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SCANNED MAY 25 2010

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009

OMB No. 1545-0047

Open to Public Inspection

Dep. Inter	artment rnal Reve	of the Treasury enue Service		► The organ	nization may have to	use a cop	y of this return t	o satisfy	state repor	ting require	ments.	Оp	en to	Public	nspection
	For th	ne 2009 calen	dar year,					 .	nd endi				,		
В		f applicable		C Name of c				···· -· -·			D Emplo	yer Iden	tificatio	n Number	
	Ad	ldress change	Please use IRS label	KANSAS	RURAL WAT	ER AS	SN					0849		···-	
	Na	ime change	or print or type.	Number a	nd street (or PO box	x if mail is	not delivered to st	treet addr) Room/s	suite	E Teleph	one nun	1ber		
	lnr	tial return	See specific	PO BOX	226						(78	5) 3	336-	3760	
	Te	rmination	Instruc- tions.	City, town	or country			State Z	IP code + 4	1					
	An	nended return		SENECA				KS (66538-	-0226	G Gross	receipts	\$ 2,	877,93	6
	Ap	plication pending	F Name a	and address of p	orincipal officer					1	a group retu		filiates?	Ye	s X No
			Dennis S	chwartz 54	41 SE 45th S	t. Te	cumseh	KS (66542	1	l affiliates inc ' attach a list		structio	ns) L Ye	s 📗 No
1	Tax	-exempt statu	s X 501	(c) (3) ◀ (insert no)	4947(a)(1)	or	527	,	Gillon a not	(000	50.000	,	
J	Web	osite: ► ww	w.krwa	.net						H(c) Group	exemption n	umber 1	<u> </u>		
K		of organization	X Corpora	ation Trus	st Association	Othe	r►	L Yea	ar of Forma	tion 197	6 M	State of	legal d	omicite K	S
Pa	rt L														
					mission or mos						LIONAL	AND	TEC	CHNICA	7 <u> </u>
e		INFORMAT	ION TO) <u>FUBLIC</u>	WATER SYS	STEMS	LOCATED	IN H	KANSAS	S	- -		. – – .	 -	
nan					 -										
Governance	2			if the organ	zation discontin					ore than 3			·		
ဗိ					governing body			dispus	ieu or mi				3 7		
بن م					mbers of the go			I, line 1	b)			4	7	-	
ij		Total number										5	25		
Activities &					ate if necessary)			•				6	0		
•	1				renue from Part			12 .		•		7 a		2.	9,838.
	D	net unrelated	business	taxable inc	come from Form	1990-1,	line 34	•				7 b			-393.
	_	0		(D \ ////						<u> </u>	Prior Year			Current	
ë	8 9	Contributions	and gran		Line in) .		•				1,916,6				<u>6,964.</u>
Revenue	10									-	429,4	-			2,189. 3,190.
æ	11 Other revenue (Part VIII, column (A), Imes 5, 6d, 8c, 9c, 10c, and 11e)								78,408. 163,056.				0,593.		
	12	Total revelope	.— Øs#BdDlir	nes le trabla	ih 111 (must equa	al Part ∖	/III. column (A), line	12)	2	2,587,6				7,936.
	13	Grants and s	milar amo	ounts paid (Par nx column	(A), line	es 1-3)					-		· · · · · · · · · · · · · · · · · · ·	!
															
"	15	Salaries, othe	Γ	asation; em	ert IX, column	(Part IX,	column (A),	lines 5	-10)		845,0	070.		1,089	9,777.
ße					t IX, column (A)										
Expenses	ь	Total fundrais	ina expei	nses (Part I)	X, column (D), I	ine 25)►			0.	-25% - ·		1000	13. A	海狸	
ப					(A), lines 11a-11					·	1,320,3				7,209.
	L	•	•		must equal Part	-	•	25) .			2,165,3				6,986.
					ine 18 from line		(),	, .			422,2				0,950.
5 g		-	J							Regi	nning of `			End of '	
a la v	20	Total assets (Part X. In	ne 16)							3,837,8		 		722.
Net Assets or Fund Balances		Total liabilitie		-							95,2				3,779.
ž	22	Net assets or	fund bala	ances Subtr	ract line 21 from	line 20				-	3,742,5				6,943.
Pa	rtill -	Signatu							·		, , , , , ,		<u> </u>		<u> </u>
		Under penaltie	s of perjury,	declare that	heve examined this re preparer (other than	etyrn, inclų	ding accompanyir	ng schedu	iles and sta	tements, and	to the best	of my kr	owledg	e and belief	f, it is
		true, correct, a	nd complete.	. Declaration of	preparer (other than	officer) is t	paséd on all'infórr	mation of	which prepared	arer has any	knowledge		,		
Siç	jn 💮	* X	76	nu k	onnel	au	\sim			>	ς 4-	22-	-10		
He	re	Signature	of officer	_			,			D:	ate				
			IME1		INGBAUN	n, (Seneral	Ma	Mace	٠.					
		Type or pr	int name and	d title				,,		 					
D.	:l			^				Dat	e	Ç	theck if elf-	_ ;	reparer see inst	's identifyin ructions)	g numbei
Pa Pro		Preparer's signature \ Littles D. White 4-22-10													
	rer's	de la													
Üs	e	Firm's name (c yours if self-			re & Assoc	IATES	, L.L.C.	·							
On	ly	employed), address, and		MAIN ST	г						IN ►		-		
NA		ZIP + 4	TAR					4491		P	Phone no	(66	$\overline{}$	736-58	
ivia	, the II	no aiscuss th	is return v	with the pre-	parer shown abo	ove / (se	e instruction	S)					X	Yes	No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2009)

TEEA0101 07/20/09

	1990 (2009) KANSAS RURAL WATER ASSN	48-0	84934	6	<u>-</u>	zaņe z
Pär	tilli Statement of Program Service Accomplishments					
1	Briefly describe the organization's mission:					
	PROVIDE EDUCATIONAL AND TECHNICAL		- -			
	INFORMATION TO PUBLIC WATER SYSTEMS LOCATED IN KANSAS					
2	Did the organization undertake any significant program services during the year which were not listed or	n the prior				
_	Form 990 or 990-EZ?			Yes	X	No
	If 'Yes,' describe these new services on Schedule O		L.,J		ت	
3		nucoc2		Yes	X	No
3	If 'Yes,' describe these changes on Schedule O	vices.		162		NO
	,		. 04	- 501	(-) (D)	
4	Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	s by expense Id allocations	to others	n our	(c)(3) total	
	expenses, and revenue, if any, for each program service reported			,		
	4 1 010 500				0 1 5	
4a) (Revenue	\$ <u> </u>	2,64	9,15	<u> </u>
	THE ASSOCIATION IS ESTABLISHED TO INCREASE THE LEVEL					
	OF EDUCATIONAL AND TECHNICAL INFORMATION WITH RESPECT					
	TO PUBLIC WATER SUPPLY SYSTEMS LOCATED WITHIN KANSAS		- -			
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
						<del></del>
4b	(Code) (Expenses \$ including grants of \$	) (Revenue	\$			)
		, ,	·			
		- <b></b>				<del>-</del>
	~					
						. <del></del>
4 -	(Code)		^			
4 C	(Code:) (Expenses \$ including grants of \$	) (Revenue	\$			)
			- <b></b> -			. – – -
			- <b></b> -			. – <b>–</b> -
		<b></b> _				
		- <b></b>	- <b></b> -			
			<b></b>			· – – -
		<b></b> -				
A -1	Other account of the control of the					
40	Other program services (Describe in Schedule O)					
	(Expenses \$ including grants of \$ ) (Revenue	Ş			)	
<u>4e</u>	Total program service expenses ► 1,918,708.					

Form 990 (2009) KANSAS RURAL WATER ASSN
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? 'Yes,' complete Schedule D, Part III	. 8		Х
9	Did the organization report an amount in Part X, line 21, 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		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments/f 'Yes,' complete Schedule D, Part V.	10		Х
11	is the organization's answer to any of the following questions 'Yes' 7f so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
•	• Did the organization report an amount for land, buildings and equipment in Part X, line 107 'Yes,' complete Schedule D, Part VI	1000		
•	• 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	<b>新教</b>		
•	• 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			
	• 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	SEE SEE		A B
•	• Did the organization report an amount for other liabilities in Part X, line 257f 'Yes,' complete Schedule D, Part X			
	<ul> <li>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? IYes, 'complete Schedule D, Part X</li> </ul>			
12	Did the organization obtain separate, independent audited financial statement for the tax year? 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	x	
	A Was the organization included in consolidated, independent audited financial statement for the tax  year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional  12 A X	54.2 js	が変	**
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	£ 12-474	Χ
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
i	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	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.	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'lf 'Yes,'			
20	complete Schedule G, Part III	19 20		X X
				-

Form 990 (2009) KANSAS RURAL WATER ASSN
Part IV: 對 Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 17 f 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 'Yes,' complete Schedule J	23		x
24 a	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, and that was issued after December 31, 20023f 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
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?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I .	25a		Х_
t	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# 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? Yes, complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual if 'Yes,' complete Schedule L, Part III	27		x
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).	ازر آلو کی د الانتشار		, , , , , , , , , , , , , , , , , , ,
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
Ł	A family member of a current or former officer, director, trustee, or key employee? Yes, complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner?/f 'Yes,' complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> 'Yes,' <i>complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations ## 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 'Yes,' complete Schedule N, Part II	32		Х
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.	33		Х
34	Was the organization related to any tax-exempt or taxable entity If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	:	Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?f 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	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 .	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	 

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Form 990 (2009)

Form 990 (2009) KANSAS RURAL WATER ASSN

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns. Enter -0- if not applicable.	1a 1	4		
	<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0 15.3	E STOWN	文類
	c Did the organization comply with backup withholding rules for reportable payments to vendo (gambling) winnings to prize winners?	rs and reportable gaming	1 c	X	8. Z. Z.
2	a 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 2.	5		,
2	b If at least one is reported on line 2a, did the organization file all required federal employment	t tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required tœ-file this retuin		. LY 2.2		,
	a Did the organization have unrelated business gross income of \$1,000 or more during the year this return?	r covered by	3 a	х	
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q		3 b	X	<u> </u>
4	<ul> <li>A At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other f</li> </ul>	or other authority over, a inancial account)?	4a		Х
	b If 'Yes,' enter the name of the foreign country: ►	<del>-</del>			ETO.
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Financial Accounts.	-	42.3	<b>元</b> 27.0	
	a Was the organization a party to a prohibited tax shelter transaction at any time during the ta		. <u>5 a</u>		X
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf		5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Er Tax Shelter Transaction?	itity Regarding Prohibited	5 c		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible?	nd did the organization	6 a	ļ 	Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such c deductible?	ontributions or gifts were no	ot 6b		
7	Organizations that may receive deductible contributions under section 170(c).		100	11.7	re Sag
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and provided to the payor?	artly for goods and services	7 a	100	X X
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	••	7b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for w Form 8282?	hich it was required to file	7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year  e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiur	7d ns on a personal	1 1 1 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1		r
	benefit contract?	. (1	7 e		X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben		7 f		X
	g For all contributions of qualified intellectual property, did the organization file Form 8899 as a h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a For	•	7g 7h		<del> </del>
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		7 f1	1950	7-1- 3
	supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ave excess business	8	ا ارواز اور اکستاد کشته	X
9	Sponsoring organizations maintaining donor advised funds.		17.75g	認定	100 m
	a Did the organization make any taxable distributions under section 4966?	• • •	9a		X
	<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	•	9b	<del></del>	X
	Section 501(c)(7) organizations.Enter:	1	清潔		3 7
	a Initiation fees and capital contributions included on Part VIII, line 12	10a	- (4)		51.67.243
	b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		<b>建筑</b>	
	Section 501(c)(12) organizations. Enter.	aa	11.71	200	75. 77
	a Gross income from other members or shareholders	11 a	15. 16		
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ).	116	土地		M
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	1	12 a	er lagge state	<u> </u>
- 1	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b!	1 4 1	017.53	'

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Form 990 (2009)

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 in Schedule O. See instructions.

Section A.	Governing Body and Management					
				-	Yes	No
1 a Enter the	e number of voting members of the governing body	1 a	7	31,0	荒坑。	ž !
<b>b</b> Enter the	e number of voting members that are independent	1 b	7	200	1	الم المحدد الما
2 Did any officer, o	officer, director, trustee, or key employee have a family relationship or a business relirector, trustee or key employee?	elation	ship with any other	2		X
3 Did the o	organization delegate control over management duties customarily performed by or so, directors or trustees, or key employees to a management company or other pers	under	the direct supervision	on 3		х
	organization make any significant changes to its organizational documents			4		Х
	e prior Form 990 was filed?					
	organization become aware during the year of a material diversion of the organization	n's as	sets?	5		Х
	organization have members or stockholders?			6	$\vdash$	X
	organization have members, stockholders, or other persons who may elect one or	more	members of the	7a		х
_	decisions of the governing body subject to approval by members, stockholders, or o	other p	ersons?	7b		X
8 Did the o	organization contemporaneously document the meetings held or written actions unde	ertake	n during the year by	/ <u> </u>		12 mg
	erning body?				X	
•				8a		
	nmittee with authority to act on behalf of the governing body?			8b	X	
	any officer, director or trustee, or key employee listed in Part VII, Section A, who cation's mailing address? If 'Yes,' provide the names and addresses in Schedule O			9		Х
Revenue Code	Policies (This Section B requests information about policies not	requi	rea by the inter	nai		
tevenue Coue				<del></del>	Yes	No
10 a Does the	organization have local chapters, branches, or affiliates?			10 a	162	X
	• • • • • • • • • • • • • • • • • • • •	of sucl	· · · · · · · · · · · · · · · · · · ·	<del></del>		
	does the organization have written policies and procedures governing the activities ches to ensure their operations are consistent with those of the organization?					
	organization provided a copy of this Form 990 to all members of its governing body		filing the form?	11	1 1	X
	in Schedule O the process, if any, used by the organization to review this Form 99	0		· , 45 , 67	وميا ووالم	<del>* *</del>
	organization have a written conflict of interest policy? If 'No,' go to line 13		•	12 a		Χ
to conflic			-	12b		<u> </u>
	organization regularly and consistently monitor and enforce compliance with the post O how this is done.	olicy <b>7</b> f	'Yes,' describe in	12c		<u> </u>
	organization have a written whistleblower policy?			13		Х
14 Does the	organization have a written document retention and destruction policy?			14		X
15 Did the persons,	rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	l appro	val by independent?	· 所被	鑿	1
	nization's CEO, Executive Director, or top management official			15a		X
<b>b</b> Other off	icers of key employees of the organization		•	15 b		Х
If 'Yes' to	line 15a or 15b, describe the process in Schedule O. (See instructions.)			128	疑察	Ç. 7
16 a Did the o	rganization invest in, contribute assets to, or participate in a joint venture or similar	r arran	igement with a taxa	ble 16a		Nasaa X
b If 'Yes,' I in joint v	nas the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?	n to ev	valuate its participat organization's exem	tion pt		
	Disclosures			16b		
	tates with which a copy of this Form 990 is required to be filed					
18 Section 6	5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available. Check all that apply	– – – and 99	0-T (501(c)(3)s only	) avaılab	le for p	- – – oublic
	website Another's website X Upon request					
19 Describe statemen	in Schedule O whether (and if so, how) the organization makes its governing docuits available to the public.	ments,	conflict of interest	policy, ar	nd fina	incial
20 State the MANAG	name, physical address, and telephone number of the person who possesses the					2260
TIVINAG	ER 706 Waterway Drive SENECA k	<u> </u>	66538-0226	(913)_3	1 <u>16-</u> 3	1/60

# Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

### 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 organizations's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of 'key employees'
- 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did no	ot compen	sate a	iny (	curre	ent (	officer	, dır	ector, or trustee			
(A) (B) (c) (D) (E)  Name and Title Average Position (check all that apply) Reportable Reportable Est											
Name and Title	Average hours per week	or director	o mshtutronal trustee	_	a Key employee	A High est coincensated employee	y Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations	
Dennis Schwartz						_ ~					
President	3.00	X		Х				0.	0.	0.	
Patricia Shaffer Vice President	3.00	Х		Х				0.	0.	0.	
Darrell Schlabach Treasurer	3.00	Х		х				0.	0.	0.	
Sam Atherton Director	3.00							0.	0.	0.	
Sharon Dwyer DIRECTOR	3.00							0.	0.	0.	
Larry Remmenga Director	3.00							0.	0.	0.	
Allan Soetaert Director	3.00							0.	0.	0.	
Director	3.00				·			0.			
		1									

Part VIII Section A. Officers, Directors, Trust	tees, K	(ey	Em	ıplo	ye	es,	an	d Highest Con	npensated En	nployees (cont.)
(A)	(B)			(6	c) _			(D)	(E)	(F)
Name and Title	Average hours		tion (		all t	hat a		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	함	Inst	Officer	ě	eag F	Former	the organization (W-2/1099-MISC)	related organization (W-2/1099-MISC)	s compensation from the
		Individual or director	L L	ğ	emp	Highest co	ner	(11 2 10 3 3 111100)	(** 271033 111100)	organization and related
		, §	nait		employee	a non				organizations
	i	trustee	nstitutional trustee		[@]	Highest compensa employee				
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1 b Total	·			<u></u>	<u>'</u>	1	<b>-</b>	0.	(	0.
2 Total number of individuals (including but not limited	d to tho	se lı	sted	abo	ove)	wh	o re	ceived more than	\$100,000 in repo	ortable compensation
from the organization									·	
										Yes No
3 Did the organization list anyformer officer, director	or truste	ee. k	ev e	emp	love	e. c	or hu	ghest compensate	ed employee	
on line 1a? If 'Yes,' complete Schedule J for such ir	ndıvıdua	Ι.								3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater ti	portable	100	mpe	nsat	ion	and	d oth	ner compensation	from	3.99 BAR E-12
individual	ilali pio			, , ,	э с	omp	лесе	. Scriedule 3 foi Si		4 X
5 Did any person listed on line 1a receive or accrue c	omnens	atin	n fra	om a	ากง	umre	elate	ed organization fo	r services	<b>通訊整型</b> 623
rendered to the organization? If 'Yes,' complete Sch	edule J	for .	suci	ו pe	rsor	7		organization to		5 X
Section B. Independent Contractors	<del></del>									
<ol> <li>Complete this table for your five highest compensate compensation from the organization.</li> </ol>	ed inde	pend	dent	cor	itrad	ctors	s tha	at received more t	han \$100,000 of	
					-			T		
(A) Name and business addres	s							(B Description	of Services	<b>(C)</b> Compensation
	nhatt	an		KS	6	65	02	Printing		110,270.
										<del></del>
					_					
2 Total number of independent contractors (including		lımı	ted	to th	nose	list	ted a	above) who receiv	ed more than	NAME OF THE PARTY
\$100,000 in compensation from the organization	1								3	"一点是是他们是"。

THE PARTY OF THE P		Business Constitution		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
RANTS	1a Federated campaigns . b Membership dues	1a 1b	246,423.				The state of the s
S, GIFTS, C AILAR AM	<ul> <li>c Fundraising events</li> <li>d Related organizations</li> <li>e Government grants (contributions)</li> </ul>	1c 1d 1e	1,970,009.				Carlot Same
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grant similar amounts not included abov	ts, and ve 1 f	10,532.				
A S	g Noncash contribus included in los h Total. Add lines 1a-1f	1a-1f:, , \$	<b>.</b>	2,226,964.	The state of the s		
ÜĒ			Business Code				和2000年 <b>在</b> 1000年 (5)
PROGRAM SERVICE REVENUE	2a CONFERENCES	[		323,360.	0.	0.	323,360
ERE	b PRODUCT SALES			11,874.	0.	0.	11,874
Ž	c PUBLICATION		511120	29,838.	0.	29,838.	0
SER	d TRAINING SESSION	s		28,455.	0.	0.	28,455
Ž	e Consumer confidence	reports	<del></del>	28,662.	0.	0.	28,662
OGR	f All other program service r	revenue. (					
<u>~</u>	g Total. Add lines 2a-2f.	·	<u> </u>	422,189.	The state of the s	となる。 ない とない	···市京都市(14)
	<ul><li>3 Investment income (include other similar amounts)</li><li>4 Income from investment of</li></ul>		. ►	48,190.	0.	0.	48,190
	<b>5</b> Royalties .	·	· •				
		(ı) Real	(ii) Personal	時的歌歌時	Mile State Control	古代的经验和	ARTON BURGO.
	6a Gross Rents .				EAST-THE TANK		
	b Less: rental expenses			THE STATE OF THE S	ETTE TETT		是一次開發
	c Rental income or (loss)						The state of the s
	d Net rental income or (loss)	)	<b>&gt;</b>	1.11-1.11-1.11-1.11-1.11-1.11-1.11-1.1	Air-Cales Time State Addition of the	CAMPANICAL INC.	ب مرفر بالمسيدات الالطالقات الا
	7a Gross amount from sales of	(i) Securities	(ii) Other	MATERIAL TOPOLOGICAL TOPOLOGICA TOPOLOGICA TOPOLOGICAL TOPOLOGICA TOPOLOGIC	Table 1 Control 1	Sale and the control of the control	THE MANY COME
	assets other than inventory				<b>自建筑</b>		
	<b>b</b> Less cost or other basis			<b>一种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种</b>		TO TOP MEAN STANK	
	and sales expenses		+	是具体医性疗能	The state of the state of	是我们是我们的。 第一个	<b>国际国际</b>
	c Gain or (loss)				· 克克克斯 · · · · · · · · · · · · · · · · ·	The state of the s	The state of the state of
	d Net gain or (loss)		<b>&gt;</b>			- The state of the	and the contract of the contra
NUE	8a Gross income from fundrai (not including \$	sing events					
OTHER REVENL	of contributions reported or	n line 1c)		以"高"的"是"。 第二章			に関係が開発して
R.	See Part IV, line 18 .		a	第二次 19		是是这种的是是一个。 第二个是是不是是一个人的。	1950年1950年
Ĭ	<b>b</b> Less: direct expenses	•	b		A STATE OF THE STA	Section 112.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
٠	c Net income or (loss) from t	fundraising e	events -				
	9a Gross income from gaming See Part IV, line 19		a -				September 1
	b Less. direct expenses		p	THE STATE OF THE S	Bank Circles .	Total seeded a manie.	CANTINGENTAL PROPERTY OF
	c Net income or (loss) from	-	rities <u>►</u>	१८४१ मध्यानः सहस्र स्टब्स्	Fig. 25 J. C. Sand	147550 1 11 Fe 11 51 5	nde a shre in
	10a Gross sales of inventory, le and allowances		_				密裝鐵道。
			a	THE THE PART OF THE PART	The same of the sa		"剩后要受"
	b Less. cost of goods sold		p	**************************************	istillian a recording	ANTANET CO.	The state of the s
	c Net income or (loss) from s	saies of inve	ntory		A Freehouse see in many	Maria Casa Salar Language Anglia Casa Salar Lang	WEER \ 20 42 5 =
			Business Code			EFFERENCE :	PART LANGE !
	11a SUBSCRIPTIONS			5,615.		0.	5,615
	b MILEAGE REIMBURS			150,300.		0.	150,300
	c MISCELLANEOUS IN	COME		24,678.	0.	0.	24,678
	d All other revenue	[	· · · · · · · · · · · · · · · · · · ·	100	The resident of soil	7796 4 m \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ng spanis cal
	e Total. Add lines 11a-11d  12 Total revenue. See instruct	• •	<b>&gt;</b>	180,593.		领域特殊坚持。"	是原源数据企业
	iz Total revenue. See instruct	HODS	-	2,877,936.	0.	29,838.	621,134

Part Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must con	ipiete column (A) but ar	e not required to compl		a (D).
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	<del></del>				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			· · · · · · · · · · · · · · · · · · ·	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees			man rake distriction	S. And And Edition
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	908,944.	904,668.	4,276.	0.
,	Pension plan contributions (include section	300/311.	301/000.	1/2/0.	
8	401(k) and section 403(b) employer contributions	44,609.	44,556.	53.	0.
9	Other employee benefits	66,382.	65,334.	1,048.	0.
10	Payroll taxes	69,842.	69,762.	80.	0.
11	Fees for services (non-employees)				
	Management				
	Legal	15,168.	0.	15,168.	0.
	: Accounting	15,100.	-	13,100.	0.
	5				
	I Lobbying		了。 (1)	E. A.	
	<u>-</u>		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	12.1 - 12.4 13.3 2.3	
	Investment management fees				
	Other				
	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	347,998.	346,104.	1,894.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	285,363.	0.	285,363.	0.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	28,204.	0.	28,204.	0.
23	Insurance	15,276.	0.	15,276.	0.
24	Other expenses, Itemize expenses not	<b>高兴工工工工工</b>			的"特别"等
	covered above (Expenses grouped together and labeled miscellaneous may not exceed		Carl Transfer Control of the Control		
	5% of total expenses shown on line 25				
_	below.)	STATE OF A CO.	Late a treatment of the same	<b>表现</b> 。	学·邓小二是《编码记录题》23.00。
	CONTRACTUAL SERVICES	93,457.	88,957.	4,500.	0.
	DIRECTOR EXPENSE	10,695.	0.	10,695.	0.
	DUES	9,833.	0.	9,833.	0.
	FUEL	44,667.	0.	44,667.	0.
	PRODUCTS	2,825.	0.	2,825.	0.
	All other expenses	513,723.	399,327.	114,396.	0.
	Total functional expenses. Add lines 1 through 24f	2,456,986.	1,918,708.	538,278.	0.
26	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational				
BAA	campaign and fundraising solicitation	<u> </u>	L	<u> </u>	Form <b>990</b> (2009)

BAA

Form 990 (2009)

Part X Balance Sheet (A) Beginning of year (B) End of year 1 483,599 768,147. Cash - non-interest-bearing . . . . 000,000 2 2 1,500,000. Savings and temporary cash investments 3 Pledges and grants receivable, net. 428,563 3 553,513. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 36,379 8 31,879. Inventories for sale or use 850 9 4,610. Prepaid expenses and deferred charges . 857,796 10a Land, buildings, and equipment: cost or other basis. 10 a Complete Part VI of Schedule D **b** Less: accumulated depreciation. 10b 521,050 322,048 10 c 336,746. Investments - publicly-traded securities 11 11 1,205,827. 12 Investments - other securities. See Part IV, line 11 ... 562,425 12 13 Investments - program-related, See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 3,837,864 4,400,722. 24,151. 17 27,622. 17 Accounts payable and accrued expenses 18 18 Grants payable 19 71,121 19 66,157. Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II بالبذاعة 22 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties. 24 25 25 Other liabilities. Complete Part X of Schedule D <u>93,7</u>79. Total liabilities. Add lines 17 through 25 26 95,272 Organizations that follow SFAS 117, check here > X and complete lines 27 through 29 and lines 33 and 34. 27 Unrestricted net assets. 3,612,843. 27 4,189,862. Temporarily restricted net assets 129,749 28 117,081. Permanently restricted net assets ... .. 29 P Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, and equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 3,742,592 33 4,306,943. 34 Total liabilities and net assets/fund balances 3,837,864. 34 4,400,722.

TEEA0111 01/30/10

Form 990 (2009) KANSAS RURAL WATER ASSN	48-0849346	F	Page 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O	;		-
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2	а	X
b Were the organization's financial statements audited by an independent accountant?	_2	b X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversireview, or compilation of its financial statements and selection of an independent accountant?		С	Х
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	in (	1	1
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year we consolidated basis, separate basis, or both.	re issued on a	"	

Consolidated basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

**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 in Schedule O and describe any steps taken to undergo such audits

Both consolidated and separate basis

BAA

Form 990 (2009)

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# SCHEDULE A (Form 990 or 990-EZ)

**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.

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Employer identification number

	RURAL WATE							<del> </del>	349346	
	<del></del>		is (All organizations					See ı	nstruct	ions
The organ			use it is: (For lines 1 thro							
1 📙			ociation of churches des		section	170(b)(1	χΑχί).			
2	A school described	d in <b>section 170(b)(1)(</b>	<b>A)(ii).</b> (Attach Schedule E	Ξ.)						
3 📙		·	e organization described				-			
4	A medical research	h organization operate	ed in conjunction with a h	nospital	describe	d u <b>secti</b>	on 170(	(b)(1)(A)	(iii). Ente	er the hospital's
- —	name, city, and sta	ate:					<del>-</del>			
5	An organization op 170(b)(1)(A)(iv). (0	perated for the benefit Complete Part II.)	of a college or university	y owned	or oper	ated by	a govei	rnmenta	l unit des	scribed section
			governmental unit descri							
7 🛚	An organization the in section 170(b)(1	at normally receives a ( <b>XAXvi).</b> (Complete P	ı substantıal part of its si art II.)	upport fr	om a go	vernme	ntal uni	t or fron	n the ger	neral public described
8 📙	A community trust	described in section 1	70(b)(1)(A)(vi). (Complet	e Part II	.)					
_	from activities rela investment income	ted to its exempt func	(1) more than 33-1/3 % of tions— subject to certain ess taxable income (less omplete Part III)	exception	ons, and	d (2) no	more th	ıan 33-1	/3 % of ı	its support from gross
10	An organization or	ganized and operated	exclusively to test for pu	ublic saf	ety. See	section 5	509(a)(4	).		
	more publicly supp	orted organizations o	exclusively for the bene described in section 509( zation and complete line	a)(1) or	section	509(a)(2	ctions o 2). Se <b>s</b> e	of, or ca ection 5	rry out th <b>09(a)(3).</b>	ne purposes of one or Check the box that
	a 🗌 Type I	<b>b</b> 🗌 Type II	c 🗌 Type II	I – Fund	tionally	ıntegrat	ed		d 🗌	Type III- Other
	By checking this be than foundation ma 509(a)(2).	ox, I certify that the or anagers and other tha	rganization is not control n one or more publicly s	led dired upported	tly or in d organi	directly zations	by one describe	or more ed in se	disquali ction 509	fied persons other $\theta(a)(1)$ or section
f	If the organization	received a written det	termination from the IRS	that is a	a Type I	, Type II	or Typ	e ill sup	porting o	organization,
g	Since August 17, 2	2006, has the organiza	ition accepted any gift o	r contrit	oution fr	om anv	of the fe	ollowina	persons	,7
•		,	. , , ,			,				Yes No
	(i) a person who	directly or indirectly	controls, either alone or	together	r with pe	ersons d	escribe	d in (ii)	and (III)	
			upported organization?					•	•	11 g (i)
	· ·	·	cribed in (i) above?							11 g (ii)
			n described in (i) or (ii) a		•					11 g (III)
		1	the supported organization	1				Γ		
(1)	Name of Supported Organization	(u) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) lister gove	Is the tion in col d in your erning ment?	the organ	ou notify ization in ipport?	organizat	s the ion in col zed in the S ?	(vii) Amount of Support
			:	Yes	No	Yes	No	Yes	No	
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Total				hick of the	وعد إلكار المدود	展刊高級		The state of	學、學	
BAA For F	Privacy Act and Panery	vork Reduction Act Notice	see the Instructions for Form	990 or 9	90-F7			Schedul	A (For	m 990 or 990-FZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 KANSAS RURAL WATER ASSN 48-0849346 Page 2 Part III 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 1)

Sec	tion A. Public Support								
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').	1,645,662.	1,643,201.	1,646,273.	1,916,683.	2,226,964.	9,078,783.		
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf		:						
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge								
4	Total. Add lines 1-through 3	1,645,662.				2,226,964.	9,078,783.		
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)								
6	Public support. Subtract line 5 from line 4						9,078,783.		
Sec	tion B. Total Support								
Caleı begii	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total		
7	Amounts from line 4 .	1,645,662.	1,643,201.	1,646,273.	1,916,683.	2,226,964.	9,078,783.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	34,386.	85,416.	121,641.	78,408.	48,190.	368,041.		
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 IV.)								
11	Total support. Add lines 7 through 10				<b>秦沙</b> 斯美名	STATE OF STATE OF	9,446,824.		
12	Gross receipts from related activ	rities, etc. (see ins	structions)			. 12	572,944.		
	First five years. If the Form 990 organization, check this box and	stop here.		nd, third, fourth, o	or fifth tax year as	s a section 501(c)	(3)		
Sec	tion C. Computation of Pu	<u>blic Support P</u>	ercentage			· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	Public support percentage for 20	• •	•	ne 11, column (f)		14	96.10%		
15	15 Public support percentage from 2008 Schedule A, Part II, line 14								
16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization.									
b	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check a box licly supported or	on line 13, or 16a ganization.	, and line 15 is 3	3-1/3% or more, c	heck this box		
17 a	17a 10%-facts-and-circumstances test — 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box andtop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.								
	b 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and top here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization								

Page 3

48-0849346 |Partillia | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part 1) Section A. Public Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 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, 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the c Add lines 7a and 7b . 一に製造業語に 8 Public support (Subtract line **建一张产品的** 7c from line 6.) Section B. Total Support (b) 2006 (c) 2007 (d) 2008 (f) Total Calendar year (or fiscal yr beginning in) ► (a) 2005 (e) 2009 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on . . . . . . Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add ins 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)). 17 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box andstop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18

is not more than 33-1/3%, check this box andstop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form 990 c	r 990-EZ) 2	009	KANSAS	RURAI	L WATER	ASSN		48-0849346	Page 4
Part IV	Suppleme	ental Info	rmatic	n. Com	plete th	is part to	provide	e the explanations re other additional info	equired by Part II.	line 10;
1 4.4.4.2	Part II. lin	e 17a or	17b: a	nd Part	III. line	12. Prov	ide anv	other additional info	ormation. See ins	tructions.
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### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No 1545-0047
2009
Open to Rublic Inspection

Name of the organization

Employer Identification number

ואט	NSAS RURAL WATER ASSN			48-0849346
	rt'l. Organizations Maintaining Donor	r Advised Funds or Othe	ar Similar Funds or Acc	<u> </u>
<u>. u</u>	the organization answered 'Yes' t	o Form 990. Part IV. line	e 6.	Journs Complete II
		(a) Donor advised		Funds and other accounts
1	Total number at end of year		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2	Aggregate contributions to (during year) .			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the to the organization's exclusive	assets held in donor advised e legal control?	Yes No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or dor	ng that grant funds may be nor advisor or for any other	. Yes No
Pai	rtill Conservation Easements Comple		swared 'Ves' to Form 9	
	Purpose(s) of conservation easements held by			50, Fait IV, lille 7.
•	Preservation of land for public use (e.g., r	· · · · · · · · · · · · · · · · · · ·	Preservation of an historic	cally important land area
	Protection of natural habitat	ecreation or pleasure)	Preservation of certified h	
	Preservation of open space	ı		istorie structure
2		on held a qualified conservation	on contribution in the form of	a conservation easement on the
			ें - ध्र	Held at the End of the Year
i	a Total number of conservation easements	•	. 2a	
1	b Total acreage restricted by conservation easer	ments	2 b	
(	Number of conservation easements on a certif	fied historic structure included	ın (a) . 2c	
(	d Number of conservation easements included in	n (c) acquired after 8/17/06	2 d	
3	Number of conservation easements modified,	transferred, released, extingui	ished, or terminated by the or	rganization during the tax
	year ►			
4	Number of states where property subject to co	onservation easement is locate	ed*	
5	Does the organization have a written policy reand enforcement of the conservation easemer	garding the periodic monitorin	- · · · · · · · · · · · · · · · · · · ·	lations, . Yes No
	Staff and volunteer hours devoted to monitoring the year ►			
7	Amount of expenses incurred in monitoring, in during the year ►	especting, and enforcing conse	ervation easements \$ _	
8	Does each conservation easement reported or $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	n line 2(d) above satisfy the re	equirements of section	Yes No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote t conservation easements.	oorts conservation easements to the organization's financial	in its revenue and expense s statements that describes the	tatement, and balance sheet, and e organization's accounting for
Pai	Complete if the organization answers	ctions of Art, Historical wered 'Yes' to Form 990	<b>Treasures, or Other Sir</b> , Part IV, line 8.	nilar Assets
1 a	a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial stateme	lic exhibition, education, or res	search in furtherance of publi	ance sheet works of art, historical c service, provide, in Part XIV,
ŀ	of the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items:	lic exhibition, education, or res	venue statement and balance search in furtherance of publi	sheet works of art, historical c service, provide the following
	(i) Revenues included in Form 990, Part VIII,			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			►\$ ►\$
	If the organization received or held works of a amounts required to be reported under SFAS	116 relating to these items	er similar assets for financial	gain, provide the following
á	a Revenues included in Form 990, Part VIII, line			. ►\$
t	Assets included in Form 990, Part X			. ►\$ ►\$

Schedule D (Form 990) 2009 KANSA						48-084		Page 2	
Part:III Organizations Maintai	ning Collec	ctions	of Art, Histo	orical Treasures, o	r Other	Similar Ass	ets (contin	iued)	
3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply):									
a Public exhibition	a Public exhibition d Loan or exchange programs								
<b>b</b> Scholarly research			e 💹 Other				<del> </del>		
<del></del>	c Preservation for future generations								
4 Provide a description of the organ Part XIV.							ie in		
5 During the year, did the organiza assets to be sold to raise funds r	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No								
Part: IV. Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line									
9, or reported an amo	unt on Forn	n 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>b</b> If 'Yes,' explain the arrangement	ın Part XIV aı	nd comp	lete the follow	ing table.					
							Amount		
c Beginning balance	• • • •				10	<u> </u>			
<b>d</b> Additions during the year .		•			1	<u>d</u>			
e Distributions during the year .			• •	•	1.	<del></del>			
f Ending balance		•	•		11	<u>i  </u>			
2a Did the organization include an a		m 990, l	Part X, line 217			Į	Yes	No	
b If 'Yes,' explain the arrangement			<del>,</del>			<del></del>			
Part V Endowment Funds Cor							<del></del>		
	(a) Current y	year	(b) Prior yea	r (c) Two years bac	k (d)	Three years back	(e) Four ye	ars back	
1 a Beginning of year balance		-			E 151 4 12				
<b>b</b> Contributions.				45 25 45 15 15 15 15 15 15 15 15 15 15 15 15 15	3 5 5 4 10 12	TOTAL STATE OF THE	10 12 12 12 12 12 12 12 12 12 12 12 12 12	3127	
c Net Investment earnings, gains, and losses .				14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				Section 1	
<b>d</b> Grants or scholarships .				<b>新福苏科·</b>	EST & U	State of the state	THE WAR	THE CONTRACTOR	
e Other expenditures for facilities and programs									
f Administrative expenses			· · · · · · · · · · · · · · · · · · ·	<b>新版。新版</b>	<b>花蓝宝花</b>		1. 1995年		
<b>g</b> End of year balance .						至2.40亿元	一个一个	图图	
<ol><li>Provide the estimated percentage</li></ol>	of the year e	end bala	nce held as						
a Board designated or quasi-endow	/ment ►		<b>%</b>						
<b>b</b> Permanent endowment ►	%								
c Term endowment ►	<b>%</b>								
3a Are there endowment funds not in organization by	n the possess	ion of th	ne organization	that are held and adm	ınıstered	for the	Yes	No	
(i) unrelated organizations	•						3a(i)		
(ii) related organizations	• •						3a(ii)		
b If 'Yes' to 3a(II), are the related organizations listed as required on Schedule R?							3b		
4 Describe in Part XIV the intended	I uses of the o	organiza	tion's endowm	ent funds					
Part:VI∜ Investments—Land, B	<u>uildings, ar</u>	nd Equ	i <b>ipment.</b> See	e Form 990, Part X	, line 1	0.			
Description of investment			or other basis vestment)	(b) Cost or other basis (other)	` Ďe	ccumulated preciation	(d) Book \	Value	
<b>1 a</b> Land	[			43,021.	375 14 - 35	代产品证法的证据	43	3,021.	
<b>b</b> Buildings	[			301,504.		99,653.	202	1,851.	
c Leasehold improvements				<u></u>					
<b>d</b> Equipment	. [			513,271.		421,397.	9.2	1,874.	
<b>e</b> Other .									
Total. Add lines 1a through 1e (Column	(d) must eau	al Form	990. Part X. c.	olumn (B) line 10(c) )		▶	336	6 746	

BAA

Schedule **D** (Form 990) 2009

Part*VII® Investments—Other Securities See Fo	rm 990, Part X, Iir	ne 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other	· <del>- · · · · · · · · · · · · · · · · · ·</del>	
United States Semiconductor Corporation	10,000.	Cost
Waddell & Reed	1,195,827.	
<b></b>		
<b></b>		
Total. (Column (b) must equal Form 990 Part X, col (B) line 12.)	1,205,827.	The state of the s
Part VIII Investments-Program Related (See F	orm 990, Part X, I	line 13)
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	<del></del>	
Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.)	15	· 一般のないではないというできます。 あんしゃかんしゃないとうと ないはんしょうしゅうしゃ
Part IX Other Assets (See Form 990, Part X, I		
(a) Des	scription	(b) Book value
	<del></del>	
	·····	
T. I. (0.1 (1) 1.5 (0.0 D. I.V. (1.7) 1.		
Total. (Column (b) must equal Form 990, Part X, col (B), lin		<b>&gt;</b>
Part X Other Liabilities (See Form 990, Part )		The state of the s
(a) Description of Liability	(b) Amount	
Federal Income Taxes		The second secon
<del> </del>		
		·····································
Total (Column (b) must equal Form 990, Part X, col. (B) line 25)		
2 FIN 48 Footpote In Part XIV provide the text of the feet	acta to the organization	ale financial statements that reports the array of the file

Schedule D (Form 990) 2009 KANSAS RURAL WATER ASSN

Page 3

48-0849346

Schedule D (Form 990) 2009 KANSAS RURAL WATER ASSN	48-0849346	Page 4
Rant XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	5	
1 Total revenue (Form 990, Part VIII, column (A), line 12)		2,877,936.
2 Total expenses (Form 990, Part IX, column (A), line 25)	· · · <u> </u>	2,456,986.
3 Excess or (deficit) for the year. Subtract line 2 from line 1		420,950.
4 Net unrealized gains (losses) on investments		143,401.
5 Donated services and use of facilities		
6 Investment expenses		
7 Prior period adjustments		
8 Other (Describe in Part XIV)		
9 Total adjustments (net). Add lines 4 through 8		143,401.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		564,351.
Part XIII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Return	
Total revenue, gains, and other support per audited financial statements		3,021,337.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	A333	
a Net unrealized gains on investments	01.	
b Donated services and use of facilities	45	
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIV) 2d		
e Add lines 2a through 2d	2 e	1/3 /01
· · · · · · · · · · · · · · · · · · ·	J	143,401. 2,877,936.
3 Subtract line 2e from line 1	2 / ALYGE P	2,011,930.
4 Amounts included on Form 990, Part VIII, line 12, but not on line	18 mg 5	
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b.	4c	<del></del>
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		2,877,936.
Rank Reconciliation of Expenses per Audited Financial Statements With Expenses		
1 Total expenses and losses per audited financial statements	. 1	2,456,986.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1.56° 4.58	
a Donated services and use of facilities 2a	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
b Prior year adjustments	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
c Other losses	26.7	
d Other (Describe in Part XIV)	2745	
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	2,456,986.
4 Amounts included on Form 990, Part IX, line 25, but not on line:	3/30 Fig.	
a Investments expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIV)	54	
c Add lines 4a and 4b	. 4c	
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	<del></del>	2,456,986.
Part XIV Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Pa line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also complete th information	rt IV, lines 1b and is part to provide	d 2b; Part V, any additional
	<b></b>	
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48-0849346

Schedule D (Form 990) 2009 KANSAS RURAL WATER ASSN	48-0849346	Page 5
Schedule D (Form 990) 2009 KANSAS RURAL WATER ASSN Part XIV Supplemental Information (continued)		
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### SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047

2009

Open to Rublic

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

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Name of the organization Employer identification number 48-0849346 KANSAS RURAL WATER ASSN Pt VI-B, Line 11A Tax return is reviewed by Mangager and Board Treasurer Pt VI-C, Line 19 Available upon request