOW AND HABITAT. FOR MORE

DETAIL ON WATER RIGHTS AND THE PROCESS OF ACQUISITION AND TRANSFER, SEE

ORGANIZATION WEBSITE.

WATER BANKING

WATER BANKING REPRESENTS A MANAGEMENT TOOL TO PROVIDE FLEXIBILITY TO

WATER USERS. SOME REGIONS OF WASHINGTON HAVE POPULATIONS AND ASSOCIATED

WATER USES THAT HAVE GROWN TO CAPACITY; HERE THE STATE MAY DETERMINE

THAT NO MORE WATER RIGHTS CAN BE ASSIGNED BECAUSE RIVERS AND AQUIFERS

ARE BECOMING DANGEROUSLY LOW. THESE DETERMINATIONS, CALLED INSTREAM

FLOW RULES, RESERVE ANY EXTRA WATER IN A SYSTEM TO ENSURE BALANCE TO

THE TOTAL SUPPLY. WHEN NEWCOMERS TO THESE AREAS WISH TO START USING

WATER, E.G., TO PROVIDE FOR A NEWLY BUILT HOME, THEY WILL NEED TO

MITIGATE FOR THIS USE BY FINDING AN EXISTING WATER RIGHT (OR USE) THAT

CAN BE RETIRED. WATER BANKS OF EXCHANGES TO HELP THESE AREAS OF

SCARCITY WITH RESTORATION AND SUSTAINABLE GROWTH. A WATER BANK

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization **Employer identification number** 91-1937417 WASHINGTON WATER TRUST PURCHASES WATER FROM WILLING SELLERS, GETS THE WATER RIGHTS VETTED AND APPROVED BY THE STATE AND TRANSFERS THE RIGHT TO THE STATE TRUST WATER PROGRAM. THE WATER BANK MAY THEN SELL A MITIGATION CERTIFICATE FOR WATER USE TO INDIVIDUALS OR COMPANIES SEEKING TO MITIGATE THEIR WATER USE. OFTEN, A WATER BANK WILL PURCHASE A LARGE WATER RIGHT UPSTREAM, THEN "SHAVE OFF" SMALL PORTIONS OF THAT RIGHT FOR SALE TO NEW WATER USERS WHILE RESERVING THE BALANCE FOR FLOW RESTORATION. WASHINGTON WATER TRUST MANAGES WATER BANKING PROGRAMS IN SELECT WATERSHEDS. FOR MORE DETAIL AND AN EXAMPLE OF WATER BANKING, SEE WASHINGTON WATER TRUST'S WEBSITE. CONSULTATION: WATER MANAGEMENT ALTERNATIVES, CONSERVATION AND WATER RIGHTS ASSESSMENT WATER RIGHTS IN THE WESTERN UNITED STATES ARE MULTI- DIMENSIONAL, AND CRITICAL TO ECOLOGY AND THE ECONOMY. THE WATER TRUST WORKS WITH WATER RIGHT HOLDERS, E.G., PROPERTY OWNERS, IRRIGATION DISTRICTS OR MUNICIPALITIES, TO PROVIDE A THOROUGH UNDERSTANDING OF THEIR RIGHTS. DEVELOPING WATER MANAGEMENT ALTERNATIVES MEANS WORKING WITH DIVERSE AND OFTEN COMPETING INTERESTS TO FIND SOLUTIONS THAT CAN WORK FOR ALL. SOLUTIONS MAY INCLUDE FINDING EFFICIENCIES IN HOW PEOPLE USE WATER. CHANGING WHERE WATER IS SOURCED, OR ALTERING HOW AND WHEN WATER IS USED, FOR EXAMPLE, CAN HAVE HUGE IMPACTS ON HEALTH.

SPECIAL DROUGHT- YEAR CONSERVATION INITIATIVES

WHEN THE SEASONAL WEATHER IN WASHINGTON IS PARTICULARLY DRY, THE

IMPACTS ON THE STATE'S RIVERS AND STREAMS CAN BE DEVASTATING. DROUGHT
YEAR CONDITIONS BRING INTO SHARP RELIEF THE IMPORTANCE OF EFFICIENT

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization **Employer identification number** 91-1937417 WASHINGTON WATER TRUST WATER USE AND THE LIMITED SUPPLY OF WATER. DURING DROUGHT YEARS, THE WATER TRUST LAUNCHES SPECIAL INITIATIVES TO KEEP AS MUCH WATER AS POSSIBLE IN RIVERS AND STREAMS. THE ORGANIZATION IDENTIFIES HOLDERS OF HIGH- IMPACT WATER RIGHTS AND NEGOTIATES SHORT- TERM LEASES OF THESE RIGHTS DURING CRITICAL SUMMER MONTHS. WASHINGTON WATER TRUSTF S LEASED FLOW STAYS IN- STREAM TO BENEFIT. FORM 990, PART VI, SECTION B, LINE 11B: ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE TREASURER, BOARD PRESIDENT AND EXECUTIVE DIRECTOR REVIEW AND APPROVE FORM 990. COPIES ARE AVAILIABLE TO BOARD MEMBERS. FORM 990, PART VI, SECTION B, LINE 12C: WWT'S CONFLICT OF INTEREST POLICY REQUIRES A SIGNED CONFLICT OF INTEREST STATEMENT ANNUALLY FROM BOARD MEMBERS. FORM 990, PART VI, SECTION B, LINE 15A: A BOARD COMMITTEE REVIEWS THE EXECUTIVE OFFICER'S PERFORMANCE/COMPENSATION WITH INPUT FROM THE ENTIRE BOARD. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART IX, LINE 11G, OTHER FEES: CONTRACTOR SERVICE: 231,328. PROGRAM SERVICE EXPENSES MANAGEMENT AND GENERAL EXPENSES 2,864.

Schedule O (Form 990) 2021 Page **2**

Name of the organization WASHINGTON WATER TRUST	Employer identification number 91-1937417
FUNDRAISING EXPENSES	744.
TOTAL EXPENSES	234,936.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	234,936.
FORM 990 , PART XI, RECONCILIATION OF NET ASSETS, LINE 8:	
DURING THE YEAR ENDED DECEMBER 31, 2019, THE TRUST RECEIVE	D A GRANT
FROM A DONOR PAYABLE OVER A THREE-YEAR PERIOD FROM 2019 TH	ROUGH 2021.
THERE WERE PORTIONS OF THE GRANT THAT WERE CONDITIONAL AND	OTHERS THAT
WERE UNCONDITIONAL. THE PORTIONS OF THE GRANT THAT WERE ST	ATED TO BE
UNCONDITIONAL WERE TREATED BY THE TRUST AS CONDITIONAL IN	ERROR AND,
THEREFORE, NO CONTRACT REVENUE AND CORRESPONDING PLEDGE RE	CEIVABLE WAS
RECORDED FOR THE YEAR ENDED DECEMBER 31, 2019. THE CONDITI	ONAL PORTIONS
OF THIS GRANT WERE NOT RECORDED AS OF DECEMBER 31, 2019 OR	2020 BECAUSE
THE CONDITIONS WERE NOT YET MET.	
FORM 990 , PART XII, LINE 2C:	
THE OVERSIGHT PROCESS AND SELECTION PROCESS ARE SAME AS PR	IOR YEARS.