Form **990**

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

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

2023
Open to Public Inspection

Department of the Treasury Internal Revenue Service

A	For the	2023 c	alendar year, or tax year beginning	•	, and ending				•
В	Check if ap	pplicable:	C Name of organization					D Employer	identification number
	Address c	change	ENGINEERS	WITHOUT	BORDERS-US	SA, INC.			
Ħ	Name cha	nge	Doing business as	1Cr	1001	HOR			589324
Ħ			Number and street (or P.O. box if mail is not delive	red to street addre	ess)		Room/suite	E Telephone	
$\mathbf{-}$	Initial return		1031 33RD STREET	foreign month! and				303-	772-2723
	Final return terminated		City or town, state or province, country, and ZIP or						
П	Amended	return	DENVER	CO 8020	5			G Gross reco	eipts 8,258,491
=			F Name and address of principal officer:				H(a) Is this a grou	up return for s	subordinates? Yes X No
Ш	Application	pending	BORIS MARTIN						.
			1031 33RD ST.				H(b) Are all subc		<u> </u>
			DENVER	CO	80205		If "No," i	attach a list.	See instructions
<u> </u>	Tax-exem			sert no.)	4947(a)(1) or	527			
J	Website:	W	WW.EWB-USA.ORG				H(c) Group exem		
		organization:	X Corporation Trust Association	Other		L Ye	ar of formation: 20	002	M State of legal domicile: CO
P	art I		mmary						
	1 8		scribe the organization's mission or most s						
ė		EWB-1	USA PARTNER WITH COMMUNIT	IES AND	DEVELOP LE	ADERS TO	BUILD A B	ETTER	
and		WORL	D.						
Governance			· · · · · · · · · · · · · · · · · · ·						
õ	1	Check this		•	•				
∞ ∞	3 N	Number o	f voting members of the governing body (Pa	art VI, line 1a)				. 3	13
es	4 1	Number o	f independent voting members of the gover	ning body (Pa	rt VI, line 1b)			. 4	
Activities	5 T	Total num	ber of individuals employed in calendar yea	r 2023 (Part \	/, line 2a)			. 5	28
Act			ber of volunteers (estimate if necessary)					. 6	10000
	7a ⊺	Total unre	elated business revenue from Part VIII, colu	mn (C), line 1	2			. 7a	0
	bΝ	Net unrela	ated business taxable income from Form 99	0-T, Part I, lin	e 11			. 7b	0
						-	Prior Year		Current Year
ē			ons and grants (Part VIII, line 1h)			· · · · · · · ·	7,261	,148	7,060,242
Revenue	1	·					4.0	F C 1	109,107
Re			at income (Part VIII, column (A), lines 3, 4,					,561	162,483
			enue (Part VIII, column (A), lines 5, 6d, 8c,					,325	1,724
			nue – add lines 8 through 11 (must equal F				7,365		7,333,556
	1		d similar amounts paid (Part IX, column (A			· · · · · · · ·	532	,589	570,668
	1		aid to or for members (Part IX, column (A),				2 126	240	2 622 706
es	15 8	Salaries, o	other compensation, employee benefits (Pa	rt IX, column	(A), lines 5–10)	· · · · · · · ·	2,136	,240	2,633,786
xpenses			nal fundraising fees (Part IX, column (A), lir		530,4	<u> </u>			0
Exp	1		raising expenses (Part IX, column (D), line			· · · · · · · · · · · · · · · —	2 500	110	2 006 100
_			enses (Part IX, column (A), lines 11a-11d,				3,599		3,806,109
	1		enses. Add lines 13–17 (must equal Part IX				6,267		7,010,563
		Revenue	less expenses. Subtract line 18 from line 12	2			1,097 Beginning of Curre		322,993 End of Year
Net Assets or Fund Balances	20 T	Total acce	ets (Part X, line 16)			—	11,349		11,639,548
Asse	21 T		ities (Deut V. lies OC)					,103	181,494
Net	22 N		s or fund balances. Subtract line 21 from lir				11,077		11,458,054
	art II		gnature Block	10 20				,,,,,,	
			perjury, I declare that I have examined this retu	rn including ac	companying schedul	es and statement	s and to the hest	of my kno	wledge and helief it is
			emplete. Declaration of preparer (other than office						g 20.0., 1. 10
Sig	n	Signature	of officer					Date	
He		BORI	S MARTIN		CEO	/SECRETA	RY		
	-		rint name and title		2_0	·			
		Print/Type	preparer's name	Preparer's sign	nature		Date	Check	if PTIN
Paid	d	LORI B	. BAUER, CPA	LORI B. E	BAUER, CPA		11/11/	24 self-em	ployed P01260252
Pre	parer	Firm's nai	TDG DDOEEGGTON					m's EIN	20-8019714
Use	Only		10303 E DRY CR				1"		
	-	Firm's add		80112			Dh	one no.	303-771-0123
Max	, the IDS		this return with the preparer shown above		ione		I PN	OTIC TIU.	Y Vos No

	The Charles of Required Conceance			T
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes X	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
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		х
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,	_		٦,
_	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		х
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			
	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	x	
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		X
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		X
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	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
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	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? 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	X	
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

Form 990 (2023) ENGINEERS WITHOUT BORDERS-USA, INC. Page 4 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Х Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 X employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a X **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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 d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? Х If "Yes," complete Schedule L, Part I 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III X 27 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). A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV X A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV X 28c Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M X 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 Х Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable Х related organization? If "Yes," complete Schedule R, Part V, line 2

38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b ar	na					
	19? Note: All Form 990 filers are required to complete Schedule O.						
Part V Statements Regarding Other IRS Filings and Tax Compliance							
	Check if Schedule O contains a response or note to any line in this Part V						
					Yes	No	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	7				
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0				

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization comply with backup withholding rules for reportable payments to vendors and

reportable gaming (gambling) winnings to prize winners?

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 28			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	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,	V		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	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			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	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		X
	If "Yes," see 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		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes" complete Form 6069			

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

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 113			
	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 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
	any other officer, director, trustee, or key employee?	2		х
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		х
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 erganization have members or steel/helders?	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	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	<u>- ۳</u>		
~	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:			
а	The governing body?	8a	х	
b	Each committee with authority to act on habelf of the appropriag had 2	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	05		
,	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 C			
	The Division (Time decided Brogarde minimalien about policies het required by the internal revenue of	<u> </u>	Yes	No
10a	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,	100		
~	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the experimental have a written conflict of interest policy 2 if "No." as to line 42	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12.5		
·	describe on Cabarbile O boy this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the expenientian have a written decreased retention and destruction relia?	14	X	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b		х
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	.55		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a tayable antity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	1 10.0		
17	List the states with which a copy of this Form 990 is required to be filed CO			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
. •	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	HE ORGANIZATION 1031 33RD ST			
		-77	2-2'	723

orm 990 (2023)	ENGINEERS	WITHOUT	BORDERS-USA, IN	TC. 84-1589324	Page

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 instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

ı	- 1	Check this box if n	either the c	organization nor a	nv related	d organization	compensated	anv	current of	fficer	director	or trustee
L		Official title box if if		nganization no c	irry related	a organization	compensated	uiiy	Odificit O	,,,	ancolor,	or tradico.

(A) Name and title	(B) Average hours per week	box	x, unle icer a	ess pe	ition more rson i	than or s both a or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) ESET ALEMU										
PRESIDENT	1.00	х		x				0	0	0
(2) RANDALL OVER										
PRESIDENT-ELECT	1.00	х		х				0	0	0
(3) CHRISTOPHER LOME	ARDO									
	1.00									
PAST-PRESIDENT (4) DAN OERTHER	0.00	X		X				0	0	0
(4) DAN CERTHER	1.00									
TREASURER	0.00	x		x				0	0	0
(5) JEFF D'AGOSTA										
	1.00									
DIRECTOR	0.00	X						0	0	0
(6) JULIO GRASIANO	1									
DIDECTOR	1.00	x							_	0
DIRECTOR (7) STEPHANIE KAYDEN		^						0	0	0
(i) BIBLIDATE KAIDEK	1.00									
DIRECTOR	0.00	x						0	0	0
(8) MEG LASSARAT										
	1.00									
DIRECTOR	0.00	X						0	0	0
(9) ELAINE WARD	1 00									
DIRECTOR	1.00	x						0	o	0
(10) RON WELCH	0.00	^								<u> </u>
(10, 2102)	1.00									
DIRECTOR	0.00	х						0	0	0
(11) WILLIAM OAKES										
	1.00								_	
DIRECTOR	0.00	X						0	0	Form 990 (2023)

Form **990** (2023)

8202 11/11/2024 11:34 AM Form 990 (2023) **ENGINEERS WITHOUT BORDERS-USA, INC.** 84-1589324

Part VII Section A. Officers	i, Directors, Trus	stees	s, Ke	y Er	nplo	yees,	, an	d Highest Compensated	Employees (continued)				
(A) Name and title	(B) Average hours per week	of	x, unle	Pos check ess pe ind a	erson i directo	than or s both or/truste	an e)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) timated of oth	amount ier	
Pub	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)		from toganization	on and	s
(12) VALERIE COOK													
(12)	1.00												0
DIRECTOR (13) KYLE FINSETH	0.00	X		\vdash				0	0				0
(13)	1.00												
DIRECTOR	0.00	X						0	0				0
(14) BORIS MARTIN													
(14)	40.00			٠,				200 500				2 -	F
CEO/SECRETARY (15) CLARE HAAS CI	0.00			X				209,589	0	 		25,	000
(15) CHARLE HAAD CI	40.00												
COO	0.00	1		x				146,977	0			18,	196
(16) MELISSA MONTO	COMERY												
(16)	40.00												
PROGRAMS OFFICER	0.00	-		<u> </u>		X		145,949	0			14,	853
(17) SCOTT MYERS (17)	40.00												
DEVELOPMENT OFFICER	0.00	1				$ \mathbf{x} $		128,305	0			12,	726
(18) GERARD DALZIE	+												
(18)	40.00												
ENGINEER	0.00			├		X		111,616	0			8,	762
(19)													
1b Subtotal								742,436				80,	202
c Total from continuation shee	•							740 426				00	202
d Total (add lines 1b and 1c). Total number of individuals (inc								742,436) 000 of	<u> </u>		80,	<u> 202</u>
reportable compensation from t		illeu	5	J3C 11	Sieu	above	c) w	nio received more than proc	J,000 0I				
												Yes	No
3 Did the organization list any for employee on line 1a? If "Yes," or											3		х
4 For any individual listed on line	1a, is the sum of	f repo	ortab	le co	mpe	nsatio	n ar	nd other compensation from	the				
organization and related organi individual											4	Х	
5 Did any person listed on line 1a	a receive or accru	ie co	mpei	nsatio	on fro	om ar	ny u	nrelated organization or indiv	<i>r</i> idual				
for services rendered to the org		s," co	omple	ete S	Sched	dule J	for	such person			5		X
Section B. Independent Contractor1 Complete this table for your five		ocato	d ind	lonor	ndont	contr	racto	are that received more than	\$100,000 of				
compensation from the organiza	ation. Report com							ear ending with or within the	e organization's tax year.				
Name and	(A) d business address							Descript	(B) tion of services		Co	(C) mpensat	ion
2 Total number of independent of	ontractors (includi	ina h	ut no	nt lim	ited 1	to the	se li	isted above) who					
received more than \$100,000 c							JU 11	iolog abovo) WIIO	0				

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (A) Total revenue (B) Related or exempt (D) Revenue excluded function revenue from tax under husiness revenue sections 512-514 Gifts, Grants ilar Amounts 1a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d 247,613 **e** Government grants (contributions) 1e **f** All other contributions, gifts, grants, 6,812,629 and similar amounts not included above 1f **g** Noncash contributions included in lines 1a-1f 30,571 1g 7,060,242 h Total. Add lines 1a-1f . Business Code 109,107 109,107 CONFERENCE REGISTRATION Program Service Revenue f All other program service revenue 109,107 g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 160,511 160,511 Income from investment of tax-exempt bond proceeds Royalties (ii) Personal 6a Gross rents 6a **b** Less: rental expenses 6b c Rental inc. or (loss) d Net rental income or (loss) 7a Gross amount from (i) Securities (ii) Other sales of assets 926,907 other than inventory **b** Less: cost or other Other Revenue 924,935 basis and sales exps. 1,972 c Gain or (loss) 7с 1,972 1,972 d Net gain or (loss) **8a** Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a **b** Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities . 10a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold 10b c Net income or (loss) from sales of inventory **Business Code** 1,724 1,724 11a MISCELLANEOUS d All other revenue 1,724 Total. Add lines 11a-11d ... 7,333,556 110,831 0 162,483 Total revenue. See instructions .

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all colu

	ion 501(c)(3) and 501(c)(4) organizations must con			ele column (A).	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 7b, Pb, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	Inso(2CTIO 1		OV
2	Grants and other assistance to domestic	11100			
_	individuals. See Part IV, line 22	-			
3	Grants and other assistance to foreign				
·	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	570,668	570,668		
4	Benefits paid to or for members	,	,		
5	Compensation of current officers, directors,				
	trustees, and key employees	400,428	227,489	116,866	56,073
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,836,882	1,025,374	560,530	250,978
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	63,050	40,895	11,584	10,571
9	Other employee benefits	147,115	95,421	27,029	24,665
10	Payroll taxes	186,311	99,642	60,202	26,467
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
C	Accounting				
a	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
9	(A) amount, list line 11g expenses on Schedule O.)	579,882	381,613	114,044	84,225
12	Advertising and promotion	16,174	15,580		594
13	Office expenses	426,930	242,198	175,642	9,090
14	Information technology	,	•	•	•
15	Royalties				
16	Occupancy	28,379	17,531	6,981	3,867
17	Travel	774,765	713,449	49,812	11,504
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	188,358	181,844	3,066	3,448
20	Interest				
21	Payments to affiliates	50 451	2 552	2 000	
22	Depreciation, depletion, and amortization	13,471	9,572	3,899	20 110
23	Insurance	159,122	120,678	326	38,118
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	PROJECT MATERIALS AND SUP	1,405,389	1,405,389		
a b	OTHER GRANT EXPENSES	107,615	107,615		
C.	BANK FEES	50,688	16,648	29,332	4,708
d	DUES & SUBSCRIPTIONS	26,887	13,412	10,009	3,466
e	***************************************	28,449	19,044	6,715	2,690
25	Total functional expenses. Add lines 1 through 24e	7,010,563	5,304,062	1,176,037	530,464
26	Joint costs. Complete this line only if the				-
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here if				
DAA	following SOP 98-2 (ASC 958-720)				Form QQQ (2022)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 3,322,192 7,203,863 Cash—non-interest-bearing 2,294,335 40,381 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 929,850 1,468,867 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 8 Inventories for sale or use 8 94,558 179,431 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 162,844 10a b Less: accumulated depreciation 10b 122,534 47,542 40,310 10c 3,942,265 2,460,836 11 Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 572,053 392,148 15 15 11,349,083 11,639,548 Total assets. Add lines 1 through 15 (must equal line 33) 264,567 171,494 Accounts payable and accrued expenses 17 17 Grants payable 18 18 10,000 6,536 Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 271,103 181,494 Total liabilities. Add lines 17 through 25 26 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net Assets or Fund Balances Net assets without donor restrictions 3,705,925 3,442,789 27 7,372,055 8,015,265 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31

Total net assets or fund balances

Total liabilities and net assets/fund balances

11,639,548 Form 990 (2023)

11,458,054

11,077,980

11,349,083

Schedule O.

the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain on

Form **990** (2023)

Х

X

2c

3a

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Name of the organization Employer identification numbe ENGINEERS WITHOUT BORDERS-USA, INC. 84-1589324 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 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). 7 X 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.) 8 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 II, Type III, 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). (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported listed in your governing organization (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D)

(E)

Total

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

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

Sec	tion A. Public Support					•	
Caler	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	Ins	30e	Ctio			V
	include any "unusual grants.")	8,503,935	5,677,679	9,066,688	7,261,148	7,060,242	37,569,692
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	8,503,935	5,677,679	9,066,688	7,261,148	7,060,242	37,569,692
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)						3,887,667
6	Public support. Subtract line 5 from line 4 tion B. Total Support						33,682,025
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2020	(a) 2021	(4) 2022	(a) 2022	(f) Total
		(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	 ``
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from	8,503,935	5,677,679	9,066,688	7,261,148	7,060,242	37,569,692
	similar sources	77,141	54,101	37,150	42,561	160,511	371,464
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			28,662	61,325	1,724	91,711
11	Total support. Add lines 7 through 10			·	•		38,032,867
12	Gross receipts from related activities, etc. (s	see instructions)				12	404,371
13	First 5 years. If the Form 990 is for the org						
	organization, check this box and stop here						
Sec	tion C. Computation of Public S						
14	Public support percentage for 2023 (line 6, o			())		14	88.56 %
15	Public support percentage from 2022 Sched	ule A, Part II, line 1	4	~		15	87.72%
16a	33 1/3% support test — 2023. If the organi	zation did not check	the box on line 13	, and line 14 is 33	1/3% or more, chec	k this	
	box and stop here. The organization qualified	es as a publicly sup	ported organization				X
b	33 1/3% support test — 2022. If the organi	zation did not check	a box on line 13 c				
	this box and stop here. The organization qu			-4:			
17a	10%-facts-and-circumstances test — 202	23. If the organizatio	n did not check a b				
	10% or more, and if the organization meets	the facts-and-circur	nstances test, chec	k this box and sto	p here. Explain in		
	Part VI how the organization meets the fact organization		_				
b	10%-facts-and-circumstances test — 202						
	15 is 10% or more, and if the organization r	neets the facts-and-	circumstances test	, check this box and	d stop here. Explai	in	
	in Part VI how the organization meets the fa		_				
18	organization Private foundation. If the organization did it						Ц
10	instructions						

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

Sec	tion A. Public Support	quality under t	ne tests listed	below, please of	complete Fait	11.)	
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	ins	soe	CÍIO	n	700	()
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						J
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit 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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b Public support. (Subtract line 7c from						
	line 6.)						
	tion B. Total Support		-	T		1	
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the org	anization's first, sec	cond, third, fourth, o	or fifth tax year as a	section 501(c)(3)	•	
	organization, check this box and stop here						
	tion C. Computation of Public S			(0)		T	
15	Public support percentage for 2023 (line 8, o	olumn (f), divided b	by line 13, column	(f))		15	%
16 Sec	Public support percentage from 2022 Sched tion D. Computation of Investme					16	%
17	Investment income percentage for 2023 (line			rolumn (f))		17	%
18	Investment income percentage from 2022 S	Chedule A Part III	line 17	Olumin (1 <i>))</i>		18	%
19a	33 1/3% support tests — 2023. If the organ	nization did not che	ck the box on line	 14. and line 15 is mo	ore than 33 1/3% :	and line	ı /º_
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests — 2022. If the organ		-				
	line 18 is not more than 33 1/3%, check this						
20	Private foundation. If the organization did		=		-		

Part IV Supporting Organizations

(Complete only if you checked a box on 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

- 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.
- 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			
_	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4a		
	4b		
	4.		
	4c		
	5a		
	Ja		
	5b		
	5c		
	_		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
Sch	edule	A (Form 9	990) 2023

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,	JA		
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	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		
Secti	on 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		
Secti	on D. All Type III Supporting Organizations			
		\longrightarrow	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		
3	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	_		
Cooti	supported organizations played in this regard.	3		
	on 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 instructions).			
a	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.	- 1		
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instruction	'S). [Vaa	Na
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	20		
h	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 "Vos." explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would	26		
2	have engaged in these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below.	2b		
3 a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b		Ja		
D	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	36		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization

Schedule A (Form 990) 2023

emergency temporary reduction (see instructions).

(see instructions).

Schedule A (Form 990) 2023

Part V Type III

Page 7

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

Schedule A (Form 990) 2023

Schedule A (Form	n 990) 2023	ENGINEERS	WITHOUT	BORDERS-USA, IN	rc. 84-158932	Page 8
Part VI				tions required by Part II b, 4c, 5a, 6, 9a, 9b, 9c,		
	B, lines 1 and 2	; Part IV, Section C,	line 1; Part IV	, Section D, lines 2 and	d 3; Part IV, Section E,	lines 1c, 2a, 2b,
				1e; Part V, Section D, li additional information. (art V, Section E,
PART II	, LINE 10	IIC Ir	gh	action)V
MISC &	FEES		\$	91,711		
·				······································		
•						
•						
•						

DAA Schedule A (Form 990) 2023

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Attach to Form 990, 990-EZ, or 990-PF.

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

Name of the organization

WITHOUT BORDERS-USA, INC.

84-1589324

Employer identification number

Organization type (check one)	one mopeodom copy
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
Note: Only a section 501(c)(7),	ered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
instructions. General Rule	
	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 operty) from any one contributor. Complete Parts I and II. See instructions for determining a butions.
Special Rules	
regulations under section 16b, and that received f	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the ns 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or rom any one contributor, during the year, total contributions of the greater of (1) \$5,000; or n (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
contributor, during the y	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, urposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering ead of the contributor name and address), II, and III.
contributor, during the y contributions totaled mo during the year for an ex General Rule applies to	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one rear, contributions exclusively for religious, charitable, etc., purposes, but no such re than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the or this organization because it received nonexclusively religious, charitable, etc., contributions during the year \$
Caution: An organization that is must answer "No" on Part IV, lir	n't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it le 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 he filing requirements of Schedule B (Form 990).

Name of organization

Employer identification number

ENGINEERS WITHOUT BORDERS-USA, INC. 84-1589324 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Name, address, and ZIP + **Total contributions** Type of contribution No. 1.... Person **Payroll** 500,000 Noncash (Complete Part II for noncash contributions.) (c) (a) (b) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2.... Person **Payroll** 1,000,000 Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution 3 Person **Payroll** 205,000 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 Type of contribution No. **Total contributions** 4 Person **Payroll** 299,879 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 5.... Person **Payroll** 185,000 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 6 Person **Payroll** 488,993 Noncash (Complete Part II for noncash contributions.)

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

Open to Public Inspection

Name of the organization Employer identification number ENGINEERS WITHOUT BORDERS-USA, INC. 84-1589324 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Aggregate value at end of year _____ 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 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 historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included on line 2a 2c d Number of conservation easements included on line 2c acquired after July 25, 2006, 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 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 2d 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. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X.....

ENGINEERS WITHOUT BORDERS-USA, INC. Schedule D (Form 990) 2023 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply). Public exhibition а Loan or exchange program b Scholarly research Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? No Part IV **Escrow and Custodial Arrangements** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No **b** If "Yes," explain the arrangement in Part XIII and complete the following table. **Amount** c Beginning balance 1c d Additions during the year 1d 1e e Distributions during the year Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V **Endowment Funds** Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 572,053 322,053 1a Beginning of year balance 250,000 322,053 **b** Contributions 53,112 c Net investment earnings, gains, and 20,095 d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses 645,260 322,053 g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment 100.00 % c Term endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the No Yes organization by: X (i) Unrelated organizations? (ii) Related organizations? Х 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (d) Book value (c) Accumulated (investment) (other) depreciation 1a Land **b** Buildings 99,547 99,547 c Leasehold improvements 22,98763,297 40,310 **d** Equipment e Other

40,310

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

Schedule D (Fo	orm 990) 2023 E	ENGINEERS	WITHOUT	BORDI	ERS-USA,I	NC.	84-1589324	Page 3
Part VII		- Other Secur						
	Complete if the	e organization	answered "Ye	es" on Fo	orm 990, Part	IV, line	11b. See Form 990,	Part X, line 12.
		on of security or categor	у		(b) Book value		(c) Method	of valuation:
	(includin	ng name of security)					Cost or end-of-ye	ear market value
(1) Financial of	derivatives							
(2) Closely he	d equity interests							
(3) Other								
(A)								
(B)				L				
(C)				L				
(D)				L				
(E)				L				
(F)				L				
(G)				L				
(H)				L				
Total. (Column	n (b) must equal Forr	m 990, Part X, line	12, col. (B))					
Part VIII	Investments -	 Program Re 	elated					
	Complete if the	e organization	answered "Ye	es" on Fo	orm 990, Part	IV, line	11c. See Form 990,	Part X, line 13.
	(a) Desc	cription of investment			(b) Book value	•	(c) Method of Cost or end-of-ye	
(1)							Oost of character	sai market value
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
	n (b) must equal Forr	n 990. Part X. line	13. col. (B))					
Part IX	Other Assets		(=//					
			answered "Ye	es" on Fo	orm 990. Part	IV. line	11d. See Form 990,	Part X. line 15.
		<u> </u>	(a) Descrip			, -		(b) Book value
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
	n (b) must equal Forr	m 990, Part X, line	15, col. (B))					
Part X	Other Liabilit		, ,, ,, ,, ,,					•
	Complete if the line 25.	e organization	answered "Ye	es" on F	orm 990, Part	IV, line	11e or 11f. See For	m 990, Part X,
1.			(a) Description	of liability				(b) Book value
-	ncome taxes		*					
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

(8) (9)

FROM ACTIVITIES NOT DIRECTLY RELATED TO EWB-USA'S TAX EXEMPT PURPOSE IS

SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME. THERE WAS NO UNRELATED

BUSINESS INCOME TAX INCURRED DURING 2023. ADDITIONALLY, EWB-USA IS SUBJECT

84-1589324 Schedule D (Form 990) 2023 Supplemental Information (continued) TO TAX REGULATIONS IN THE COUNTRIES THEY OPERATE AND ANY POTENTIAL LIABILITY HAS BEEN RECOGNIZED IN THE FINANCIAL STATEMENTS. MANAGEMENT IS REQUIRED TO EVALUATE TAX POSITIONS TAKEN BY EWB-USA, AND TO RECOGNIZE A TAX LIABILITY IF EWB-USA HAS TAKEN AN UNCERTAIN POSITION THAT PROBABLY WOULD NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. EWB-USA BELIEVES IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN RELATIVE TO ITS USA OPERATIONS AND THAT NONE WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS. EWB-USA IS SUBJECT TO ROUTINE AUDITS BY TAX JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. MANAGEMENT BELIEVES EWB-USA IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS ON ITS IRS FORM 990S FILED FOR YEARS PRIOR TO **DECEMBER 31, 2020.** PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER UNCOLLECTIBLE CONTRIBUTION RECEIVABLE \$ -28,803

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

2023

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number Name of the organization ENGINEERS WITHOUT BORDERS-USA, INC. 84-1589324 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (a) Region (b) Number (e) If activity listed in (d) is (f) Total (d) Activities conducted in the of offices in employees, a program service, expenditures for region (by type) (such as, the region agents, and fundraising, program services, describe specific type of and investments independent investments, grants to recipients service(s) in the region in the region located in the region) in the region GUATEMALA GRANTS PAID OUT 1 8 PROGRAM SERVICES 130,086 (1) **UGANDA** 287,500 1 13 PROGRAM SERVICES GRANTS PAID OUT (2) **ECUADOR** 1 10 PROGRAM SERVICES (3) GRANTS PAID OUT 153,082 (4) (5) (6) (7) (8) (9) (10)(11)(12)(13)(14)<u>(</u>15) (16)<u>(17)</u> 3a Subtotal 31 570,668 **b** Total from continuation sheets to Part I ...

3

570,668

c Totals (add

lines 3a and 3b)

Schedule F (Form 990) 2023 ENGINEERS WITHOUT BORDERS-USA, INC. 84-1589324

Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of (a) Name of (b) IRS code (c) Region (e) Amount of (d) Purpose of (f) Manner of (h) Description (g) Amount of valuation organization section and EIN (book, FMV, cash grant of noncash assistance appraisal, other) (if applicable) disbursement assistance PROGRAM SERVICES 130,086 WIRE (1) PROGRAM SERVICES 287,500 WIRE (2) PROGRAM SERVICES 153,082 WIRE (3) (4) (5) (6) (7) (9) (10) (11) (12) (13) (14) (15)

Enter total number of recipient organizations listed above that are recognized as chantles by the foreign country, recognized as a tax
exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

³ Enter total number of other organizations or entities

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description (h) Method of valuation cash grant cash noncash of noncash assistance (book, FMV, disbursement assistance appraisal, other) (1) (2) (3) (6) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Part IV Foreign Forms

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

Schedule F (Form 990) 2023

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3 - ACTIVITIES	PER REGION	ilon	CO	Oy
REGION	EX	PENDITURES	INVESTMEN	TS
GUATEMALA	\$	130,086	\$	0
UGANDA	\$	287,500	\$	0
ECUADOR	\$	153,082	\$	0

Schedule F (Form 990) 2023

SCHEDULE J

(Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

	ENGINEERS WITHOUT BOR	DERS-USA, INC. 84-15	09324		
Pa	rt I Questions Regarding Compensation	DEGLIOIT GL			
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the	e following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any re	levant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follo	w a written policy regarding payment			
-	or reimbursement or provision of all of the expenses described above				
		, , , , , , , , , , , , , , , , , , ,	1b		
	еднан п				
2	Did the ergenization require substantiation prior to reimburging or all	lowing expenses incurred by all			
2	Did the organization require substantiation prior to reimbursing or all				
	directors, trustees, and officers, including the CEO/Executive Direct				
	1a?		2		
_					
3	Indicate which, if any, of the following the organization used to estal				
	organization's CEO/Executive Director. Check all that apply. Do not	·			
	related organization to establish compensation of the CEO/Executive	e Director, but explain in Part III.			
	X Compensation committee	Written employment contract			
	Independent compensation consultant	.			
	X Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Sectio	n A, line 1a, with respect to the filing			
	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?		4a		Х
b	Participate in or receive payment from a supplemental nonqualified				X
С	Participate in or receive payment from an equity-based compensation	on arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applica-				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations	must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the				
	compensation contingent on the revenues of:				
а	The organization?		5a		х
b	Any related organization?		5b		х
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the	organization pay or accrue any			
•	compensation contingent on the net earnings of:	organization pay or accrete any			
•	,		6a		х
a	The organization?		6b		X
b	Any related organization? If "Yes" on line 6a or 6b, describe in Part III.				
	II TES ON III E OA OF OD, GESCHDE III FAIT III.				
7	For pareons listed on Form 900 Part VIII Section A line 45 did the	organization provide any porfixed			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the	• , ,	_		v
_	payments not described on lines 5 and 6? If "Yes," describe in Part		7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued				
	to the initial contract exception described in Regulations section 53				7.
	in Part III		8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable pre-	sumption procedure described in		1	l

Regulations section 53.4958-6(c)?

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

(A) Name and Title	(B) Breakdown of W- (i) Base compensation	and/or 1099-MISC and/or 1 (ii) Bonus & incentive compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
BORIS MARTIN	209,589	0	0	8,618	17,047	235,254	0
1 CEO/SECRETARY	ii) C	0	0	0	0	0	0
CLARE HAAS CLAVEAU	146,977	0	0	6,130	12,066	165,173	0
₂ COO	ii) C	0	0	0	0		0
MELISSA MONTGOMERY	145,949	0	0	5,844	9,009	160,802	0
3 PROGRAMS OFFICER	ii) C	0	0	0	0	0	0
4	i) 						
5	i)						
6	i)						
7	i)						
8	i) 						
	i) ii)						
10	i) 						
	i) 						
12	i) ii)						
13	i) 						
14	i) 		· · · · · · · · · · · · · · · · · · ·	<u>.</u>		·····	
15	i) 						
	i) 						

Schedule J (Form 990) 2023

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

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open To Public Inspection

Employer identification number

	ENGI	NEERS W	ITHOUT	BORDERS	-USA, INC.		84-158932	24		
Pa	art I Types of Pr	operty		100	GUIU		UUU			
		Che	l l	(b) per of contributions or tems contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		(d) Method of determining noncash contribution amo	-		
1	Art — Works of art									
2	Art — Historical treasures									
3	Art — Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities — Publicly trade	d :	X 1		30,571	FMV				
10	Securities — Closely held s	stock								
11	Securities — Partnership, L or trust interests									
12	Securities — Miscellaneous									
13	Qualified conservation contribution — Historic structures									
14	Qualified conservation contribution — Other									
15	Real estate — Residential									
16	Real estate — Commercial									
17	Real estate — Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies	s								
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other (
26	Other (
27	Other (
28	Other ()								
29	Number of Forms 8283 rec	eived by the org	ganization du	ring the tax year f	or contributions for					
	which the organization com	pleted Form 82	83, Part V, [Donee Acknowledg	gement	29			Yes	No
30a	28, that it must hold for at le	east 3 years from	m the date of	of the initial contribu	reported in Part I, lines 1 thr ution, and which isn't require	d to be			.00	
	used for exempt purposes t	for the entire ho	lding period?	?				30a		X
b	If "Yes," describe the arrang	•								
31	Does the organization have	a gift acceptan	ce policy tha	t requires the revie	ew of any nonstandard					
								31	X	
32a					solicit, process, or sell nonce					
	contributions?							32a		X
b	If "Yes," describe in Part II.									
33		oort an amount i	n column (c)	for a type of prop	erty for which column (a) is	checked,				
	describe in Part II.									

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

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

LULU

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization

NATIVITIES METHODIS DODDEDG MAN TIM

Employer identification number 84-1589324

ENGINEERS WITHOUT BURDERS-USA, INC.	309324
FORM 990 - ADDITIONAL INFORMATION	1 7
SUBSEQUENT TO YEAR END, EWB-USA ENTERED INTO A MERGER AGREEMEN	T WITH
ENGINEERING WORLD HEALTH WITH A SET MERGER DATE OF SEPTEMBER 1	, 2024. EWB-
USA WILL CONTINUE AS THE SURVIVING CORPORATION IN THE MERGER.	
FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT	
INTERNATIONAL COMMUNITY PROGRAM (ICP) COLLABORATES ON MORE THA	N 319
PROJECTS IN 27 COUNTRIES. THESE PROJECTS ARE DRIVEN BY 228 CHA	PTERS ACROSS
THE UNITED STATES PARTNERING DIRECTLY WITH COMMUNITIES TO MEET	THEIR SELF-
IDENTIFIED NEEDS. TECHNICAL ASSISTANCE IS FOCUSED ON SIX PROJ	ECT TYPES:
WATER, CIVIL WORKS, SANITATION, AGRICULTURE, ENERGY AND STRUCT	URES. EWB-
USA'S COMMITMENT TO OUR HUNDREDS OF PARTNERING COMMUNITIES IS	FOUNDED UPON
THE PREMISE THAT COMMUNITY-DRIVEN PROJECTS RESULT IN LONG-LAST	ING AND
SUSTAINABLE INFRASTRUCTURE SOLUTIONS. THROUGHOUT THIS PARTNERS	HIP, WE BRING
TOGETHER VOLUNTEERS AND COMMUNITY MEMBERS OF ALL BACKGROUNDS A	ND EXPERIENCE
LEVELS TO PROMOTE EDUCATIONAL AND LEADERSHIP OPPORTUNITIES NOT	TYPICALLY
PROVIDED IN TRADITIONAL ACADEMIC SETTINGS. EWB-USA'S VOLUNTEE	R BASE OF
10,000 WORKED WITH 286 COMMUNITIES ON 319 ACTIVE PROJECTS AND	61 COMPLETED
PROJECTS IN 2023. COMPLETED PROJECTS DIRECTLY IMPACTED 172,44	8 COMMUNITY
MEMBERS.	
FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT	

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

Name of the organization

ENGINEERS WITHOUT BORDERS-USA, INC.

Employer identification number

84-1589324

VOLUNTEER ENGINEERS TOGETHER TO ADVANCE LOCAL INFRASTRUCTURE SOLUTIONS IN THE UNITED STATES. VOLUNTEERS WORK WITH COMMUNITY ASSOCIATIONS, NONPROFITS AND MUNICIPALITIES IN BOTH RURAL AND URBAN AREAS. THESE INDIVIDUALS VOLUNTEER THEIR TIME AND EXPERTISE TO ASSIST COMMUNITIES THAT DO NOT HAVE THE RESOURCES TO ACCESS ENGINEERING SERVICES. WITH A STRONG COMMITMENT TO COMMUNITY-DRIVEN PROJECTS, VOLUNTEERS WORK ALONGSIDE COMMUNITY MEMBERS TO DESIGN SOLUTIONS TO IDENTIFIED PROBLEMS. DURING 2023, OVER 470 VOLUNTEERS WORKED ON MORE THAN 60 ACTIVE PROJECTS IMPACTING COMMUNITIES IN 24 U.S. STATES AND TERRITORIES.

FORM 990, PART III, LINE 4C - THIRD ACCOMPLISHMENT

VOLUNTEER ENGAGEMENT TEAM (VET) SUPPORTS 10,000 VOLUNTEERS IN 228

CHAPTERS. VET UTILIZES THE SKILLS AND EXPERIENCE OF A DIVERSE POOL OF

STUDENT AND PROFESSIONAL VOLUNTEERS TO IMPLEMENT ENGINEERING PROJECTS AND

CONSULTING SERVICES. OUR HIGHLY SKILLED VOLUNTEERS WORK WITH COMMUNITIES TO

FIND APPROPRIATE SOLUTIONS FOR THEIR INFRASTRUCTURE NEEDS. DURING 2023,

EWB-USA HELD ITS FIRST IN-PERSON NATIONAL CONFERENCE SINCE 2019, FEATURING

A MULTITUDE OF WORKSHOPS, PANEL DISCUSSIONS, AND KEYNOTE SPEAKERS ON A WIDE

RANGE OF TOPICS RELATED TO ENGINEERING FOR GLOBAL DEVELOPMENT. THE

CONFERENCE WAS ATTENDED BY 400+ STUDENT AND PROFESSIONAL VOLUNTEERS AND

COUNTRY PARTNERS AND OFFICES, PROVIDING OPPORTUNITIES FOR NETWORKING AND

COLLABORATION WITH OTHER VOLUNTEERS, CORPORATE AND COUNTRY PARTNERS, AND

LEARNING OPPORTUNITIES FROM EXPERTS FROM THE FIELD.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE GOVERNANCE COMMITTEE IS RESPONSIBLE FOR INDENTIFYING POTENTIAL

CANDIDATES TO THE BOARD FOR THEIR APPROVAL. NEW BOARD MEMBERS ARE

PRIMARILY ELECTED BY A MAJORITY VOTE OF THE EXISTING BOARD OF DIRECTORS.

HOWEVER, STUDENT, PROFESSIONAL AND FACULTY MEMBERS OF THE BOARD ARE SELECTED BY A NOMINATING COMMITTEE SELECTED BY THE BOARD.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE 990 IS REVIEWED BY THE CEO, MANAGEMENT TEAM, AND APPROPRIATE MEMBERS OF

THE BOARD OF DIRECTORS BEFORE THE RETURN IS FILED WITH THE IRS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO ANNUALLY DISCLOSE POTENTIAL CONFLICTS OF INTEREST TO THE BOARD OF DIRECTORS BY COMPLETING THE CONFLICK OF INTEREST STATEMENT FORM. IF THE BOARD OR MANAGEMENT FINDS THAT A CONFLICT OF INTEREST EXISTS, THE BOARD WILL DETERMINE THE APPROPRIATE ACTION TO ADDRESS THE CONFLICT. OPTIONS INCLUDE 1) TAKE NO ACTION, 2) ASK THE INDIVIDUAL TO RECUSE HIM/HERSELF FROM PARTICIPATION IN RELATED DISCUSSIONS OR DECISIONS WITHIN EWB-USE, 3) PERMIT THE INDIVIDUAL TO PARTICIPATE IN RELATED DISCUSSION, BUT WITHOUT VOTING IN THE FINAL DTERMINATION, OR 4) ASK THE INDIVIDUAL TO RESIGN FROM HIS OR HER POSITION IN EWB-USA. EWB-USA'S MANAGEMENT WILL MONITOR PROPOSED ONGOING ACTIVITIES FOR CONFLICTS OF INTEREST AND DISCLOSE THEM TO THE BOARD OF DIRECTORS IN ORDER TO ADDRESS POTENTIAL OR ACTUAL CONFLICTS, WHETHER DISCOVERED BEFORE OR AFTER THE TRANSACTION OCCURRED.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS DEVELOPS THE COMPENSATION

PACKAGE FOR THE CEO THEN RECOMMENDS IT TO THE BOARD FOR

APPROVAL. THE EXECUTIVE COMMITTEE REVIEWS SEVERAL SOURCES OF DATA TO