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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

2010

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

_	_		7/04	6 (3.3	2011
<u>A</u>	For the 2	010 calen	dar year, or tax year beginning 7/01 , 2010, and ending	6/30	, 2011
В	Check if app	olicable	,	D Employ	er Identification Number
	X Addres	s change	Idaho Rural Water Association, Inc	82-0	0416513
	\vdash	change	6065 West Corporal Lane	E Telepho	ne number
	Initial r	•	Boise, ID 83704	1201	8) 343-7001
	H			(200	0, 343 /001
	Termin			_	1 100 550
	\vdash	led return	<u> </u>	G Gross re	
	Applica	ation pending	1	(a) Is this a group return	
			Same As C Above	(b) Are all affiliates incl If 'No,' attach a list	1 1.03 1 1.00
1	Tax-exen	npt status	X 501(c)(3) 501(c) () (Insert no) 4947(a)(1) or 527		(das manacio)
J	Websit	e: ► ww	w.idahoruralwater.com	(c) Group exemption nu	ımber ►
ĸ	Form of c	organization	X Corporation Trust Association Other ► L Year of Formation	1987 Ms	State of legal domicile ID
		Summa			Tale of Togal Rolling
		ofly doscri	be the organization's mission or most significant activities To provid	o toghnigal	assistance
			<u>and a strong representative voice for the bene</u>		
Activities & Governance		-	TTT OT TOOI	io 2 Maret and	
nar	غ.W_	scewat	er_systems		
e					
Ĝ		eck this bo		e than 25% of its	
			oting members of the governing body (Part VI, line 1a) Idependent voting members of the governing body (Part VI, line 1b)		3 7
es			r of individuals employed in calendar year 2010 (Part V, line 2a)		5 13
<u> </u>			r of volunteers (estimate if necessary)		6 1
Ą			ed business revenue from Part VIII, column (C), line 12		7a 0.
			d business taxable income from Form 990-T, line 34		7b 0.
_	DIVE	unielatet	d business taxable income from Form 990-1, line 34	Dula - Vaa-	
	0 0-		and ments (Ded VIII. line 1b)	Prior Year	Current Year
<u>a</u>			and grants (Part VIII, line 1h)	1,146,1	.25. 1,035,557.
Revenue			vice revenue (Part VIII) III P. C.	10.7	106
ě			ncome (Part VIII, column A), jines (7, 4; and 7d)	19,2	
ш			ie (Part VIII, column (A), fines 5, 6d, 8c, 9c, 10g, and 11e)	64,7	
	12 To	tai revenue	e – add lines 8 tRough 11 (must equal Part Mil column (A), line 12)	1,230,1	1,123,556.
			imilar amounts raid (Part IX, column (A), lines 1-3)		
	1	•	to or for members (Part IX, column (A), line 4.		
_	15 Sa	laries, oth	er compensation, emptives benefits (PartIIX, column (A), lines 5-10)	592,9	578,046.
Se	16a Pro	ofessional	fundraising fees (Part IX, column (A), line rie)		
Expenses	b To	tal fundrai	sing expenses (Part IX, column (D), line 25) ▶		
ΔĬ	17 Ott		ses (Part IX, column (A), lines 11a-11d, 11f-24f).	480,8	363. 497,103.
	1				· - · · · · · · · · · · · · · · · · · ·
	1	•	es Add lines 13-17 (must equal Part IX, column (A), line 25)	1,073,8	
		venue less	s expenses Subtract line 18 from line 12	156,2	
2 9				Beginning of Curren	
\$ <u>a</u>	20 To		(Part X, line 16)	306,2	
Net Assets or Fund Balances	21 Tot	tal liabilitie	es (Part X, line 26)	116,0	152. 81,884.
žį	22 Ne	t assets o	r fund balances Subtract line 21 from line 20	190,2	208. 238,615.
Re	art II	Signatu	re Block		
Unc	der penalties	of perjury, I c	declare that I have examined this return, including accompanying schedules and statements, and to the larer (other than officer) is based on all information of which preparer has any knowledge	e best of my knowledge	and belief it is true, correct, and
	-	ration of prep	arer (other than officer) is based on all information of which preparer has any knowledge		
7	-	_ m	uctail Haight	1-25	-12
Sig	an	Signati	ure of officer	Date	
He	re	Mik	e Haight	President	
Ē	Ĩ.		r print name and title		
	3	Print/Type i	preparer's name Preparer's signature Date	Check	ıf PTIN
Pa	1 3 1 6 1'	Jared	J Zwygart, CPA Jared JZwygart, CPA 1/17/	self-employe	- pagarages
	eparer	Firm's name		sen-employe	1200032037
	é Only	1			► 92-046E22D
∵ 3	ر""کی	Firm's addr			<u>▶ 82-0465339</u>
	127	<u> </u>	Nampa, ID 83651	Phone no	(208) 466-2493
		•	nis return with the preparer shown above? (see instructions)		X Yes No
BA	A For Pa	perwork F	Reduction Act Notice, see the separate instructions. TEEA	0113L 12/21/10	Form 990 (2010)

	990 (2010) Idaho Rural Water Association, Inc	82-04	11021	<u>. 3</u>	1	Pag
ar	t III Statement of Program Service Accomplishments					
_	Check if Schedule O contains a response to any question in this Part III					
l	,	a+4a .	****		- + h	_
	To provide technical assistance, training and a strong represent	acive_	VOT GE	10	<u> </u>	<u>e</u>
	benefit of Idaho's water and wastewater systems.				- - -	_
						_
	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	ı
	If 'Yes,' describe these new services on Schedule O		ш		لت	
3		ervices?		Yes	X	
	If 'Yes,' describe these changes on Schedule O		ட		ت	
ļ	Describe the exempt purpose achievements for each of the organization's three largest program services.	as hu avna	ncac (Section	n 501	(c)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a expenses, and revenue, if any, for each program service reported	nd allocati	ons to	others	, the	to
а	(Code (Expenses \$ 335,241. including grants of \$) (Revenue	\$	31	6,8	5 8
	Circuit Rider - assist water systems under 10,000 people to become	me vial	ole a	and 1	to	
	obtain compliance with the safe drinking water act: approx. 1,26	0 serve	ed			_
						_
		-				_
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						_
t		Revenue			1,5	
lt	(Code)(Expenses \$ 211,711. Including grants of \$)(Sourcewater - provide assistance to rural and small communities implementation of source water protection plans in an effort to the potential risks to drinking water supplies.	in the	form	nati	on a	ın
lt	Sourcewater - provide assistance to rural and small communities implementation of source water protection plans in an effort to	in the	form	nati	on a	ın
E	Sourcewater - provide assistance to rural and small communities implementation of source water protection plans in an effort to	in the	form	nati	on a	ın
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lo	Sourcewater - provide assistance to rural and small communities implementation of source water protection plans in an effort to the potential risks to drinking water supplies. (Code (Code (Expenses \$ 206,691. Including grants of \$) (Wastewater - provide technical assistance to rural development for the potential communities implementation of source water protection plans in an effort to the potential risks to drinking water supplies.	in the reduce	form	national designation of the second se	on a inat	33

Page 3 Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A Is the organization required to complete Schedule B. Schedule of Contributors? (see instructions) 2 Х 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 3 Х **Section 501(c)(3) organizations** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II* 4 X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III 5 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 Х 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х 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 X Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? I Х 'Yes,' complete Schedule D, Part V 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI 11 a Х b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part VII 11 b Х c 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 Х 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX 11 d Х Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes.' complete Schedule D. Part X 11 f Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х Schedule D, Parts XI, XII, and XIII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI. XII, and XIII is optional 12b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **b** 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, Parts I and IV* 14b Х 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, Parts II and IV 15 X 15 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, Parts III and IV 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) 17 Χ 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 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 Х 19 Х 20 a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H 20

b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990

filers that operate one or more hospitals must attach audited financial statements (see instructions)

20 b

			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 If '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? <i>If 'Yes,' complete Schedule J</i>	23		Х
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, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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
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		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? If '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 committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see 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		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		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)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No			
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 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990	(2010)

Form 990 (2010) Idaho Rural Water Association, Inc

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

	Check if Schedule O contains a response to any question in this Part V				
				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 4			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 2		i	
_	Did the organization comply with backup withholding rules for reportable payments to vendor	s and reportable gaming			
•	(gambling) winnings to prize winners?	s and reportable garring	1 c	Х	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-				
	ments, filed for the calendar year ending with or within the year covered by this return	2a 13			
b	If at least one is reported on line 2a, did the organization file all required federal employment		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in	, , , , , , , , , , , , , , , , , , ,			
	Did the organization have unrelated business gross income of \$1,000 or more during the year	ar?	3a		<u>X</u>
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature	or other authority over, a			v
	financial account in a foreign country (such as a bank account, securities account, or other f	inanciai account)?	4a		X
C	If 'Yes,' enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and F				
.					v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tate Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt	•	5a 5b		X
	If 'Yes,' to line 5a or 5b, did the organization tild Form 8886-T?	er transaction?	5c		
	· · · · · · · · · · · · · · · · · · ·		50		
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	6a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such c not tax deductible?	ontributions or gifts were	C۲		
7	Organizations that may receive deductible contributions under section 170(c).		6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and p	partly for goods and			
a	services provided to the payor?	darity for goods and	7a		_X_
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	1	7 b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for w Form 8282?	hich it was required to file	7.		v
_		7 d	7с		_ <u>X</u> _
	If 'Yes,' indicate the number of Forms 8282 filed during the year. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		٦.		v
	Did the organization receive any lunus, directly or indirectly, to pay premiums on a personal ber		7e 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization	1			
Ç	as required?	on the Form 6033	7 g		
ŀ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form $1098\text{-}\mathrm{C}^7$	organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ng organizations. Did the lave excess business	8		
9	Sponsoring organizations maintaining donor advised funds.				
	Did the organization make any taxable distributions under section 4966?		9a		
t	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	ĺ		
t	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders	11 a	1		
t	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	116			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		12 a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	L	ĺ		
	Is the organization licensed to issue qualified health plans in more than one state?	,	13a		
	Note. See the instructions for additional information the organization must report on Schedu	le O			
b	•				
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand	13c			<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		_X_
Ŀ	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O	14b		<u> </u>

Form 990 (2010) Idaho Rural Water Association; Inc. 82-0416513 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a 1a Enter the number of voting members of the governing body at the end of the tax year b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? 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 Х 4 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Does the organization have members or stockholders? See Schedule O 6 X 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? See Schedule O Х 7 a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Х Х b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O See Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10 a Х 10a Does the organization have local chapters, branches, or affiliates? **b** If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Х 11 a 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Х b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c 13 Х 13 Does the organization have a written whistleblower policy? Х Does the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official 15 a Х Х See Schedule O 15 b **b** Other officers of key employees of the organization 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? 16 a Х 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 16_b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► None 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 Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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Shelley Roberts 6065 West Corporal Lane Boise ID 83704 (208) 343-7001

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Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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

X Check this box if neither the organizatio	n nor any	relate	d or	gan	ızat	ion co	mpe	ensated any current o	fficer, director, or trus	tee
(A)	(B)			(((D)	(E)	(F)
Name and title	Average hours		tion (all t	hat appl		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week (describe hours for related organiza- tions in Schedule O)	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
(1) Mike Haight										
President	3	X		Х				0.	0.	0.
(2) Rob Wright										
Vice President	1	X		Χ				0.	0.	0.
(3) Robert Dial]									
Sec/Treasurer	3	X		X				0.	0.	0.
(4) Bob Culver]									
Nat'l Director	3	X		Х				0.	0.	0.
(5) Butch Anderson										
Director	3	Х	L.,			<u> </u>		0.	0.	0.
(6) Bruce Evans										
Director	1	Х	_					0.	0.	0.
(7) Mike Dimmick									_	
Director	1	Х					<u> </u>	0.	0.	0.
_(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)						_				
(16)										
(17)										
										E 000 (0010)

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Part VII Section A. Officers, Directors, Trust		ey	Em			es,	and			loyee		11)
(A)	(B)			()	-	L-4		(D)	(E)		(F)	
Name and title	Average hours				k all t	natap Io ∓l	pply)	Reportable compensation from	Reportable compensation from	amo	stimated unt of otl	her
	(describe	uqivi	nstiti	Officer	(ey e	ighe	orm	the organization (W-2/1099-MISC)	related organizations (W 2/1099 MISC)	f	npensation rom the	
	related	dual ector	tion	4	Key employee	st co	er,			aì	janizatio nd relate	d
	per week (describe hours for related organi- zations in Sch O)	trust	Institutional trustee		yee	mpe				org	anızatıor	ıs
	Sch O)	ee	stee			Highest compensated employee						
			i			ă						
(18)												
(19)												
(20)												
<u>(21)</u>												
_(22)				-								
(23)					\vdash							 ,
(24)												
(25)												
(26)		_			-							
(27)												
(28)												
(29)												
1 b Sub-total	<u>.i</u>	1		.	<u> </u>	l		0.	0.			0.
c Total from continuation sheets to Part VII, Section	Α						•	0.	0.			0.
d Total (add lines 1b and 1c)							•	0.	0.			0.
2 Total number of individuals (including but not limite from the organization ► 0	d to tho	se li	ste	d ab	ove) wh	o re	ceived more than	\$100,000 in report	able co	mpens	ation
										,	Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such i	or trust ndividua	tee, al	key	emį	ploy	ee,	or h	ighest compensat	ed employee	3		х
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater to such individual	portable han \$15	e coi 50,00	mpe 00?	ensa If 'Y	tion 'es'	and com	d oth oplet	ner compensation te Schedule J for	from	4		Х
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compens	satio	n fr	om i	any	unre	elate	ed organization or	ındıvıdual	5		X
Section B. Independent Contractors	complet	 		iuie	5 /C	. 30	cri p	1013011	·····		ч——	<u>^</u> _
Complete this table for your five highest compensa- compensation from the organization	ted inde	pen	den	t cor	ntra	ctors	s tha	at received more t	han \$100,000 of			
(A) Name and business addres	is							Description) of services	Comp	(C) ensatio	n
Traine and besiness dealers		•						2000.1511011	J, 30111003	-		
2 Total number of independent contractors (including	hut not	limi	ited	to th	hos	s het	had '	ahove) who recom	ed more than			
\$100,000 in compensation from the organization	0								ed more than		-	
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Par	t VIII Statement of Revenue					
,	· · · · · · · · · · · · · · · · · · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>"</u>	1a Federated campaigns 1a					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues 1b	118,008.				
뚫히		110,000.				•
A S.C	c Fundraising events 1c		:			•
뜯뛰	d Related organizations 1d	868,942.				<u> </u>
S. \	e Government grants (contributions) 1e					
S 2	4 All other centributions gifts grants and					
늘밀	f All other contributions, gifts, grants, and similar amounts not included above	48,607.				
<u>F</u> 5	g Noncash contributions included in lns 1a-1f \$	1070071				
S M	- · -	-	1 025 557	•		
-	h Total. Add lines 1a-1f		1,035,557.			
₩	<u> </u>	Business Code				
<u> </u>	2a		<u> </u>			
~	b					
35	c					
E	d					
S			 			
PROGRAM SERVICE REVENUE	f All other program service revenue					
စ္ကို	· · ·		· · · · · · · · · · · · · · · · · · ·			
-	g Total. Add lines 2a-2f					
	3 Investment income (including dividends	, interest and	106			106
	other similar amounts)		106.			106.
	4 Income from investment of tax-exempt	bond proceeds				
	5 Royalties	>				
	(i) Real	(II) Personal	i			
	6a Gross Rents					
-	b Less rental expenses					1
	c Rental income or (loss)	1				
	d Net rental income or (loss)			'		
					<u> </u>	<u> </u>
	7a Gross amount from sales of (i) Securities	(II) Other				
	assets other than inventory	<u> </u>				
	b Less cost or other basis					
	and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)	>				
	, ,					
ᆲ	8a Gross income from fundraising events (not including \$					
Ę,	of contributions reported on line 1c)		*	•		
OTHER REVEN	·			,	•	
8	See Part IV, line 18	···		•.		
Ӗ	b Less direct expenses	·		ĺ .		
١	c Net income or (loss) from fundraising e	vents 🟲		. 1		
	9a Gross income from gaming activities		,			
	9a Gross income from gaming activities See Part IV, line 19		, .			
	b Less direct expenses					
	c Net income or (loss) from gaming activi	ities ►				
	, ,					† · · · · · · · · · · · · · · · · · · ·
	10 a Gross sales of inventory, less returns and allowances a					
	b Less cost of goods sold	'لِـــــا				
	c Net income or (loss) from sales of invei				ļ	
	Miscellaneous Revenue	Business Code	<u>-</u>			_
	11a Conference/Seminars		87,617.			87,617.
	b Miscellaneous		276.			276.
1	c					
	d All other revenue		-			
	e Total. Add lines 11a-11d.	▶	87,893.			
	12 Total revenue. See instructions	•	1,123,556.	0.	0.	87,999.
	Take revenue. Occ matractions		<u> </u>	<u> </u>	<u> </u>	1 01,333.

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Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	All other organizations must compr	1	(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
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	Benefits paid to or for members			·	
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
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.	0.	0.	0.
7	Other salaries and wages	578,046.	548,373.	29,673.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				·
10	Payroll taxes			· · · · · · · · · · · · · · · · · · ·	
11	Fees for services (non-employees)				
ä	Management				
ŧ	Legal			5 000	
•	: Accounting	25,965.	20,628.	5,337.	
	I Lobbying				
•	Professional fundraising services See Part IV, line 17				
1	Investment management fees				
	g Other			520	
12	Advertising and promotion	1,151.	613.	538.	
13	Office expenses	31,756.	29,808.	1,948.	
14	Information technology				
15	Royalties	10.706	16.000	2 006	
16	Occupancy	19,796.	16,800.	2,996.	
17	Travel	179,943.	171,997.	7,946.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	37,657.		37,657.	
20	Interest	309.		309.	
	Payments to affiliates		0.150	1.0	
_	Depreciation, depletion, and amortization	2,197.	2,178.	19.	
23 24	;	10,661.	9,048.	1,613.	
:	Field Supplies	49,176.	49,044.	132.	
	b Utilities	22,280.	21,030.	1,250.	
	Training and Materials	22,097.	11,559.	10,538.	
	d Scholarship	18,068.		18,068.	<u> </u>
	Postage and Shipping	15,066.	12,744.	2,322.	
	f All other expenses	60,981.	18,679.	42,302.	
	Total functional expenses Add lines 1 through 24f	1,075,149.	912,501.	162,648.	0.
26					
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	90 (2010) Idaho Rural Water Association, Inc	82-0	041651	.3 Page
rt)	(Balance Sheet		r	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	86,712.	1	164,992
2		6,680.	2	6,11
3		185,992.	3	117,46
4		3,211.	4	10,17
_		· · · · · · · · · · · · · · · · · · ·		
5	and highest compensated employees Complete Part II of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
7 ا	Notes and loans receivable, net		7	
8		2,935.	8	2,26
9	Prepaid expenses and deferred charges	12,732.	9	13,49
10	a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 50,762.			
	b Less accumulated depreciation 10b 46, 286.	6,673.	10 c	4,47
11			11	
12			12	
13			13	
14			14	
15		1,325.	15	1,51
16		306,260.	16	320,49
17		36,038.	17	26,48
18			18	
19		10,827.	19	18,28
20			20	
21			21	
ı	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II	- 4.	-	
	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	29,637.	23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D	39,550.	25	37,11
26	Total liabilities. Add lines 17 through 25	116,052.	26	81,88
	Organizations that follow SFAS 117, check here ► X and complete lines			
	27 through 29 and lines 33 and 34.			
27	7 Unrestricted net assets	183,531.	27	232,49
28	3 Temporarily restricted net assets	6,677.	28	6,11
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ▶ and complete			_
25 25 25 30 31 33 33	lines 30 through 34.	10 10 10 10 10		
30	Capital stock or trust principal, or current funds		30	
3	Paid-in or capital surplus, or land, building, or equipment fund		31	
3	Retained earnings, endowment, accumulated income, or other funds		32	
3:	Total net assets or fund balances	190,208.	33	238,61
1 -	Total liabilities and net assets/fund balances	306,260.	34	320,49

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Form 990 (2010) Idaho Rural Water Association, Inc. 8	2-0416513		Pa	ge 12		
Part XI Reconciliation of Net Assets						
Check if Schedule O contains a response to any question in this Part XI						
	1 1					
1 Total revenue (must equal Part VIII, column (A), line 12)	1	$\frac{1,12}{1,07}$				
2 Total expenses (must equal Part IX, column (A), line 25)						
3 Revenue less expenses Subtract line 2 from line 1						
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19	90,2			
5 Other changes in net assets or fund balances (explain in Schedule O).	5			0.		
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6						
Part XII Financial Statements and Reporting						
Check if Schedule O contains a response to any question in this Part XII						
			Yes	No		
1 Accounting method used to prepare the Form 990						
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		X		
b Were the organization's financial statements audited by an independent accountant?		2b	Х			
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2 c		Х		
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 separate basis, consolidated basis, or both.	issued on a					
X 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 Audit Act and OMB Circular A-133?	the Single	За	Х			
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	required audit	3 b	Х			
BAA		Form	990 (2010)		

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.

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

2010

Open to Public

Name of the organization

(D)

(E)

Total

Department of the Treasury Internal Revenue Service

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

82-0416513 Idaho Rural Water Association, Inc Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(bX1XAXvi). (Complete Part II) 7 X A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross 9 investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) 11 g (ii) A family member of a person described in (i) above? A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s) h (III) Type of organization (described on lines 1.9 above or IRC section (see instructions)) (iv) is the organization in column (i) listed in (i) Name of supported organization (ii) EIN (v) Did you notify (vi) is the (VII) Amount of support e organization in column (i) of your support? organization in column (i) organized in the your governing document? No Yes No Yes Yes No (A) (B) (C)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Page 2

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

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

Sec	tion A. Public Support					_ · · · - ·				
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010		(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants')	893,218.	873,542.	978,595.	1,146,125.	1,035,55	57.	4,927,037.		
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf							0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0.		
4	Total. Add lines 1 through 3	893,218.	873,542.	978,595.	1,146,125.	1,035,55	57.	4,927,037.		
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)			٠.				0.		
6	Public support. Subtract line 5 from line 4							4,927,037.		
Sec	tion B. Total Support				T		 r			
	ndar year (or fiscal year nning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010		(f) Total		
7	Amounts from line 4	893,218.	873,542.	978,595.	1,146,125.	1,035,55	57.	4,927,037.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							0.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on							0.		
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) See Part IV	101,339.	113,728.	97,350.	64,764.	87,89	93.	465,074.		
11	Total support. Add lines 7 through 10							5,392,111.		
12	Gross receipts from related activ	rities, etc (see ins	tructions)			Ĺ	12	0.		
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 50	11(c)(3	3)		
Sec	tion C. Computation of Pu						т			
14	Public support percentage for 20	•	•	e 11, column (f))	-	14	91.4%		
15	Public support percentage from	2009 Schedule A,	Part II, line 14			L	15	91.3%		
	a 33-1/3% support test — 2010. If and stop here. The organization									
ŀ	33-1/3% support test – 2009. If and stop here. The organization	the organization d qualifies as a pub	lid not check a bo blicly supported or	x on line 13 or 1 ganization	6a, and line 15 is	33-1/3% or n	nore,	check this box		
17 8	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this	s box and stop he	re. Explain in	ı Part	IV how		
	b 10%-facts-and-circumstances test — 2009. 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 stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.									
18	Private foundation. If the organi	zation did not che	ck a box on line 1	13, 16a, 16b, 17a	a, or 17b, check th	nis box and se	ee ins	structions -		

Page 3

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support									
Calen	dar year (or fiscal yr beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants ')	(4) 2330	(4)	(0) 2000	(4) 2003		· · · · · · · ·			
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose									
3	Gross receipts from activities that are not an unrelated trade or business under section 513									
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				:					
5	The value of services or facilities furnished by a governmental unit to the organization without charge									
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons									
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year									
c	Add lines 7a and 7b									
8	Public support (Subtract line 7c from line 6)									
<u>Sec</u>	tion B. Total Support	,								
Calen	dar year (or fiscal yr beginning in)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			, ,						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is									
12	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)									
	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, secor	nd, third, fourth, o	or fifth tax year as	a section 501(c)(3) ▶□			
	tion C. Computation of Pul									
	Public support percentage for 20			ne 13, column (f))	15	90			
	Public support percentage from 2	*	• • • • • • • • • • • • • • • • • • • •		,	16	%			
	tion D. Computation of Inv					1, <u>; ; </u>				
17	····				ımn (f))	17	%			
18	Investment income percentage fr	rom 2009 Schedu	ile A, Part III, line	17		18	%			
	la 33-1/3% support tests — 2010. 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 and stop here. The organization qualifies as a publicly supported organization									
b	33-1/3% support tests - 2009. If line 18 is not more than 33-1/3%	the organization, check this box	did not check a b and stop here. Th	ox on line 14 or e organization qu	line 19a, and line Jalifies as a public	16 is more than 33 ly supported organ	-1/3%, and ization ►			
	Private foundation. If the organi.						▶			

Schedule A	(Form 990 or	990-EZ) 2010	Idaho	Rural Wate	er Associa	tion, Inc	82-0416513	Page 4
Part IV	Supplemer Part II, line	ntal Informa 17a or 17b	ation. Com o; and Part	plete this pa III, line 12.	rt to provide Also comple	the explanatio te this part for	ns required by Part II, lir any additional information	ne 10, on.
	(See instru	ctions).		<u> </u>				
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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

► Complete if the organization is described below.

OMB No 1545-0047 2010

Open to Public Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

• 8	Section 501(c)(4), (5), or (6) or	ganizations Complete Part III			
Name	of organization			Employer identifica	tion number
Ida	ho Rural Water Ass	ociation, Inc		82-041651	
		ganization is exempt under section			ation.
1	Provide a description of the o	organization's direct and indirect political c	ampaign activities in		
2	Political expenditures			► \$	
	Volunteer hours			···	
Par	t I-B Complete if the or	ganization is exempt under section	on 501(c)(3).		
	,	ise tax incurred by the organization under		► \$	0.
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	► \$	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				∐Yes ∐No
	If 'Yes,' describe in Part IV				
		ganization is exempt under section			
1	Enter the amount directly exp	pended by the filing organization for section	n 527 exempt functio	n activities > \$	
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ►\$	
3	Total exempt function expendine 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	► \$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	organization made nayments	and employer identification number (EIN) For each organization listed, enter the arons received that were promptly and direct Laction committee (PAC) If additional spa	nount paid from the f	iling organization's fund	ds Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none enter 0
(1)					
(2)					
(3)					
(4)					
(5)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

(6)

Schedule C (Form 990 or 990-EZ) 2010

chedule C (Form 990 or 990-EZ) 2010	Idaho Rural W	ater Associatio	on, Inc	82-041	
Part II-A Complete if t section 501(he organization is	s exempt under sec	ction 501(c)(3) and	filed Form 5768 (el	ection under
A Check ► If the filin	g organization belong:	s to an affiliated group			
B Check ► If the filin	g organization checke	d box A and 'limited coi	ntrol' provisions apply		
(The term '	Limits on Lobbying expenditures' means	Expenditures amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditu	ires to influence public	opinion (grass roots lo	bbying)		
b Total lobbying expenditu	ires to influence a legi	slative body (direct lobb	ying)		
c Total lobbying expenditu	ires (add lines 1a and	1b)			
d Other exempt purpose e	expenditures.				
e Total exempt purpose ex	xpenditures (add lines	1c and 1d)	ļ		
f Lobbying nontaxable am both columns.	nount Enter the amou	nt from the following tat	ole in		
If the amount on line 1e, colu	ımn (a) or (b) ıs The	lobbying nontaxable a	mount is		
Not over \$500,000	209	% of the amount on line 1e			
Over \$500,000 but not over \$1,0	000,000 \$10	0,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over \$	1,500,000 \$17	5,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	17,000,000 \$22	5,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000	\$1,	000,000			
g Grassroots nontaxable a	amount (enter 25% of	line 1f)			
h Subtract line 1g from lin	e 1a lf zero or less, e	enter -0-			
i Subtract line 1f from line	e 1c If zero or less, ei	nter -0-			
j If there is an amount off section 4911 tax for this	her than zero on eithe	r line 1h or line 1i, did t	he organization file For	m 4720 reporting	Yes No
	4-Y	ear Averaging Period Unade a section 501(h) el pelow. See the instruction	ection do not have to c	complete all of the five h 2f.)	
·	Lobbyir	ng Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))	e de la companya della companya della companya de la companya della companya dell		and an inter-	S. 1860	
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					

BAA

f Grassroots lobbying expenditures

Schedule **C** (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Idaho Rural Water Association, Inc 82-0416513

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)	(b)	
	Yes	No	Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local.					
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
a Volunteers?	X				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		-		
c Media advertisements?		X			
d Mailings to members, legislators, or the public?	X				
e Publications, or published or broadcast statements?		Х			
f Grants to other organizations for lobbying purposes?		Х			
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X	<u> </u>			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Х				<u> 300.</u>
i Other activities? If 'Yes,' describe in Part IV See Part IV	X	igspace			83.
j Total Add lines 1c through 1i				10,2	:83.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	X	1			
b If 'Yes,' enter the amount of any tax incurred under section 4912		-			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		L			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u>↓</u>	<u> </u>			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)), or			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		Ĺ
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		<u></u>
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50′ section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if P is answered 'Yes.'	(c)(5) art III-), or ·A, lin€	3		
Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2 a			
b Carryover from last year		2 b			
c Total		2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	1 4 1				
expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV Supplemental Information		1 - 1			
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, a Also, complete this part for any additional information			ine 1i		
Part II-B, Line 1i - Other Activities Description					
The association has contracted with the Idaho Water Policy Group	to_r	<u>monit</u>	<u>or rul</u>	<u>ings</u>	- -
<u>proposed legislation, etc. to identify changes to or additions t</u>	<u>o la</u>	ws_an	.d		
regulations_involving_water_and_wastewater_issues_in_Idaho					
	. 				

Schedule C (F	Supplemental I	Idaho F	Rural W	Nater .	Association,	Inc		82-0416513	Page 4
Part IV	Supplemental	Informati	on (con	tinued)					
· artiv	- Cappionicitai	iiii Oi iii ati	011 (0011	····aca)					
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	- 								

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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 **2010**

Open to Public Inspection

Employer identification number

,,,,,,,,			' '
та-	aho Rural Water Association, I	nc	82-0416513
Par	dl Organizations Maintaining Donor	r Advised Funds or Other Similar Fur	
Гаі	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	ids of Accounts. Complete in
		(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 dor funds are the organization's property, subject	nor advisors in writing that the assets held in d to the organization's exclusive legal control?	onor advised 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 donor advisor, or fo	ds can be r any other Yes No
Pai	t II Conservation Easements. Compl	ete if the organization answered 'Yes	to Form 990, Part IV, line 7
1	Purpose(s) of conservation easements held by	y the organization (check all that apply)	
	Preservation of land for public use (e g , r	ecreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizations to the tax year	on held a qualified conservation contribution in	
			Held at the End of the Tax Year
	Total number of conservation easements		2a
	Total acreage restricted by conservation ease		2 b
•	Number of conservation easements on a certi	fied historic structure included in (a)	2c
(d Number of conservation easements included i structure listed in the National Register	n (c) acquired after 8/17/06, and not on a histo	oric 2d
3	Number of conservation easements modified, tax year ▶	-	ated by the organization during the
4	Number of states where property subject to co		_
5	Does the organization have a written policy re and enforcement of the conservation easement		
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing conservation eas	ements during the year
7	Amount of expenses incurred in monitoring, if	nspecting, and enforcing conservation easeme	nts during the year
8	Does each conservation easement reported o 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of s	ection Yes No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and expe to the organization's financial statements that	nse statement, and balance sheet, and describes the organization's accounting for
Pa	rt III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treasures, o wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets. 8.
1;	a If the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its fina	s held for public exhibition, education, or research	
1	b If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items	r SFAS 116 (ASC 958), to report in its revenue ld for public exhibition, education, or research	e statement and balance sheet works of art, in furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1	- \$
	(ii) Assets included in Form 990, Part X		►\$
2	If the organization received or held works of a amounts required to be reported under SFAS		for financial gain, provide the following
;	a Revenues included in Form 990, Part VIII, line	e 1	* \$
- 1	b Assets included in Form 990, Part X		▶\$

Schedule D (Form 990) 2010 Idaho	Rural W	ater	Associațio	n, Inc	82-041	6513		Page 2
Part III Organizations Maintai	ining Collec	ctions	of Art, Histo	rical Treasures, o	r Other Similar Ass	ets (c	ontınu	ed)
Using the organization's acquisition items (check all that apply)	on, accession	, and o	ther records, che	ck any of the followin	g that are a significant i	ise of its	s collec	lion
a Public exhibition			d Loan o	r exchange programs				
b Scholarly research			e 🗌 Other					
c Preservation for future gener								
4 Provide a description of the orga Part XIV						se in		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or i ather than to	receive be maii	donations of art, ntained as part o	, historical treasures, f the organization's co	or other similar offection?	Yes	Γ	No
Part IV Escrow and Custodia	l Arrangem	ents.	Complete if o	rganization answ	ered 'Yes' to Form 9	90, Pa	art IV,	line
9, or reported an amo					 			
1 a Is the organization an agent, trus included on Form 990, Part X?					ther assets not	Yes		No
b If 'Yes,' explain the arrangement	in Part XIV a	nd com	plete the following	ng table		Λ		
a Dagungung balansa					1c	Amoun	1	
c Beginning balance					1d			
d Additions during the year	•				1e			
e Distributions during the yearf Ending balance					1f			
2a Did the organization include an a	amount on For	m 990	Part X line 21?		L''1	Yes		No
b If 'Yes,' explain the arrangement		iii 330,	Turt X, mic 21				L	
Part V Endowment Funds. Co		ne ora	anization ans	wered 'Yes' to Fo	rm 990. Part IV. line	e 10.		
	(a) Current		(b) Prior year	(c) Two years ba			Four year	s back
1 a Beginning of year balance			1			1		
b Contributions								
c Net investment earnings, gains, and losses								
d Grants or scholarships								
e Other expenditures for facilities and programs	_							
f Administrative expenses								
g End of year balance.			<u></u>					
2 Provide the estimated percentag	e of the year e	end bal	ance held as					
a Board designated or quasi-endov			%					
b Permanent endowment ▶	%							
c Term endowment	[%]							
3a Are there endowment funds not	in the possess	sion of	the organization	that are held and adn	ninistered for the	[Yes	No
organization by (i) unrelated organizations						3a(i)	163	110
(ii) related organizations						3a(ii)		
b If 'Yes' to 3a(ii), are the related	organizations	listed a	is required on Sc	hedule R?		3b		
4 Describe in Part XIV the intende	_					<u> </u>		
Part VI Land, Buildings, and								
Description of investment		(a) Cos	st or other basis	(b) Cost or other	(c) Accumulated	(d)	Book va	alue
		(ıı	nvestment)	basis (other)	depreciation			
1 a Land	,							
b Buildings				 	 			
c Leasehold improvements	}			E0 7.00	46 206			47.5
d Equipment				50,762.	46,286.		4	<u>,476.</u>
e Other	n (d) must ==	wal Ec-	m 990 Part V a	olumn (P) luna 10(a)	1			,476.
Total. Add lines 1a through 1e (Columb	iii (u) iiiust eq	uai FUI	111 990, Fait A, C	orumni (6), nne 10(0),		dule D /		90) 2010

(10) (11)

Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

37,113.

^{2.} FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Schedule D (Form 990) 2010 Idaho Rural Water Association, Inc	82-0416513	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1 Total revenue (Form 990, Part VIII,column (A), line 12)	1	,123,556.
2 Total expenses (Form 990, Part IX, column (A), line 25)	1	,075,149.
3 Excess or (deficit) for the year Subtract line 2 from line 1		48,407.
4 Net unrealized gains (losses) on investments		
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		
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		48,407.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1 Total revenue, gains, and other support per audited financial statements		,123,556.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		·
a Net unrealized gains on investments		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1		,123,556.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		, 123, 330.
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV) . 4b	 	
c Add lines 4a and 4b.	_{4c}	
	4c 5 1	,123,556.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		,123,330.
		,075,149.
 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 		,073,143.
	 	
· · · · · · · · · · · · · · · · · · ·	 	
c Other losses 2c		
d Other (Describe in Part XIV)	 •	
e Add lines 2a through 2d	2e	075 140
3 Subtract line 2e from line 1 .	3 1	<u>,075,149.</u>
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) 4a 4b	 	
b Other (Describe in Part XIV) c Add lines 4a and 4b.	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		,075,149.
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, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also con any additional information	art IV, lines 1b and nplete this part to p	2b, rovide
		·
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BAA TEEA3304L 02/11/11	Schedule D (I	orm 990) 2010

Schedule D	(Form 990) 2010	Idaho Rural	Water Associa	ation, Inc	<u>-</u>	82-0416513	Page 5
Part XIV	Supplemental	Information (co	ntinued)				
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990 or 990-EZ.

Idaho Rural Water Association, Inc	82-0416513
Form 990, Part III, Line 4d - Other Program Services Description	
ARRA Circuit Rider - assist water systems under 10	,000 people with a backlog of
projects and funded through the American Recovery	and Reinvestment Act; approx. 143
served	
EPA Technical - provides training and technical as	sistance to personnel of rural and
small public water supply systems; approx. 200 serv	ved
Form 990, Part VI, Line 6 - Explanation of Classes of Members o	r Shareholder
General members and affiliate members (non-voting)	<u>-</u>
Form 990, Part VI, Line 7a - How Members or Shareholders Elec	t Governing Body
Board of Directors serve staggered terms and those	up for election are voted on by
the general membership at the annual conference.	
Form 990, Part VI, Line 9 - Officer, Director, Trustee, Key Employ	yee Mailing Address
Mike Haight	
1231 Holmes Crossing Road	
Craigmont, ID 83523	
Butch Anderson	
68 Wilderness Way	
Boise, ID 83716	
Robert Dial	
PO Box 31	
Firth, ID 83236	

Schedule O (Form 990 or 990-EZ) 2010	Page 2
Name of the organization Idaho Rural Water Association, Inc	Employer identification number 82-0416513
Form 990, Part VI, Line 9 - Officer, Director, Trustee, Key Employee Mailing Addres	s (continued)
Bob Culver	
152_E_Avenue_A	
Jerome, ID 83338	
Mike Dimmick	
120 West	
Moscow, ID 83843	
Deb Weight	
Rob Wright	
PO Box 2	
Kimberly, ID 83341	
Bruce Evans	
316 East Park Street	
Emmett, ID 83617	
Form 990, Part VI, Line 11b - Form 990 Review Process	
A copy of the Form 990 is available to all Directors should th	ney request it. The
President reviews the Form 990 before filing and reports any i	tems of concern to the
Board of Directors.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Office	rs & Key Employees
Compensation of all employees is reviewed annually by the Boar	ed of Directors through
the review and approval of the budget.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Governing documents and financial statements are available to	the public upon
request to the organization.	

SCHEDULE R (Form 990)

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. * See separate instructions.

2010

OMB No 1545-0047

Open to Public Inspection

Employer identification number 82-0416513 **e** Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) 9 3 Ξ Idaho Rural Water Association, Inc Department of the Treasury Internal Revenue Service Name of the organization

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					,
(5)					
(6)					•
Partilial Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	ons (Complete if the orgring the tax year.)	ganization answered	1 'Yes' to Form 99), Part IV, line 34 b	ecause it had
	,	47	3	•	(5)

:	(b)
	9
,	(e)
	(p) =
ar.)	(3)
ations during the tax year	(a)
one or more related tax-exempt organizations during the tax year.)	(a)

				_	·	3	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(1) Direct controlling entity	Sec 512(b)(13) controlled entity?	(13) entity?
					•	Yes	No
(1) National Rural Water Association 2915 South 13th Street	Training rural water systems						
(2) <u>Duncan, OK 73533</u>		OK	501 (c) 4	N/A	N/A		×
(3)							
<u></u>							
<u></u>							
<u>(</u> 9)							
<u></u>							

Schedule R (Form 990) 2010

82-0416513

Page 2

Schedule R (Form 990) 2010 Idaho Rural Water Association, Inc

Part III Identification of Related Organizations Taxable as a Partnership (Complete of 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.)

Decause It liad of le of thore related organizations areated as a partitle strip during the tax year.		מנעת האל	שוולמנוסווס חבמו	במ מז מ למו מוכו	שווים לוווכ	ide year.				
(a)	(q)	(2)	(p)	(e)	(f)	(g)	(h)	(i) Code V.! IBI	General or	(k) Percentane
related organization	Frimary activity	domicile	controlling entity	income (related,	income	end-of-year	tionate	amount in box	managing	ownership
		(state or		unrelated, excluded		assets	alfocations?	20 of Schedule	partner?	
		foreign country)	foreign country)	from tax under sections 512-514)			Yes No	(Form 1065)	Yes No	
(1)										
							-			
										:
(Z)		i								
(3)										
										•

Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV, Inc. 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	Taxable as a Coled organizations	rporation or Trust (Contreated as a corporate	mplete if the orgai	ization answered 'Y the tax year.)	es' to Form 990, Pa	rt IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c)(d)(e)(f)(f)Legal domicile of forming controlling entity (C corp, S corp, country)Type of entity (C corp, S corp, country)Share of end-of-year assets	ct Type of entiting (C corp., S corp. or trust)	Share of total income p.	(g) Share of end-of-year assets	(h) Percentage ownership
(1)						
	··					!
(2)						
	.					
(3)						
	 					
ВАА		TEEA5002L 12/07/10			Schedule R (Form 990) 2010	1 990) 2010 ر

82-0416513

Schedule R (Form 990) 2010 Idaho Rural Water Association, Inc

| Part V | Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
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?	ons listed in Parts II.	ر٨١		ļ 	
a Receipt of (I) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			<u>1</u>		×
b Gift, grant, or capital contribution to other organization(s)			1 b		×
c Gift, grant, or capital contribution from other organization(s)			ا2	×	
d Loans or loan guarantees to or for other organization(s)			1d		X
e Loans or loan guarantees by other organization(s)			1e		×
			_	á- '.	_
f Sale of assets to other organization(s)			=		×
g Purchase of assets from other organization(s)			19		×
h Exchange of assets			무		×
i Lease of facilities, equipment, or other assets to other organization(s)			=		×
				<u>.</u>	
j Lease of facilities, equipment, or other assets from other organization(s)			<u>;</u> -		×
k Performance of services or membership or fundraising solicitations for other organization(s)			-		×
I Performance of services or membership or fundraising solicitations by other organization(s)			=		×
m Sharing of facilities, equipment, mailing lists, or other assets			E		×
n Sharing of paid employees			-		×
				y 41	
 Reimbursement paid to other organization for expenses 			10		×
p Reimbursement paid by other organization for expenses			<u>ا</u>		×
			_	`` :-	
q Other transfer of cash or property to other organization(s)			19		×
r Other transfer of cash or property from other organization(s)			1,		×
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 thresholds	covered relationship	s and transaction thre	splods		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	(d) f deterr nt involv	mınıng ved
(1) National Rural Water Association	3	868, 942.	FMV		
(2)					
(3)					
(4)					
(5)					
(9)					
BAA TEEA5003L 12/23/10		Sche	Schedule R (Form 990) 2010	n 990) 2010

Page 4

Schedule R (Form 990) 2010 Idaho Rural Water Association, Inc

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

(h) General or managing partner? ž 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 Yes Code V-UBI amount in box 20 of Schedule K-1 Form (1065) Dispropor-tionate allocations? ž Yes (e) Share of end-of-year assets (d) Are all partners section 501(c)(3) organizations? Yes No (c)
Legal domicile
(state or foreign country) (b) Primary activity (a)
Name, address, and EIN of entity **2** ୍ର **£** ©|

Schedule R (Form 990) 2010	TEEA5004L 12/23/10	ВАА
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Schedule R	(Form 990) 2010	Page 5
Part VII	(Form 990) 2010 . Supplemental Information	
	Complete this part to provide additional information for responses to questions on Schedule R (see instructions)	
		· -
		. - -
		- -
		
		 -
		 -

010	Schedule	A, Part IV	- Supplem	ental Infor	mation	Page !
		Idaho Rural	Water Associa	tion, Inc		82-041651
Part II, Line 10 - Otl	her Income					
Nature and Sour	ce	2010	2009	2008	2007	2006
Gross receipts Miscellaneous	from confer	ence admiss 87,617. 276. 87,893.	63,295. 1,469.	91,785. 5,565. 97,350.	108,749. 4,979. 3 113,728.	65,231. 36,108. 101,339.

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

•	X

Form 8868 (Rev 1-2011)

	e filing for an Additional (Not Automatic) 3-Monti				
	plete Part II unless you have already been grante				
corporation request an e	iling (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which miting of this form, visit www irs gov/efile and click of	automatic) Part I or Pa Just be sent	3-month extension of time. You can ele art II with the exception of Form 8870, In to the IRS in paper format (see instructi	ctronically file Form formation Return for	8868 to r Transfers
Part I A	automatic 3-Month Extension of Time. C	nly subm	nit original (no copies needed).		
A corporation	on required to file Form 990-T and requesting an a	utomatic 6	month extension — check this box and o	complete Part I only	▶ []
All other col	rporations (including 1120-C filers), partnerships, returns	REMICS, a	nd trusts must use Form 7004 to request	t an extension of tim	ne to file
	Name of exempt organization			Employer identification	number
Type or print	T. I. B Natura Baranishian	T		02 0416512	
File by the	Idaho Rural Water Association,			82-0416513	
due date for filing your					
return See instructions	6065 West Corporal Lane City, town or post office, state, and ZIP code For a foreign add	ress, see instru	ctions		
	Boise, ID 83704				
	100130, 10 03.01				
Enter the R	eturn code for the return that this application is fo	r (file a sep	parate application for each return)		01
Application Is For		Return Code	Application Is For		Return Code
Form 990		01	Form 990-T (corporation)		07
Form 990-B	L	02	Form 1041-A		08
Form 990-E	Z	03	Form 4720		09
Form 990-P	F	04	Form 5227		10
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other than above)	06	Form 8870		12
Telephor If the or	he No (208) 343-7001 ganization does not have an office or place of but for a Group Return, enter the organization's four	siness in th digit Group	Exemption Number (GEN) If	this is for the whole	· ► □
check th	nis box 🕒 🔲 If it is for part of the group, chec	k this box	and attach a list with the names a	and EINs of all mem	bers
	ension is for				
until	est an automatic 3-month (6 months for a corpora $2/15$, 20 12 , to file the exempt or extension is for the organization's return for calendar year 20 or 10 tax year beginning 1	ganızatıon r	eturn for the organization named above		
	tax year entered in line 1 is for less than 12 mon- hange in accounting period	ths, check r	reason Initial return Fir	nal return	
3a If this nonre	application is for Form 990-BL, 990-PF, 990-T, 4 fundable credits. See instructions.	720, or 606	9, enter the tentative tax, less any	3a \$	0.
paym	application is for Form 990-PF, 990-T, 4720, or 6 ents made. Include any prior year overpayment a	llowed as a	credit	3 b \$	0.
EFTP	ic e due. Subtract line 3b from line 3a Include you S (Electronic Federal Tax Payment System) See	instruction	\$	3c \$	0.
Caution. If payment in	you are going to make an electronic fund withdra structions	wal with thi	s Form 8868, see Form 8453-EO and Fo	rm 8879-EO for	

BAA For Paperwork Reduction Act Notice, see Instructions.