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* Form 990

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)

OMB No 1545-0047

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

			nue Service	^y ▶ 1	The	organız	zation i	may ha	eve to	use a	сору с	of this ret	urn to sati	isfy state	e repo	orting requ	uirem	ents	Inspe	ection
	Α	For th	ne 2009 c	alendar	r yea	r, or ta	ax yea	r begiı	nning		Marc	h 1	, 2009, a	and end	ing	Febru			, 20 10	
	В	Check if	applicable	Please		lame of	organiz	zation N	Nation	nal Ru	ural W	ater As	sociation	n			D E	Employ	er identıfica	tion numbe
		Address	change	use IRS label or		oing Bu	usiness	As Na	tiona	l Rur	al Wat	ter Asso	ciation					73		06395
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		Amende	ed return	tions	_	uncan,											G	Gross rec	ceipts \$ 4	19,246,27
		Application	on pending	F Nan	me a	nd addre	ess of p	orincipa	officer	Ro	bert k	(. Johns	son			H(a) Is this	s a grou	p return	for affiliates?]Yes ☑N
				Loco,												H(b) Are	all affi	ilıates ır	ncluded?	Yes 🔽 N
			empt status			(6)	◆ (inser)	rt no)	49	947(a)(1) or	527				If "N	lo," at	tach a	list (see inst	ructions)
			ite: ► w\													H(c) Group	,			
			organization		poratio	<u>n 🗀 Iri</u>	rust 🔲	Associati	on \square	Other	<u> </u>		L Yea	ar of form	ation	1976	М	state of	legal domici	le OK
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9	Revenue	i .	_						_	•								290		174,44
2010	ď												 and 11e)				446,			1,510,66
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>		1																00		0
NOV	ses	1		s paid to or for members (Part IX, column (A), line 4)								931,	992		4,664,91					
	Expenses	1	a Professional fundraising fees (Part IX, column (A), line 11e)										00		0					
SANNED	Ä	b	Total fun	draising	g ex	penses	s (Part	IX, co	lumn ((D), lin	ne 25) I	-								
$\overline{\mathbb{Z}}$		17	Other ex	penses	s (Pa	art IX,	colum	nn (A),	lineş_	11a=	11d_1	1f-24f)-	è- eb	-			292,			4,830,52
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POIM	990 (2009)	Page Z
Par	rt III Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission: To foster opportunities to enhance the state associations to the benefit of their members.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☑ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	✓ No
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expensive Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grant allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$	_)
	Agreements with state affiliates for the purpose of training and technical assistance to over 27,000 rural and	
	municipal water systems.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	_)
		-
	,	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	_)
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶	

Par	t 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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
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		1
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		1
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓
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		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	✓	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	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.			
•	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	✓.	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		+*
	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		✓
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	-	✓
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		✓
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		1
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		1
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		1
<u> 20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	1	V

Pal	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 1? If "Yes," complete Schedule I, Parts I and II	21		✓
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		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	✓	
	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 25	24a		✓_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		
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? If "Yes," complete Schedule L, Part I	25b		
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? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	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? If "Yes," complete Schedule L, Part IV	28c		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	_	1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
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	1	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
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		
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		1
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		1

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	√	
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 51			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	✓	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_	✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
h	If "Yes," enter the name of the foreign country: ▶			
J	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		✓
	organization solicit any contributions that were not tax deductible?			
Ь	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	7.		
	and services provided to the payor?	7a 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		-
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	required?			
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gloss receipts, included on Form 550, Fart VIII, line 12, 101 public use of club facilities			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	dross meetre from members of shareholders			
מ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			

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.

Sec	tion A. Governing Body and Management			
]	Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			لـــا
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			_
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3_		/
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6	_<_	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members		_	
	of the governing body?	7 <u>a</u>	√	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			igsquare
а	The governing body?	8a_	√	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			١,
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a_		
	tion B. Policies (This Section B requests information about policies not required by the Integral Code)	ernai		
nev	enue Code.)			T
		10a	Yes ./	No
	Does the organization have local chapters, branches, or affiliates?	iua		\vdash
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b	1	
44	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		\vdash
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	1	
118	form?		_ -	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	√	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	✓	
_				
',	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	✓	
13 ·	Does the organization have a written whistleblower policy?	13	√	
14	Does the organization have a written document retention and destruction policy?	14	1	
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?	<u> </u>		
а	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b	_	✓_
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	<u>16a</u>		✓_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Oklahoma			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reconganization: National Rural Water Association; 2915 S. 13th Street; Duncan, OK 73533-9086; 580-252	ords o 2 -062 9	the	

Part VII 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 organization's tax year. Use Schedule J-2 if additional space is needed.

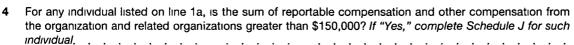
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key 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 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 not c	ompensate	any d	curre	ent	offic	cer, d	irec	tor, or trustee.		
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	ল Key employee	Highest compensated employee	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
Fred Sheldon		-			_	ـقــــــــــــــــــــــــــــــــــــ				
President	│ 0	1						0	0	0
Joe Liles	0							0	o	0
Senior Vice President	<u> </u>	✓						0	•	
Doug Anderton	0							0	ol	0
Vice President	١	✓								
Charles Hilton	0						ļ	0	o	0
Secretary	0	✓						U	•	
Mel Aust	-lo			İ				0	اه	0
Treasurer	<u> </u>	✓				<u></u>	<u>L</u>		•	
Rodney Tart	- o	ŀ					ļ	l 0	0	0
Immediate Past President	<u> </u>	✓	<u> </u>							
Steve Wear	- o							0	o	0
Executive Director	ļ v	✓	$oxed{oxed}$	<u> </u>						
Steve Fletcher	\downarrow_{0}							۰ ا	o	0
Executive Director	<u> </u>	1			<u> </u>	<u> </u>				
David Baird	- o					İ		l 0	o	0
Executive Director	•	✓		<u> </u>	L	<u> </u>				
Randolph Hall	- o			ļ				0	lol	0
Director		1			_	<u> </u>	<u> </u>			
Bill Harvey	-l o		1					0	0	0
Director	ļ -	/		<u> </u>	_	_	_			
David Saddler	- o							0	o	0
Director	ļ <u> </u>	↓ ✓				<u> </u>	ļ			
Gary Ensign	-lo							l 0	o	0
Director	<u> </u>	✓		_		ļ	<u> </u>			
Henry Meyer	-l o				Ì			0	o	0
Director	ļ -	/			<u> </u>	<u> </u>	╙			<u>.</u>
Paul Brayton	- o						1	0	l	0
Director	ļ -	✓	\perp	_	<u> </u>	↓	\vdash			-
Bob Culver	- l o							0	0	0
Director		✓]	<u> </u>		L	_

Part VII Section A. Officers, Directors, Tr	ustees, Key	/ Emp	loye	es,	an	d Hig	hes	t Compensate	d Employees (co	Page 8
(A)	(B)			(((D)	(E)	(F)
Name and title	Average hours per week	P or director	institutional trustee	heck Officer	Rey employee	Highest compensated employee	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
Phil Bastin	0							0	0	0
Director	U	✓							U	
Randall Van Dyke Director	0	1						0	0	0
Dennis Schwartz		 	П						****	
Director	∤ 0	1				Ì		0	0	0
Wayne Fontenot		- *								
Director	│ 0	1						0	0	0
Darryl Brown	<u> </u>	├ ▼	Н							
Director	− 0	1						0	0	0
Steve King Director	0	,					1	0	0	0
John Sasur	-	✓	Щ		_	.	-			
	-l o	١,						0	l o	0
Director Jim Gilles	ļ. <u></u>	✓	Н		<u> </u>		<u> </u>	_		_
Director	0	١.						0	lol	0
L. C. Hand	ļ	✓	Ш		┝		-	-		
Director	- o	1						0	0	0
Bill Robinson								_		
Director	│ 0	1						0	0	0
Dan Keil	1.					1			_	
Director	0	1						0	0	0
Tom Goulette	1_							_	_	
Director	0	1						0	0	0
Dan Sweeney	1.	1				1	Ī			
Director	0	✓						0	0	0
1b Total								1,498,714	0	0
Total number of individuals (including but reportable compensation from the organization)		to th	ose	liste	ed a	above	e) w	ho received m	ore than \$100,00	00 in
										Yes No

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated
	employee on line 1a? If "Yes," complete Schedule J for such individual



	Yes	No
3		\
	}	
4	1	
5		√

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

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

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

Part \	VIII	Statement of Revenue						
(0 cal								
(0 1					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
를 달	1a	Federated campaigns	1a	0				1
g al	b	Membership dues	1b	527,534	:			
fts,	С	Fundraising events	1c	0				
<u>.g</u> <u>'ë</u>		Related organizations	1d	0				
Sin		Government grants (contributions).	1e	43,936,884				
la gr	f	All other contributions, gifts, grants,	 1f	202 607				
Contributions, gifts, grants and other similar amounts	q	and similar amounts not included above Noncash contributions included in lines 1a-1		292,607 0				
ର ଜ		Total. Add lines 1a–1f		•	44,757,025			
<u>o</u>			Ì	Business Code				
<u> </u>	2a	Tech. Assist. for FmHA Loans	[900099	2,698,670	2,698,670	0	0
æ	b	Interest Income-Loans		900099	92,586	92,586	0	0_
Ą.	С		↓					
Program Service Revenue	d		↓					
틢	e							
ğ		All other program service revenue		12,883	12,883	0	0	
_		Total. Add lines 2a–2f			2,804,139			<u> </u>
		Investment income (including divi			174,441	o	0	174,441
1.		other similar amounts)			0	0	0	0
1		Royalties			0	0	0	0
İ		(i) Real		(ii) Personal				
	6a	Gross Rents 246	6,198	0	!			
	b	Less: rental expenses	0	0				
		Rental income or (loss)	0	0				
	d			T	246,198	246,198	0	0
1	7a	Gross amount from sales of (i) Secunting	es 0	(ii) Other	į			
	_	assets other than inventory		——씍				
	b	Less cost or other basis and sales expenses .	o	o	į			
	c	Gain or (loss)	0	0				
		Net gain or (loss)		▶	0	0	0	0
~ ~ I		Gross income from fundraisil events (not including \$	ng					
Other Reve		of contributions reported on line 1						
<u> </u>		See Part IV, line 18		0				
풀		Less: direct expenses		0				
		Net income or (loss) from fundrais		ents ▶	0	0	0	0
!	9a	Gross income from gaming activities	es.	اه				
	h	See Part IV, line 19		0				
		Net income or (loss) from gaming		ies ▶	0	0	0	0
1		Gross sales of inventory, le		T T				
'		returns and allowances		24,243				
İ		Less: cost of goods sold		0				
L	С	Net income or (loss) from sales of it	nvento		24,243	24,243	0	0
-		Miscellaneous Revenue		Business Code	4424.55	440400=		<u> </u>
1	1a	Meetings Advertising	— ⊦	900099	1,124,397	1,124,397	115 920	0
	b	Advertising		511120	115,829	<u> </u>	115,829	
	C	All other revenue	 					
				•	1,240,226			
1:	2	Total revenue. See instructions.	· · ·		49,246,272	4,198,977	115,829	174,441

Part IX Statement of Functional Expenses

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

	All other organizations must complete col	umn (A) but are not	required to com	plete columns (B),	(C), and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	39,777,000			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,498,714			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0 1,994,293			
7 8	Other salaries and wages		 _		
	and section 403(b) employer contributions)	244,510			
9	Other employee benefits	660,179			
10	Payroll taxes	267,215			
11	Fees for services (non-employees): Management	o			
	Legal	26,404			
	Accounting	57,886			
	Lobbying	536,401			
	Professional fundraising services. See Part IV, line 17	0			
	Investment management fees	68,451			
	Other	0			
12	Advertising and promotion	0			
13	Office expenses	535,834			
14	Information technology	0			·
15	Royalties	. 0			
16	Occupancy	818,936			
17	Travel	1,550,163			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings .	737,386			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization.	99,940			
23	Insurance	43,842			_
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Member Services	19,134		ļ <u> </u>	
b	Regulatory	146,705		<u> </u>	
C	Other Operating	189,443			
d					<u> </u>
е					
	All other expenses	40.070.460		<u> </u>	
<u>25</u> 26	Total functional expenses. Add lines 1 through 24f	49,272,436		 	
2 0	Joint costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Га	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	754,485	1	1,268,245
	2	Savings and temporary cash investments	3,147,096	2	6,820,772
Į	3	Pledges and grants receivable, net	5,045,337	3	10,533,037
-	4	Accounts receivable, net	280,011	4	<u>263,571</u>
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6	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	0	6	0
s	7	Notes and loans receivable, net	2,649,647	-	2,898,108
Assets	7		39,914		47,052
Ass	8		154,113		129,317
	9 10a	Prepaid expenses and deferred charges	10-1,110		120,01.
	b	Less: accumulated depreciation 10b 1,180,571	759,575	10c	781,627
	11	Investments—publicly traded securities	7,217,832		10,889,593
	12	Investments—other securities. See Part IV, line 11	0		0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	• •		14	0
	15	Intangible assets		15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	20,048,010	_	33,631,322
_	17	Accounts payable and accrued expenses	638,132		764,747
	18	Grants payable	5,157,098		9,891,346
	19	Deferred revenue	127,300		5,363,344
	20	Tax-exempt bond liabilities	0		0
ဖွ	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0		0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	-		
E	•	persons. Complete Part II of Schedule L	0	22	0
- 1	00	Secured mortgages and notes payable to unrelated third parties	0		0
	23 24	Unsecured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	0		0
	25	Other liabilities. Complete Part X of Schedule D	14,077	$\overline{}$	14,077
	26	Total liabilities. Add lines 17 through 25	5,936,607		16,033,514
ses		Organizations that follow SFAS 117, check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.	<u> </u>		
ğ	27	Unrestricted net assets	14,111,403	27	17,597,808
g	28	Temporarily restricted net assets	0	28	0
핗	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds	0	30	0
set	31	Paid-in or capital surplus, or land, building, or equipment fund	0		0
As	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
et	33	Total net assets or fund balances	14,111,403	$\overline{}$	17,597,808
Z	34	Total liabilities and net assets/fund balances	20,048,010		33,631,322

Pai	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Z 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?	2a		\
b	Were the organization's financial statements audited by an independent accountant?	2b	✓	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	\	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate 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?	3a	✓	_
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.	3b	✓	
		Form	990	(2009)

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Nati	onal Rural Water Association		′	3	1006395
Pa	Organizations Maintaining Donor the organization answered "Yes" to		ar Funds	or Acc	counts. Complete if
		(a) Donor advised funds		(b) 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 donfunds are the organization's property, subject t	or advisors in writing that the asse o the organization's exclusive lega	ts held in d I control? .	donor ac	lvised
6	Did the organization inform all grantees, donors used only for charitable purposes and not for t purpose conferring impermissible private benefits	he benefit of the donor or donor a	dvisor, or f	or any o	ther
Pa	t II Conservation Easements. Complete	if the organization answered "Ye	es" to Forr	<u>n 990, I</u>	Part IV, line 7.
1	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., red Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization	creation or pleasure) Preserv	vation of an vation of a	certified	illy important land area historic structure of a conservation
	easement on the last day of the tax year.				
					eld at the End of the Tax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easen	nents		2b	<u> </u>
С	Number of conservation easements on a certification			2c	
d	Number of conservation easements included in	, , ,		2d	
3	Number of conservation easements modified, the tax year ▶	ransferred, released, extinguished,	or termina	ited by t	he organization during
4	Number of states where property subject to co				
5	Does the organization have a written policy required violations, and enforcement of the conservation	n easements it holds?			. LYes LNo
6	Staff and volunteer hours devoted to monitorin	,			
7	Amount of expenses incurred in monitoring, ins	specting, and enforcing conservation	on easeme	nts durir	ng the year
8	Does each conservation easement reported on $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(i)$?				Yes No
9	In Part XIV, describe how the organization report balance sheet, and include, if applicable, the tethe organization's accounting for conservation	ext of the footnote to the organizat easements.	tion's financ	cial state	ements that describes
Pa	Organizations Maintaining Collectic Complete if the organization answere	ons of Art, Historical Treasures d "Yes" to Form 990, Part IV, line	s, or Other e 8.	r Simila	r Assets.
1a	If the organization elected, as permitted under art, historical treasures, or other similar assets h provide, in Part XIV, the text of the footnote to	eld for public exhibition, education,	or research	h in furth	balance sheet works o erance of public service
b	If the organization elected, as permitted under historical treasures, or other similar assets held provide the following amounts relating to these (i) Revenues included in Form 990, Part VIII, I	d for public exhibition, education, ce items. ine 1	or research	in furthe	erance of public service \$
	(ii) Assets included in Form 990, Part X				\$
2	If the organization received or held works of a following amounts required to be reported und	ler SFAS 116 relating to these item	ns:		
a b	Revenues included in Form 990, Part VIII, line Assets included in Form 990, Part X	1		>	\$ \$

	•				-	
chor	dule D (Form 990) 2009					Page 2
_	t III Organizations Maintaini	na Collections	of Art. Historica	al Treasures, or (Other Similar Ass	
3	Using the organization's acquisition collection items (check all that appl	, accession, and c				
a b c 4	Public exhibition Scholarly research Preservation for future general Provide a description of the organiz Part XIV.	,	e 🗌 (Loan or exchange pother		
5	During the year, did the organization assets to be sold to raise funds rathe	solicit or receive don't than to be mainta	onations of art, his	storical treasures, or ne organization's col	other similar lection?	. Yes □ No
Pai	Escrow and Custodial A IV, line 9, or reported an	rrangements. C	omplete if the o	organization answe		n 990, Part
	Is the organization an agent, trusted included on Form 990, Part X? If "Yes," explain the arrangement in				r other assets not	Yes No
c d		 			d e	ount
2a	Ending balance Did the organization include an amilf "Yes," explain the arrangement in	ount on Form 990			f 	Yes No
	t V Endowment Funds. Co		ganization ansv	vered "Yes" to Fo	orm 990, Part IV,	line 10.
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance					
þ	Contributions					
C	Net investment earnings, gains, and losses					
d	Grants or scholarships					
е	Other expenditures for facilities and programs					
	Administrative expenses End of year balance					
2	Provide the estimated percentage of	of the year end ba	lance held as:			
а	Board designated or quasi-endown	-				
b	Permanent endowment ▶	%				
С	Term endowment ▶ 9	6				
3a	• •				ministered for the	Yes No
	(ii) related organizations If "Yes" to 3a(ii), are the related org	anizations listed a	s required on So	chedule R?		3a(ii) 3b

Part VI Investments—Land, Buildin	gs, and Equipment	. See Form 990, Pa	art X, line 10.	
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		10,000		10,000
b Buildings		416,292	416,292	0
c Leasehold improvements		1.118.155	361,835	756,320
d Equipment		338,444	323,137	15,307
e Other		79,307	79,307	0
Fotal. Add lines 1a through 1e. (Column (d) must		column (B), line 10(c).) . . >	781.627

Schedule D (Form 990) 2009			Page 3
Part VII Investments—Other Securities	See Form 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	tion ket value
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)			
Part VIII Investments—Program Related	See Form 990. Part X.	line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valua	ation
(a) Description of investment type	(b) Dook value	Cost or end-of-year ma	rket value
		-	
		· · · · · · · · · · · · · · · · · · ·	
			
			
			
Tabel (Caluma (h) must savel form (000 Part V and (f)) (no. 12)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	+ V line 15		
Part IX Other Assets. See Form 990, Par			(b) Book value
	(a) Description		(b) Book value
			<u> </u>
	<u></u>		
			
Total. (Column (b) must equal Form 990, Part X, col. (<u></u> <u></u>	
Part X Other Liabilities. See Form 990,			
1. (a) Description of liability	(b) Amount		
Federal income taxes		<u>D</u>	
Security Deposits	14,077	<u>7</u>	
		_	
		_	
		_	
		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	14,077	7	

D	- 4

Pai	t XI Reconciliation of Change in Net Assets from Form 990	to Au	udited Financial St	aten	nents
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	49,246,272
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	49,272,436
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	(26,164)
4	Net unrealized gains (losses) on investments			4	3,512,569
5	Donated services and use of facilities			5	0
6	Investment expenses			6	0
7	Prior period adjustments			7	0
8	Other (Describe in Part XIV)			8	0
9	Total adjustments (net). Add lines 4 through 8			9	0
10	Excess or (deficit) for the year per audited financial statements. Comb			10	3,486,405
Pai	t XII Reconciliation of Revenue per Audited Financial Sta	teme	nts With Revenue	e pe	
1	Total revenue, gains, and other support per audited financial statemen	nts .		1	52,758,841
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	3,512,569	9	
b	Donated services and use of facilities	2b		0	
С	Recoveries of prior year grants	2c		0	
d	Other (Describe in Part XIV.)	_2d		0	
е	Add lines 2a through 2d			26	3,512,569
3	Subtract line 2e from line 1			3	49,246,272
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			i	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	. (0	
b	Other (Describe in Part XIV.)	4b	(0	
С	Add lines 4a and 4b			40	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line				70,270,212
Pa	t XIII Reconciliation of Expenses per Audited Financial St	atem	ents With Expens	es p	
1	Total expenses and losses per audited financial statements			_1	49,272,436
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			j	
а	Donated services and use of facilities	2a		0	
b	Prior year adjustments	2b	-	0	
С	Other losses	2c	+	0	
d	Other (Describe in Part XIV.)	2d		0	
е	Add lines 2a through 2d			26	
3	Subtract line 2e from line 1	, .		3	49,272,436
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	-			
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a	 	0	
b	Other (Describe in Part XIV.)	4b	<u> </u>	0	
С	Add lines 4a and 4b			40	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I	I, line	<u> 18.) </u>	5	49,272,436
Com	t XIV Supplemental Information splete this part to provide the descriptions required for Part II, lines 3, 5, 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b part to provide any additional information.				
••••					

Schedule D (For	m 990) 2009	Page 5
Part XIV	Supplemental Information (continued)	
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

and Individuals in the United States Grants and Other Assistance to Organizations, Governments,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No 1545-0047

Open to Public

Employer identification number

ĝ (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards 12 1006395 sub-wards ☑ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance ٧ ¥ Ϋ́ ٨ ۷ ٨ ٨ ∢ Ż ۲ Ϋ́ ΑX ٨ (f) Method of valuation (book, FMV, appraisal, other other other other other other other other other other other other Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance (d) Amount of cash grant 696,276 882,285 1,110,178 1,001,079 850,110 731,465 989,776 689,828 1,033,584 618,659 754,979 1,007,983 Part IV and Schedule I-1 (Form 990) if additional space is needed. Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance 501(c)(6) 501(c)(6) 501(c)(4) 501(c)(6) 501(c)(6) 501(c)(6) 501(c)(6) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(6) 501(c)(6) (P) EIN National Rural Water Association Atlantic States Rural Water & Wa California Rural Water Assoc. Colorado Rural Water Assoc. Pueblo West, CO 81007 Illinois Rural Water Assoc. Alaska Rural Water Assoc. Florida Rural Water Assoc. 1 (a) Name and address of organization Rural Water Assoc. of Arizona Arkansas Rural Water Assoc. Delaware Rural Water Assoc. Alabama Rural Water Assoc. Georgia Rural Water Assoc. Idaho Rural Water Assoc. Montgomery, AL 37117 Sacramento, CA 95834 Tallahassee, FL 32309 Barnesville, GA 30204 or government Taylorville, IL 62568 Norwich, CT 06360 Tucson, AZ 85745 Lonoke, AR 72086 Milford, DE 19963 Wasilla, AK 99654 Boise, ID 83709 Part II

Enter total number of other organizations

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No. 50055P

Schedule I (Form 990) 2009

Schedule I (Form 990) 2009

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(f) Description of non-cash assistance					additional information.						Schedule I (Form 990) 2009
(e) Method of valuation (book, FMV, appraisal, other)					I, line 2, and any other						
(d) Amount of non-cash assistance					tion required in Part						S
(c) Amount of cash grant					provide the informa						
(b) Number of recipients					nplete this part to						
(a) Type of grant or assistance		V			Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.						

SCHEDULE 1-1

Department of the Treasury

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047

Open to Public Inspection

(h) Purpose of grant or assistance Employer identification number sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards sub-awards 1006395 . Part II. Part | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), (g) Description of non-cash assistance A//N ٨ ۲ ٨ ٨ ٨ ۲ ۲ ٧ ٨ ۲ ۲ ٨ ¥ ٤ (f) Method of valuation (book, FMV, appraisal, other) other other other other other other other other other other other other other other other (c) IRC section if (d) Amount of cash grant applicable assistance 587,556 647,364 876,894 883,673 744,980 956,553 733,574 718,212 860,869 894,045 909,514 1,005,777 982,358 651,037 1,015,624 501(c)(6) 501(c)(6) 501(c)(6) 501(c)(6) 501(c)(3) 501(c)(6) 501(c)(6) 501(c)(6) 501(c)(3) 501(c)(6) 501(c)(6) 501(c)(6) 501(c)(3) 501(c)(3) 501(c)(3) (p) EIN National Rural Water Association Montana Rural Water Systems Assoc Alliance of Indiana Rural Water Kansas Rural Water Assoc. Mass Rural Water Assoc. Minnesota Rural Water Assoc. Maryland Rural Water Assoc. Mississippi Rural Water Assoc. Nebraska Rural Water Assoc. (a) Name and address of organization Missouri Rural Water Assoc. Nevada Rural Water Assoc. Louisiana Rural Water Assoc. Kentucky Rural Water Assoc. Michigan Rural Water Assoc. lowa Rural Water Assoc. Bowling Green, KY 42104 Maine Rural Water Assoc. Carson City, NV 89701 Elbow Lake, MN 56531 Great Falls, MT 59405 Northfield, MA 01360 Richmond, ME 04357 Woodbine, MD 21797 Raymond, MS 39154 Ashland, MO 65010 Harrison, MI 48625 Name of the organization Seneca, KS 66538 Franklin, IN 46731 Wahoo, NE 68066 Newton, IA 50208 Kinder, LA 70648

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 51026W

Schedule I-1 (Form 990) 2009

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(a) type of grain of assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book, FMV appraisal other)	(f) Description of non-cash assistance
				(Supplemental)	

SCHEDULE 1-1 (Form 990)

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

2009

OMB No 1545-0047

Open to Public Inspection Employer identification number Department of the Treasury Internal Revenue Service Name of the organization

National Rural Water Association	,				73	1006395
Part Continuation of Grants and Other Assistance		to Governments and Organizations in the	ganizations in the		United States (Schedule I (Form 990),	, Part II.)
(a) Name and address of organization or government	(b) EIN (c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Granite State Rural Water Assoc. Penacook, NH 03303	501(c)(6)	551,996		other	N/A	sub-awards
New Jersey Water Assoc. Waretown, NJ 08758	501(c)(6)	648,754		other	N/A	sub-awards
New Mexico Rural Water Assoc. Albuquerque, NM 87110	501(c)(6)	894,177		other	N/A	sub-awards
New York Rural Water Assoc. Claverack, NY 12513	501(c)(6)	875,268		other	N/A	sub-awards
North Carolina Rural Water Assoc. Welcome, NC 27374	501(c)(6)	901,497		other	N/A	sub-awards
North Dakota Rural Water Systems Bismarck, ND 58503-0585	501(c)(3)	656,801		other	N/A	sub-awards
Ohio Rural Water Assoc. Zanesville, OH 43701	501(c)(6)	868,516		other	N/A	sub-awards
Oklahoma Rural Water Assoc. Oklahoma City, OK 73143	501(c)(6)	069'266		other	N/A	sub-awards
Oregon Assoc. of Water Utilities Silverton, OR 97381	501(c)(6)	881,427		other	N/A	sub-awards
Pennsylvania Rural Water Assoc. Bellefonte, PA 16823	501(c)(6)	887,006		other	N/A	sub-awards
South Carolina Rural Water Assoc. Clinton, SC 29325	501(c)(6)	757,161		other	NIIA	sub-awards
South Dakota Assoc. of Rural Water: Sioux Falls, SD 57106	501(c)(6)	708,236		other	N/A	sub-awards
Tennessee Assoc. of Utility Districts Murfreesboro, TN 37133	501(c)(6)	937,106		other	N/A	sub-awards
Texas Rural Water Assoc. Austin, TX 78701	501(c)(6)	924,929		other	N/A	sub-awards
Rural Water Assoc. of Utah Alpine, UT 84004	501(c)(3)	685,341		other	N/A	sub-awards

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 51026W

Schedule I-1 (Form 990) 2009

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cash grant non-cash assistance	Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.) (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book,	Ssistance to I	ndividuals in the L	United States (Sche	edule I (Form 990), Part (e) Method of valuation (book,	III.) (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
		ļ				

SCHEDULE I-1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

OMB No 1545-0047 2009

Open to Public Inspection

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Continuation Sheet for Schedule I (Form 990)

Employer identification number 1006395

73

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ints and Other	ssistance to	o Governments and Or	ganizations in the	ments and Organizations in the United States (Schedule I (Form 990),	dule I (Form 990), Part II.)	, Part II.)
NE (4)	I Outroe DE	(a) Amount of cash grant	(a) Amount of non-cash (f) Method	(f) Method of valuation	(a) Description of	(h) Purnose

National Rural Water Association						73	1006395
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I	s and Other A	ssistance to Go	vernments and Or	ganizations in the	United States (Sci	nedule I (Form 990)	, Part II.)
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Vermont Rural Water Assoc. Essex Junction, VT 05452		501(c)(6)	727,033		other	N/A	sub-awards
Virginia Rural Water Assoc. Buena Vista, VA 24416		501(c)(3)	809,285		other	N/A	sub-awards
Evergreen Rural Water of Washington Shelton, WA 98584		501(c)(6)	944,712		other	N/A	sub-awards
West Virginia Rural Water Assoc. Scott Depot, WV 25560		501(c)(6)	944,866		other	N/A	sub-awards
Wisconsin Rural Water Assoc. Plover, WI 54467		501(c)(3)	873,653		other	N/A	sub-awards
Wyoming Assoc. of Rural Water Syst Glenrock, WY 82637		501(c)(6)	642,175		other	N/A	sub-awards
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 51026W

Schedule I-1 (Form 990) 2009

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Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)	Assistance to I	ndividuals in the U	nited States (Sche	dule I (Form 990), Part	III.)
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
				2000	
			:		
			i		Schedule I-1 (Form 990) 2009

SCHEDULE J (Form 990)

Department of the Treasury

National Rural Water Association

Internal Revenue Service Name of the organization

Compensation Information

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

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

1006395

Employer identification number

73

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant 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 Health or social club dues or initiation fees ☐ Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) ☐ Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☐ Written employment contract ☑ Compensation committee ☑ Compensation survey or study Independent compensation consultant ☐ Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization. 4a a Receive a severance payment or change-of-control payment?..... 4b **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c c Participate in, or receive payment from, an equity-based compensation arrangement?. . . If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a a The organization?..... 5b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization?........... If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII. Part II

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

	r		1000 t 20/Page 0 141	doubondon Of				
		(b) Breakdown o	νI	oc compensation	(C) Retirement and	(D) Nontaxable benefits	(E) lotal of columns (B)(I)+(D)	(F) Compensation reported in prior
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			Form 990 or Form 990-EZ
Robert K. Johnson	€	245,014	108	0	0	25,840	270,962	0
open wes	E E	174,597	108	0	0	25,769	200,474	0
		150 086	108		O	23.225	181.419	0
Claudette E. Atwood (i	e e	000,000					,	
Michael Keegan	€ €	158,572	108	0	100,469	19,774	278,923	0
Bill Simpson	€ €	314,856	108	0	0	19,913	334,877	0
Walter Smith	<u> </u>	318,011	108	0	0	19,568	337,687	0
	<u> </u>	120 022			C	14.752	143.682	0
Ed Thomas	€€	770,071	000	•				
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SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

20**09**

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

Name of the Organization

National Rural Water Association

Employer identification number

73 1006395

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Employees				_		-	-	_	-	
(A)	(B)	ļ		((C)			(D)	(E)	(F)
Name and title	Average hours	Posit	ion (d	checl	k all	that ap	ply)	Reportable	Reportable	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Paul Whittemore	_	<u>. </u>								
Director	0	✓	İ					0	0	0
James Mackey										
Director	0	✓					ļ	0	0	0
Jim Dunlap										
Director	0	↓	<u> </u>					0	0	0
John O'Connell										
Director	0	✓	L	L				0_	0	0
John Bearman										
Director	0	✓						0	Q	0
Ralph Chavalier									-	
Director	0	✓						0	0	0
Phillip Klutts										
Director	0	✓						0	0	0
Russell Cooper	,									
Director] o	 ✓						0	0	0
Sam Scarfone										
Director	0	✓						0	0	0
Larry Wasland										
Director] o	 						0	0	0
Kent Watson				1						
Director	00	✓	l					0	0	0
Larry McElroy										
Director	0	1						0	0	0
Paul Fulgham										
Director] o	✓						0	0	.0
Ed Savage				Π						
Director	0	✓						0	0	o_
Danny Buchanan										
Director	0	✓_	<u></u>			<u> </u>		0	0	0_
Bob Anderson										
Director	0	✓						0	0	.0
Earl McKinney										
Director] o	✓	1		ŀ	ŀ		0	0	0
Robert K. Johnson										
CEO	53.74			√	1	1		245,122	0	0
G. Sam Wade							Γ			
Deputy CEO	49.08			√	√	✓		174,705	0	
Claudette E. Atwood										
CFO	53.02		\perp	✓	1	1	L	158,194	0	0
Michael Keegan										
Regulatory Analyst	49.63		L	L	L	✓	L	158,680	<u> </u>	0_
For Privacy Act and Paperwork Reduction Act	Notice, see the	Instru	ıctio	ns f	or F	orm 9	990.	Cat No 499	15E Schedule	J-2 (Form 990) 2009

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ▶ See the Instructions for Form 990.

Open to Public Inspection

Name of the Organization Employer identification number **National Rural Water Association** 1006395 73 Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per week	Posit	_		_	that ap		Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Bill Simpson				\vdash		-				
Legislative Analyst	44.13					1		314,964	0	(
Walter Smith										_
Legislative Analyst	46.84					1		318,119	0	(
Ed Thomas										
Environmental Engineer	42.12	-			-	✓_	_	128,930	0	
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Attach to Form 990.

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OMB No 1545-0047

See separate instructions. **A**

Employer identification number Open to Public Inspection

(f)
Direct controlling entity (f) Direct controlling 1006395 entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it ٧ 509(a)(1) N/A F Public charity status (if section 501(c)(3)) (e) End-of-year assets 73 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section 501(c)(3) 501(c)(3) (d) Total income (c)
Legal domicile (state
or foreign country) Legal domicile (state or foreign country) ত্ত To improve water qual OK To provide scholarshil OK (b) Primary activity Primary activity had one or more related tax-exempt organizations during the tax year.) (a)Name, address, and EIN of disregarded entity International Rural Water Association Joe & Jean Palmer Endowment Fund 2915 S. 13th St., Duncan, OK 73533 2915 S. 13th St., Duncan, OK 73533 National Rural Water Association Part I Part II

Schedule R (Form 990) 2009

Schedule R (Form 990) 2009

Part III Identification because it had	Identification of Related Organizations Taxable as a Partnership (Complete if the organizat because it had one or more related organizations treated as a partnership during the tax year.)	ınization : ated orga	s Taxable as a l nizations treatec	Partnership (Cor I as a partnership	nplete if the c o during the ta	rganizatior ax year.)	ı answered "Ye	s" to For	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)	34
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile	(d) Direct controlling entity	(e) Predominant income (related,	(f) Share of total income		(g) Share of end-of-year assets	(h) Disproportionate aflocations?	(i) ate Code V—UBI amount in box 20 of Schedule K-1	(j) General or managing
		foreign country)		excluded from tax under sections 512-514)				Xes	(Form 1065)	
Part IV Identification Ine 34 becaus	identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization ar line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	inizations	Taxable as a (Corporation or 1 treated as a cor	Frust (Comple	te if the or	ganization answ he tax year.)	rered "Y	identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	art IV,
(a) Name, address, and EIN of related organization) of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	income	(g) Share of end-of-year assets	(h) Percentage ownership
	-							_		_
		1			-					
									Schedule R (Form 990) 2009	n 990) 2009

d "Yes" to Form 990, Part IV, line 34, 35, or 36.)	
zations (Complete if the organization answered	
Transactions With Related Organiz	
Part V	

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes No	اه
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	in Parts II–IV?		
Docemb of (ii) appointing (iii) royalties or (iv) rept		1a /	
A recorded by mixtures (ii) aminutes (iii) by the contraction (iv) common common common contraction to other organization (s)	•	1b <	
		10	
		1d	L
		40	
e Loans or loan guarantees by other organization(s)			
			Į,
f Sale of assets to other organization(s)		>	
	•	19 /	
y decigate of assets	•	- 4F	
Lease of lacinities, equipment, of other assets to other organization(s)			
: I among the formulation of the state from other proprietion(e)		1i	L
		*	L
K Performance of services or membership or fundraising solicitations by other organization(s)		=	L
Performance of services of method ship of further assets.		- 1m	1
III Oriannig Oriacinnes, equipment, maining note, or only assets	. ,	† >	
n sharing of paid employees			
		10	L
		1	
p Reimbursement paid by other organization for expenses			
		7	
q Other transfer of cash or property to other organization(s)			
ᆡ		. 1r .	<u>،</u> ل
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction unlessiones.	relationships and trans	saction thresholds	2
(а) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	I
International Rural Water Association (1)	p	93,500	8
International Rural Water Association (2)	ε		0
International Rural Water Association (3)		3,000	8
Joe & Jean Palmer Endowment Fund (4)	ε		0
Joe & Jean Palmer Endowment Fund (5)		1,000	gl
(9)			
	Schedu	Schedule R (Form 990) 2009	600

Part VI Unrelat

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Are all partners section	(e) Share of end-of-year	(f) Disproportionate allocations?	(g) Code V—UBI amount in box 20	Gene mana	(h) General or managing
			organizations?			(Form 1065)	Dad.	
			Yes No		Yes No		Yes	Š
							_	
						Schedule R (Form 990) 2009	066 m	2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

National Rural Water Association	73	1006395		
Part VI Section A				
6. Our voting members are the state affiliates and they are also the sub-awardees to our grants.				
7a. Each state affiliate is a voting members and has one seat on the board of directors of National Rural Water Association.				
That one member is elected from the state affiliate and nominated to the board. The membership then votes on the				
nominees at the annual business meeting held each fall.				
7b. The membership is required by the By-Laws of National Rural Water Association to approve all By-Law changes that				
come before the governing board.				
9b. Each affiliate is a member of National Rural Water Association, but is its own separate entity and governed by its own				
members. National Rural Water Association has agreements with these members to help	carryo	ut the requirements of		
its grants. These agreements state how the program is to be handled and funded.				
10. The organization employs CPAs to manage the accounting functions. These records	are auc	lited each year by		
independent auditors who also review the 990 and then report to the governing body. If a	iny mer	mber wishes to examine		
the 990, they are provided a copy.				
·		r		
Part VI Section B				
12c. The policy is for board members and is posted on the board's private website and lo	oked a	fter by the Program		
Review Committee that oversees such policies of the entire organization.				
Part VI Section C				
19. The governing board's documents, conflict of interest policy and financial statements	are ma	ade available on the		
board's private website, upon request and at each board meeting.				

Schedule O (Form 990) 2009		Page 2
Name of the organization		Employer identification number
National Rural Water Association		73 1006395
Part VIII		
1e. Government Grants		
Training & Technical Assistance	\$ 9,141,362	
Circuit Rider	20,780,050	
•••		
Wastewater	9,602,264	
Ones a Water	4 444 700	
Source Water	4,411,708	
Davidsian Laga	4.500	
Revolving Loan	1,500	-
TOTAL	\$43,936,884	
TOTAL	\$45,950,864	
		
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