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DLN: 93493223010252

# Form **990**

Department of the Treasury

**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)

2011

OMB No 1545-0047

Open to Public Inspection

benefit trust or private foundation)

itemai Revei		. The organization may have to	and a copy or time return to eather,		- roquiromento	Inspection	
		lendar year, or tax year beginning  C Name of organization	g 01-01-2011 and ending 12-31-20	11	D Employer id	dentification number	
Check if  Address	f applicable	AMERICAN WATER WORKS ASSOCIATE	ION		13-56602		
_	-	Doing Business As			E Telephone		
Name c	-				(303)794	-7711	
Initial re	eturn		Il is not delivered to street address) Room/s	suite		:s \$ 30,232,070	
Termina	ited	6666 WEST QUINCY AVENUE			C Gross receipt		
- Amende	ed return	City or town, state or country, and ZI	P + 4				
– Applicat	ion pending	DENVER, CO 80235					
		<b>F</b> Name and address of princ	ipal officer	H(a) is th	I is a group retu	rn for	
		DAVID LAFRANCE		affilia		⊤Yes ▼ No	
		6666 WEST QUINCY AVENU DENVER,CO 80235	'E	11/5			
		,		1 ' '	l affiliates inclu	i <b>ded?  </b> Yes   No it (see instructions)	
Tax-ex	empt status	▼ 501(c)(3)	sert no )		ip exemption r		
Webs	ite:⊫- WW	W A WWA ORG		7(3)			
				<u>                                     </u>			
	_	Corporation Trust Association	Other -	<b>L</b> Year of fo	mation 1881	<b>M</b> State of legal domicile IL	
Part 1	Sum	mary					
1		escribe the organization's mission	i or most significant activities Y TO PROTECT PUBLIC HEALTH A	ND TO BBOV	IDE CAEE AN	D SHEELCIENT WATER	
,	FORALL		Y TO PROTECT PUBLIC HEALTH A	AND TO PROV	IDE SAFE AN	D SUFFICIENT WATER	
<u> </u>							
2							
	Charleth	have been after a successful disc.		-f			
;   2		,	continued its operations or disposed		1	I	
.			ig body (Part VI, line 1a)		3	59	
4			the governing body (Part VI, line 1t			59	
5			alendar year 2011 (Part V, line 2a)		5	164	
- 1		mber of volunteers (estimate if ne			6	5,000	
			rt VIII, column (C), line 12		7a	2,621,554	
	<b>b</b> Net unre	lated business taxable income fro	om Form 990-1, line 34		7b	578,007	
				Prio	r Year	Current Year	
ս   8		butions and grants (Part VIII, line		•	44,195	144,949	
9 10 10			e 2g)		24,565,818 24,527		
10			(A), lines 3, 4, and 7d)	•	534,987 403		
**		revenue (Part VIII, column (A), li			3,545,485	3,805,573	
12		evenue—add lines 8 through 11 (	must equal Part VIII, column (A), lii	ie	28,690,485	28,881,765	
13			X, column (A), lines 1-3)		2,048,895	2,064,281	
14	Benefit	s paid to or for members (Part IX	, column (A), line 4)		0	0	
. 15	Salarıe	es, other compensation, employee	e benefits (Part IX, column (A), lines				
Ses   16	5-10)				12,621,302	13,030,176	
ਰੂ   16	<b>a</b> Profes	sional fundraising fees (Part IX, c	olumn (A), line 11e)		0	0	
ਲੌਂ ∣ਾ	<b>b</b> Total fui	ndraising expenses (Part IX, column (D),	line 25) ►1,794,989				
_   17	Other	expenses (Part IX, column (A), lır	nes 11a-11d, 11f-24e)		12,727,687	12,339,697	
18	Total e	xpenses Add lines 13-17 (must	t equal Part IX, column (A), line 25)		27,397,884	27,434,154	
19	Reven	ue less expenses Subtract line 1	8 from line 12		1,292,601	1,447,611	
; <del>g</del>					g of Current	End of Year	
Secure 20	<b>+</b> · ·	anata (Dait V. I., 16)			'ear		
E 20		issets (Part X, line 16)			31,683,898	33,097,897	
皇 21					14,556,941	18,123,714	
		sets or fund balances Subtract li	ne 21 from line 20		17,126,957	14,974,183	
Part I	_	ature Block	d this noture in aludin	nahadul '	tatament- '	to the best of	
			d this return, including accompanying : Declaration of preparer (other than offic				
nowledg	e.						
	T k			I			
<b>:</b>	***** Signa	** ture of officer			012-06-30 ate		
ign Iere				Di	-		
		or print name and title					
	<u> </u>	<u> </u>		Chask of	Drop /- +-	anuar idantification	
_ ! . !	Preparer signature		Date	Check if self-	Preparer's taxp (see instruction	payer identification number ns)	
aid	,	<u>r</u>		employed 🕨 🦵			
reparer		nme (or yours BKD LLP			EIN Þ		
se Only		and ZIP + 4 111 South Tejon Suite	800		-		
	1	Colorado Springs CO	000020040		Phone no 🕨	(719) 471-4290	

Colorado Springs, CO 809039848

May the IRS discuss this return with the preparer shown above? (see instructions) . .

Par		ment of Program Se If Schedule O contains a r			III	
1	•	be the organization's miss		NIC HEALTH AND	TO PROVIDE SAFE AND	SUFFICIENT WATER FOR ALL
THR		TIVE LEADERSHIP, AW			UCATION, SCIENCE, MAI	
2		zation undertake any sign 990 or 990-EZ?	ıfıcant program se	ervices during the	year which were not listed o	n ┌ Yes ┌ No
	If "Yes," descr	ribe these new services of	n Schedule O			
3	<del>_</del>	zation cease conducting,	<del>-</del>	<u> </u>	t conducts, any program	┌ Yes ┌ No
	If "Yes," descr	ribe these changes on Sch	nedule O			
4	expenses Sec	ction 501(c)(3) and 501(d	(4) organization	s and section 4947	s three largest program ser ? (a)(1) trusts are required t each program service repo	o report the amount of
4a	(Code	) (Expenses \$	6,657,326	ıncludıng grants of \$	2,014,904 ) (Revenu	ue \$ 11,620,471 )
					OF MEMBERS IN THE ASSOCIATION HAD 53,704 MEMBERS AT 12/31	ION AND TO PROVIDE INFORMATION /11
	(Code	) (Expenses \$	5,891,035	ıncludıng grants of \$	) (Revenu	e \$ 5,947,598 )
טד	•	, , , ,	, ,		, ,	FOR USE BY THE PUBLIC AND WATER
	(Code	) (Expenses \$	4,853,551	ıncludıng grants of \$	5,500 ) (Revenu	ue \$ 7,952,777 )
	CONFERENCES	- MEMBERSHIP CONFERENCES	WHERE ALL PHASES (	F WATER SUPPLY OPE	, , ,	IST PEOPLE IN PUBLIC WATER SUPPLY
	Other progra	m services (Describe in S	Schedule O )			
	(Expenses \$	3,158,171	including grants of	of \$	43,877 ) (Revenue \$	1,141,276)
4e	Total program	n service expenses►\$	20,560,08	3		

Part IV	Checklis	t of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
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.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II and IV	15	Yes	
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 U S ? If "Yes," complete Schedule F, Part III and IV	16		No
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
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 $\textcircled{\textbf{5}}$	21	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
	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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? If "Yes," complete Schedule L, Part $I$	25a		No
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		No
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		No
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		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 owner? If "Yes," complete Schedule L, Part $IV$ .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		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		No
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		No
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	Yes	
		F	orm <b>99</b> 0	(2011)

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V $\cdot$ . $\cdot$ . $\cdot$ . $\cdot$ . $\cdot$ . $\cdot$ . $$	•	.୮	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	<b>1a</b> 113			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	<b>1b</b> 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		105	
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	163	
За	Did the organization have unrelated business gross income of \$1,000 or more during the			
Ja	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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 or securities	4a	Yes	
<b>L</b>	account)?		res	
D	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 Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No No
		5b		110
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
-	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year   7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<del>- ' · · · · · · · · · · · · · · · · · · </del>		
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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.	_		
	Did the organization make any taxable distributions under section 4966?	9a		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club  10b			
,	facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
_	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	<b>Note.</b> All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14b		-,,,

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)	Ī		
100	Did the erganization have local chapters, branches, or affiliates?	100	Yes Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	res	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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?	16a		No.
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			'''
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed▶CA , OR			

- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 THE ORGANIZATION 6666 WEST QUINCY AVENUE

DENVER, CO 80235 (303) 794-7711

### 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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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, or 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 neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
<b>(A)</b> Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				$\vdash$			_			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title A verage hours per week (describe hours			more unles an	(C) on (do e than s perse office	not one on is ranc	box, both a ee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W- 2/1099-	Estir amount compe fron organiza	nated of other nsation the ation and
		for related organizations in Schedule	Individual trustee or director	Institutional Trustee		Highest compensated employee	Former			MISC)	1	zations
See A	dditional Data Table					<del>                                     </del>						
					1							
1b	Sub-Total					•	<b>P</b>					
	Total from continuation sheets  Total (add lines 1b and 1c) .				•	•	•		1,467,048	(	0	236,371
2	Total number of individuals (incl	udıng but not lın	nited to	those	liste		e) who	receive	d more tha	ın		
	\$100,000 of reportable compen	sation from the	organız	ation <b>F</b>	11							
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee								Yes				
3	Did the organization list any <b>for</b> on line 1a? <i>If</i> "Yes," complete Sci											No No
3		hedule J for such	<i>individi</i> reporta	<i>ual</i> able co	• ompe	nsation	• and	• • • other co	mpensatio	n from the	3	No No
	on line 1a? If "Yes," complete Sci For any individual listed on line organization and related organiz individual	hedule I for such  1 a, is the sum of ations greater the such that the s	reporta nan \$15 	able co 50,000 • •	ompe ? <i>If</i> • •	nsation " <i>Yes," c</i>	and omple unre	other co ete Sched	mpensatio ule J for su	n from the		
4	on line 1a? If "Yes," complete Sci For any individual listed on line organization and related organiz individual	hedule I for such  1 a, is the sum of ations greater the such that the s	reporta nan \$15 	able co 50,000 • •	ompe ? <i>If</i> • •	nsation " <i>Yes," c</i>	and omple unre	other co ete Sched	mpensatio ule J for su	n from the	3	
5	on line 1a? If "Yes," complete Sci For any individual listed on line organization and related organiz individual	thedule J for such  1 a, is the sum of ations greater the such that the	reporta nan \$15 	able co 50,000 • •	ompe ? <i>If</i> • •	nsation " <i>Yes," c</i>	and omple unre	other co ete Sched	mpensatio ule J for su	n from the	3 Yes	No
5	on line 1a? If "Yes," complete Sca For any individual listed on line organization and related organiz individual	tractors  hedule J for such  1 a, is the sum of ations greater the receive or accruzation? If "Yes," of the compensation of the organization of th	report: ian \$15 ie complet asated	able co	ompe ? If ion fi dule	nsation "Yes," c  om any I for suc	and omple unre	other co	mpensatio ule J for su  janization o	n from the ch	3 Yes	No
5 Se 1	on line 1a? If "Yes," complete Scale For any individual listed on line organization and related organization and related organization and related organization and person listed on line 1a services rendered to the organization.  Complete this table for your five \$100,000 of compensation from or within the organization's tax your line and the o	tractors  hedule J for such  1 a, is the sum of ations greater the receive or accruzation? If "Yes," of the the organization of the organization of the organization of the organization of the organization.	reportant \$15  in \$15	able co	ompe ? If ion fi dule	nsation "Yes," c  om any I for suc	and omple unre	other co	mpensation of the served more ryear endi	n from the ch or individual for .	3 Yes	No
5 Se 1 TMA R 1919 vienn	on line 1a? If "Yes," complete Scale For any individual listed on line organization and related organization and related organization and related organization and related organization and person listed on line 1a services rendered to the organization.  Complete this table for your five \$100,000 of compensation from or within the organization's tax your services.  Name of the services of the services in the organization and the services in the organization and the services in the services i	tractors hedule J for such at 1 a, is the sum of ations greater the receive or accruzation? If "Yes," of tractors highest compendate or accompanity of the organization (A)	reportant \$15  in \$15	able co	ompe ? If ion fi dule	nsation "Yes," c  om any I for suc	and omple unre	other co	mpensation of the served more ryear endi	e than ng with	3 Yes	No No
5  See 1  TMA R 1919 VIENN WASH 801 M WASH	For any individual listed on line organization and related organization and related organization and related organization and related organization/subsection B. Independent Concept Complete this table for your five \$100,000 of compensation from or within the organization's tax your Section Sources in Concept	tractors hedule J for such at 1 a, is the sum of ations greater the receive or accruzation? If "Yes," of tractors highest compendate or accompanity of the organization (A)	reportant \$15  in \$15	able co	ompe ? If ion fi dule	nsation "Yes," c  om any I for suc	and omple unre	other co	mpensation of the control of the con	e than ng with  (B) ription of services	3 Yes	No No CC)
TMA R 1919 OVIENN WASH RR DO PO BO DALLA	For any individual listed on line organization and related organization and related organization and related organization and related organization/undual	tractors hedule J for such at 1 a, is the sum of ations greater the receive or accruzation? If "Yes," of tractors highest compendate or accompanity of the organization (A)	reportant \$15  in \$15	able co	ompe ? If ion fi dule	nsation "Yes," c  om any I for suc	and omple unre	other co	mpensation of the served more ryear ending the served serv	n from the ch or individual for or individual fo	3 Yes	No No No 402,315
TMA R 1919 VIENN WASH 801 M WASH RR DO DALLA GRANI DEPAR WASH	For any individual listed on line organization and related organization/dual	tractors hedule J for such at 1 a, is the sum of ations greater the receive or accruzation? If "Yes," of tractors highest compendate or accompanity of the organization (A)	reportant \$15  in \$15	able co	ompe ? If ion fi dule	nsation "Yes," c  om any I for suc	and omple unre	other co	mpensation of the served more ryear ending the served serv	n from the ch or individual for or individual fo	3 Yes	No No No 402,315 967,924
TMA R 1919 VIENN WASH RR DO PO BO DALLA GRANI QUADO PO BO PITTS	For any individual listed on line organization and related organization and person listed on line 1 a services rendered to the organization.  Complete this table for your five \$100,000 of compensation from or within the organization is tax your services. INC GALLOWS RD SUITE 400 A, VA 22182 INGTON CONVENTION SPORTS AUTH OUNT VERNON PLACE NW INGTON, DC 20001 DNNELLY X 730216 S, TX 75373 D HYATT WASHINGTON REMEMBER 1350	tractors  hedule J for such  a, is the sum of ations greater the receive or accrustation? If "Yes," of the organization for the organization for the organization for the and business additional forms.	reportion \$15  in \$15  in complete  in Repo	able co	ompe ? If	rom any	and omple	other co	mpensatio ule J for su anization ceived mor r year end  CONF FACI PRINTING SU PRINTING SE	n from the ch or individual for e than ng with  (B) ription of services a SUPPORT  LITIES  CS  RVICES	3 Yes	No  No  No  402,315  967,924  523,147

California   Cal	Form 99							Page <b>9</b>
Business Code	Part	<b>/111</b> 1	Statement of Revenue			Related or exempt function	Unrelated business	Revenue excluded from tax under sections 512,513,or
Business Code	\$ \$	1a	Federated campaigns	1a				
Business Code	듄둦	ь	Membership dues	1b				
Business Code	చ్	c	Fundraising events	1c				
Business Code	¥≝ a	d	Related organizations	1d				
Business Code	% E ∰	e	Government grants (contributions)	<b>1e</b> 110,646				
Business Code	<u>5</u> .8	f	All other contributions, gifts, grants, and	1f 34,303				
Business Code	itributi Lother	g	Noncash contributions included in	1				
Business Code	0 E 0 E 0	h		▶	144,949			
28				Business Code				
1	II.	2a	MEMBERSHIP DUES	-	11.620.471	11.620.471		
1	9. 9.	ь	CONFERENCES & SEMINARS	-				
1	a T	l c	-	-			2 621 554	
1	Ş			-			2,021,334	
1	Ŧ			-				
1	Ë	l _		-	-			
1	Š	'	All other program service revenue		355,001	355,001		
### ### ### ### ### ### ### ### ### ##	₹	g	<b>Total.</b> Add lines 2a-2f		24,527,548			
Total revenue   Description   Description		3	Investment income (including div	ıdends, ınterest				
Total Part   Tot								402,635
Comparison   Com								
Sea   Gross rents		5			703,727			/03,727
December   December		 		(II) Personal				
Page								
Net rental income or (loss)   Net		"	expenses					
Comparison   Com		C						
Ta		d	Net rental income or (loss)					
Form sales of assets other than inventory								
Buss cost of goods sold   Business Code		7a	I	1,060				
Description			I					
Sales expenses		ь	Less cost or					
Net gain or (loss)   1,060   1,060			I					
Sa Gross income from fundraising events (not including \$ for contributions reported on line 1c) See Part IV, line 18		С	Gain or (loss)					
## Events (not including soft contributions reported on line 1c)		d			1,060			1,060
9a Gross income from gaming activities See Part IV, line 19 a  b Less direct expenses b  c Net income or (loss) from gaming activities ▶  10a Gross sales of inventory, less returns and allowances . a  3,409,729  b Less cost of goods sold . b  1,350,305  c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue  Business Code  11a ADMN/RNTL-WATER RSRCH FDN, WATER FOR PPL  b TRAVEL REVENUE  C MISCELLANEOUS REVENUE  All other revenue	nue	8a	events (not including \$					
9a Gross income from gaming activities See Part IV, line 19 a  b Less direct expenses b  c Net income or (loss) from gaming activities ▶  10a Gross sales of inventory, less returns and allowances . a  3,409,729  b Less cost of goods sold . b  1,350,305  c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue  Business Code  11a ADMN/RNTL-WATER RSRCH FDN, WATER FOR PPL  b TRAVEL REVENUE  C MISCELLANEOUS REVENUE  All other revenue	r Reve							
9a Gross income from gaming activities See Part IV, line 19 a  b Less direct expenses b  c Net income or (loss) from gaming activities ▶  10a Gross sales of inventory, less returns and allowances . a  3,409,729  b Less cost of goods sold . b  1,350,305  c Net income or (loss) from sales of inventory . ▶  Miscellaneous Revenue  Business Code  11a ADMN/RNTL-WATER RSRCH FDN, WATER FOR PPL  b TRAVEL REVENUE  C MISCELLANEOUS REVENUE  All other revenue	ŧ.				-			
See Part IV, line 19	Õ			, t	0			
c Net income or (loss) from gaming activities		9a						
10a Gross sales of inventory, less returns and allowances .  a 3,409,729  b Less cost of goods sold . b 1,350,305  c Net income or (loss) from sales of inventory . ► 2,059,424  Miscellaneous Revenue Business Code  11a ADMN/RNTL-WATER RSRCH 900099 417,283 417,283 417,283  417,283  EDN, WATER FOR PPL 900099 549,989 549,989  c MISCELLANEOUS REVENUE 900099 75,150 75,150 75,150  d All other revenue		b						
Total revenue   See Instructions   See Instructi		С	Net income or (loss) from gaming	activities .	0			
b         Less cost of goods sold b         1,350,305         2,059,424         2,059,424         2,059,424           Miscellaneous Revenue         Business Code         417,283         417,283         417,283           FDN, WATER FOR PPL         900099         549,989         549,989         549,989           C         MISCELLANEOUS REVENUE         900099         75,150         75,150         75,150           d         All other revenue         1,042,422         1,042,422         2,621,554         2,621,554         2,074,694		10a		<b>a</b> 3 409 729				
c         Net income or (loss) from sales of inventory         ▶         2,059,424         2,059,424         2,059,424           Miscellaneous Revenue         Business Code         417,283         417,283           11a         ADMN/RNTL-WATER RSRCH FDN, WATER FOR PPL         900099         417,283         417,283           b         TRAVEL REVENUE         900099         549,989         549,989           c         MISCELLANEOUS REVENUE         900099         75,150         75,150           d         All other revenue		Ь	Less cost of goods sold	_				
Miscellaneous Revenue         Business Code           11a ADMN/RNTL-WATER RSRCH FDN, WATER FOR PPL         900099         417,283         417,283           b TRAVEL REVENUE         900099         549,989         549,989           c MISCELLANEOUS REVENUE         900099         75,150         75,150           d All other revenue         1,042,422         1,042,422           12 Total revenue         See Instructions         28,881,765         24,040,568         2,621,554         2,074,694		c			2,059,424	2,059,424		
FDN, WATER FOR PPL   900099   549,989   549,989   549,989			Miscellaneous Revenue	Business Code				
b       TRAVEL REVENUE       900099       549,989       549,989         c       MISCELLANEOUS REVENUE       900099       75,150       75,150         d       All other revenue		11a		900099	417,283			417,283
C MISCELLANEOUS REVENUE 900099 75,150 75,150  d All other revenue		.		000000	E40,000			E40,000
d All other revenue  e Total. Add lines 11a-11d				_		75 45-		549,989
e Total. Add lines 11a-11d				- 900099	/5,150	/5,150		
12 Total revenue. See Instructions								
28,881,765 24,040,568 2,621,554 2,074,694					1,042,422			
■			. Jean revenue. Jee mistractions		28,881,765	24,040,568		

### 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) Check if Schedule O contains a response to any question in this Part IX

	st include amounts reported on lines 6h		(B)	)	(D)
	ot include amounts reported on lines 6b, o, 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 United States See Part IV, line 21	1,726,856	1,726,856		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	43,877	43,877		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	293,548	293,548		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	965,679	321,555	644,124	
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			
7	Other salaries and wages	8,676,011	5,583,249	2,476,785	615,977
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,474,896	902,295	466,081	106,520
9	Other employee benefits	1,217,662	728,192	405,924	83,546
10	Payroll taxes	695,928	416,182	231,997	47,749
11	Fees for services (non-employees)	· ·			<u>·</u>
а	Management	0			
ь	Legal	223,928	214,344	13	9,571
c	Accounting	108,860	104,201	6	4,653
d	Lobbying	13,189	,	13,189	·
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	1,299,858	1,244,227	74	55,557
12	Advertising and promotion	1,612,596	1,270,707		341,889
13	Office expenses	2,106,701	1,945,462	1,298	159,941
14	Information technology	0	_,,	_,	
15	Royalties	0			
16	Occupancy	1,656,726	1,563,155		93,571
17	Travel	1,079,786		223,600	13,423
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0.2,703	223,000	10,125
19	Conferences, conventions, and meetings	1,906,961	1,897,665	4,335	4,961
20	Interest	15,405	13,636	3	1,766
21	Payments to affiliates	0	15,550		2,
22	Depreciation, depletion, and amortization	969,617	858,132	157	111,328
23	Insurance	230,857	208,746	29	22,082
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				,
а	MISCELLANEOUS	487,574	99,569	366,487	21,518
b	COMPLIMENTARY PUBLICATIONS	208,447	127,626		80,821
c	RECRUITING/TRAINING	174,243	154,096	31	20,116
d	UBI TAXES	221,000		221,000	
e					
f	All other expenses	23,949		23,949	
25	Total functional expenses. Add lines 1 through 24f	27,434,154	20,560,083	5,079,082	1,794,989
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation				000 (3011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1,206,474 1,253,763 1 1 4.925.758 11.837.494 2 2 3 0 3 0 886.217 4 778.098 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . . . . . . 0 0 5 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 0 0 6 0 7 0 886.805 8 772.538 9 543,789 9 526,641 Prepaid expenses and deferred charges . . . . . . 10a 18,020,408 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 9,803,224 b Less accumulated depreciation . . . . 8,653,368 10c 8,217,184 1,621,840 1,010,082 11 11 8,585,000 12 12,821,000 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 0 Investments—program-related See Part IV, line 11 . . ol 0 14 14 138,647 15 117,097 15 31,683,898 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 33,097,897 2,049,703 2,450,885 17 17 Accounts payable and accrued expenses . 18 18 19 8,940,106 19 8,909,783 20 1.025.000 20 700.000 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 0 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 persons Complete Part II of Schedule L $\ldots$ . $\ldots$ . $\ldots$ 22 ol 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . . ol 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 2,542,132 25 6,063,046 D . . . . . 26 14,556,941 26 18,123,714 **Total liabilities.** Add lines 17 through 25 . . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 15,401,347 13,208,911 Unrestricted net assets . . . . 493,007 28 495,594 28 Temporarily restricted net assets . . . . . Fund 29 1,232,603 29 1,269,678 Permanently restricted net assets . . . . Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 17.126.957 33 14,974,183 Total net assets or fund balances . . . . . 34 Total liabilities and net assets/fund balances . . . . . 31.683.898 34 33,097,897

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		28,8	381,76
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		1,4	147,61
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		17,1	126,95
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-3,6	500,38
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		14,9	974,18
Par	Tinancial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII			୮	
1		Г		Yes	No
•	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		<b>2</b> c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separated basis	sued			
За	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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

### OMB No 1545-0047

2011

Open to Public Inspection

### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

**Public Charity Status and Public Support** 

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

Employer identification number

AMERICAN WATER WORKS ASSOCIATION 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) A church, convention of churches, or association of churches 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 name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II ) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II 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 section 509(a)(2) If the organization received a written determination from the IRS that it 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? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) /:::\

(i) Name of supported organization	(ii) EIN	Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is th organizat col (i) lis your gove docume	e Ion In ted In Erning	(v) Did you not organizat col (i) of suppor	ion in your	(vi) Is the organizate col (i) organite in the U	(vii) A mount of support?	
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page <b>2</b>
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	<b>(b)(1)(A)(iv)</b> I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su			1		Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	(e) 2011	( <b>f</b> ) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	<b>Public Support.</b> Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	<b>endar year</b> (or fiscal yea	r beginning	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV ) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions )			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and <b>sto</b>	p here						<b>▶</b> □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and <b>stop here.</b> The org  33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and <b>stop here.</b> The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	<b>2010.</b> If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	<b>▶</b>
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization  Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	<b>►</b> □

**▶**□

Support Schedule for Organizations Described in IRC 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.)

50	ction A. Public Support							
	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	( <b>d)</b> 2010	<b>(e)</b> 20	11	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	822,118	181,291	100,786	44,195	:	144,949	1,293,339
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished	27,521,603	28,061,129	26,664,524	25,723,744	25,3	390,874	133,361,874
_	in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities							
3	that are not an unrelated trade or business under section 513 Tax revenues levied for the	1,239,208	1,581,519	927,117	860,522	9	967,272	5,575,638
	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							
6	charge <b>Total.</b> Add lines 1 through 5	29,582,929	29,823,939	27,692,427	26,628,461	26.5	503,095	140,230,851
	Amounts included on lines 1, 2, and 3 received from disqualified							
b	persons 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							140,230,851
Sa	from line 6 ) ction B. Total Support							
	ndar year (or fiscal year	( ) 2227			(1) 2010	(-) 20:		
	beginning in)	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	(e) 20:		(f) Total
9	A mounts from line 6	(a) 2007 29,582,929	<b>(b)</b> 2008 29,823,939	(c) 2009 27,692,427	26,628,461		503,095	140,230,851
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from			` '		26,5		
9	A mounts 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	29,582,929	29,823,939	27,692,427	26,628,461	26,5	503,095	140,230,851
9 10a	A mounts 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	29,582,929	29,823,939	27,692,427	26,628,461	26,5	503,095	140,230,851
9 10a b	A mounts 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	29,582,929 1,620,192	29,823,939 1,462,117	27,692,427 1,271,886	26,628,461 1,081,389	1,1	.06,362	140,230,851 6,541,946
9 10a b	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	29,582,929 1,620,192 1,620,192	29,823,939 1,462,117 1,462,117	27,692,427 1,271,886 1,271,886	26,628,461 1,081,389	1,1	.06,362	140,230,851 6,541,946 6,541,946
9 10a b c 11	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c,	29,582,929 1,620,192 1,620,192	29,823,939 1,462,117 1,462,117	27,692,427 1,271,886 1,271,886	26,628,461 1,081,389	26,5 1,1	.06,362	140,230,851 6,541,946 6,541,946
9 110a b c 111	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	29,582,929 1,620,192 1,620,192 414,846 31,617,967	29,823,939 1,462,117 1,462,117 589,241	27,692,427 1,271,886 1,271,886 383,667 29,347,980	26,628,461 1,081,389 1,081,389 416,482 28,126,332	26,5 1,1 1,1 27,5	.06,362 .06,362 .06,362 .090,942	140,230,851 6,541,946 6,541,946 2,185,721 148,958,518
9 110a b c 111 12	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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	29,582,929  1,620,192  1,620,192  414,846  31,617,967  for the organization	29,823,939 1,462,117 1,462,117 589,241 31,875,297 on's first, second,	27,692,427 1,271,886 1,271,886 383,667 29,347,980	26,628,461 1,081,389 1,081,389 416,482 28,126,332	26,5 1,1 1,1 27,5	.06,362 .06,362 .06,362 .090,942	140,230,851 6,541,946 6,541,946 2,185,721 148,958,518 zation,
9 110a b c 111 12 13 14	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is	29,582,929  1,620,192  1,620,192  414,846  31,617,967  for the organization	29,823,939  1,462,117  1,462,117  589,241  31,875,297  on's first, second,	27,692,427 1,271,886 1,271,886 383,667 29,347,980 , third, fourth, or f	26,628,461 1,081,389 1,081,389 416,482 28,126,332	26,5 1,1 1,1 27,5	.06,362 .06,362 .06,362 .090,942	140,230,851 6,541,946 6,541,946 2,185,721  148,958,518 zation,
9 110a b c 111 12	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	29,582,929  1,620,192  1,620,192  414,846  31,617,967  for the organization of the org	29,823,939  1,462,117  1,462,117  589,241  31,875,297  on's first, second,  ercentage (f) divided by line	27,692,427 1,271,886 1,271,886 383,667 29,347,980 , third, fourth, or f	26,628,461 1,081,389 1,081,389 416,482 28,126,332	26,5 1,1 3 27,5 501(c)(3	.06,362 .06,362 .06,362 .090,942	140,230,851 6,541,946 6,541,946 2,185,721 148,958,518 zation,
9 10a  b  c 11  12  13 14  See 15 16	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support (Add lines 9, 10c, 11 and 12)  First Five Years If the Form 990 is check this box and stop here  ction C. Computation of Pub Public Support Percentage for 201	29,582,929  1,620,192  1,620,192  414,846  31,617,967 for the organization of the organization of the second of th	29,823,939  1,462,117  1,462,117  589,241  31,875,297 on's first, second,  ercentage (f) divided by line art III, line 15	27,692,427  1,271,886  1,271,886  383,667  29,347,980 , third, fourth, or f	26,628,461 1,081,389 1,081,389 416,482 28,126,332	26,5 1,1 3 27,9 501(c)(3	.06,362 .06,362 .06,362 .090,942	140,230,851 6,541,946 6,541,946 2,185,721  148,958,518 zation,
9 110a b c 111 12 13 14 See 15	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pub Public Support Percentage from 20	29,582,929  1,620,192  1,620,192  414,846  31,617,967  for the organization of the organization of the second of t	29,823,939  1,462,117  1,462,117  589,241  31,875,297  on's first, second,  ercentage (f) divided by line lart III, line 15	27,692,427  1,271,886  1,271,886  383,667  29,347,980 , third, fourth, or f	26,628,461 1,081,389 1,081,389 416,482 28,126,332 ifth tax year as a	26,5 1,1 3 27,9 501(c)(3	.06,362 .06,362 .06,362 .090,942	140,230,851 6,541,946 6,541,946 2,185,721  148,958,518 zation,
9 10a  b  c 11  12  13 14  See 15 16  See 17	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here  ection C. Computation of Pub Public Support Percentage for 201 Public Support percentage from 20	29,582,929  1,620,192  1,620,192  414,846  31,617,967  for the organization of the org	29,823,939  1,462,117  1,462,117  589,241  31,875,297  on's first, second,  ercentage (f) divided by line eart III, line 15  ome Percentage olumn (f) divided by	27,692,427  1,271,886  1,271,886  383,667  29,347,980  third, fourth, or f	26,628,461 1,081,389 1,081,389 416,482 28,126,332 ifth tax year as a	26,5 1,1 3 27,5 501(c)(3	.06,362 .06,362 .06,362 .090,942	140,230,851 6,541,946 6,541,946 2,185,721  148,958,518 zation, 94 141 % 94 108 %
9 10a  b  c 11  12  13 14  See 15 16  See 17 18	A mounts 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 regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support (Add lines 9, 10c, 11 and 12)  First Five Years If the Form 990 is check this box and stop here  ction C. Computation of Pub Public Support Percentage for 201 Public support percentage from 20	1,620,192  1,620,192  1,620,192  414,846  31,617,967  for the organization divided to the column of	29,823,939  1,462,117  1,462,117  589,241  31,875,297  on's first, second,  ercentage (f) divided by line tart III, line 15  ome Percentage olumn (f) divided by A, Part III, line 1 d not check the bo	27,692,427  1,271,886  1,271,886  383,667  29,347,980  third, fourth, or f  13 column (f))  ge  y line 13 column 7 x on line 14, and	26,628,461 1,081,389 1,081,389 416,482 28,126,332 ifth tax year as a	26,5 1,1 27,9 501(c)(3 15 16 17 18 han 33 1/	06,362 06,362 090,942 ) organi:	140,230,851 6,541,946 6,541,946 2,185,721  148,958,518 zation, 94 141 % 94 108 % 4 392 % 4 456 %

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

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

# Software ID: Software Version:

**EIN:** 13-5660277

Name: AMERICAN WATER WORKS ASSOCIATION

### Form 990, Special Condition Description:

### **Special Condition Description**

( <b>A)</b> Name and Title	<b>(B)</b> A verage	(C) Position (check all that apply)						<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
	hours per week				/)	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
Jerald Stevens President	1 0	Х		Х				0	0	0
Charles F Anderson President Elect	1 0	Х						0	0	0
Joseph Mantua Immediate Past President	1 0	Х						0	0	0
R Lee Roberts Treasurer	1 0	Х		Х				0	0	0
Thomas Walters Board Member	1 0	Х						0	0	0
Tom Winkler Board Member	1 0	Х						0	0	0
Frank J Tantone Board Member	1 0	Х						0	0	0
Reid Campbell Board Member	1 0	Х						0	0	0
Mıchael Nolan Board Member	1 0	Х						0	0	0
Dawn White Board Member	1 0	Х						0	0	0
Charles Wulff Board Member	1 0	Х						0	0	0
Douglas G Brinkman Board Member	1 0	Х						0	0	0
Marcey Munoz Board Member	1 0	Х						0	0	0
Jeff Nash Board Member	1 0	Х						0	0	0
Terry Cole Board Member	1 0	Х						0	0	0
Jon Muraoka Board Member	1 0	Х						0	0	0
Kyla B Jacobsen Board Member	1 0	Х						0	0	0
Dan Hood Board Member	1 0	Х						0	0	0
David O Pitcher Board Member	1 0	Х						0	0	0
Carla Schumacher Board Member	1 0	Х						0	0	0
Gerald Blain Board Member	1 0	Х						0	0	0
Bernard Maloy Board Member	1 0	Х						0	0	0
Rodolfo Gomez Acosta Board Member	1 0	Х						0	0	0
David Koch Board Member	1 0	Х						0	0	0
William Spain Board Member	1 0	Х						0	0	0

independ	ient C	ontr	act	ors	<u> </u>				
(B) Average hours		tion (	che	/)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
1 0	Х						0	0	0
10	Х						0	0	0
10	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
10	Х						0	0	0
1 0	Х						0	0	0
10	Х						0	0	0
1 0	Х						0	0	0
10	X						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
	X						0	0	0
1 0	Х						0	0	0
1 0	Х						0	0	0
	(B) Average hours per week  1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1	(B) Average hours per week         Post of light of the start of	(B) Average hours per week         Constitutional Institutional Inst	(B) Average hours per week         Position (che that apply or director)           10 X         Individual trustee           10 X         Institutional Trustee	C	Average hours per week   Position (check all that apply)	CC	C	Company   Comp

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion (	che	′)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
Marie Pearthree Board Member	1 0	Х						0	0	0	
Rosemary Smud Board Member	1 0	Х						0	0	0	
Craig Woolard Board Member	1 0	Х						0	0	0	
J Paul Blake Board Member	1 0	Х						0	0	0	
Robert C Cheng PhD Board Member	1 0	Х						0	0	0	
Andrew DeGraca Board Member	1 0	Х						0	0	0	
David E Rager Board Member	1 0	Х						0	0	0	
Roy L Wolfe Board Member	1 0	X						0	0	0	
Daniel White Board Member	1 0	Х						0	0	0	
Bruce Buchanan Board Member	1 0	X						0	0	0	
Debra Kaye Board Member	1 0	Х						0	0	0	
George B Rest Board Member	1 0	Х						0	0	0	
Larry Ruffin Board Member	1 0	Х						0	0	0	
Elson C Gushiken Board Member	1 0	Х						0	0	0	
John Donahue Board Member	1 0	X						0	0	0	
Rıck Wheadon Board Member	1 0	Х						0	0	0	
David M Schultz Board Member	1 0	Х						0	0	0	
John Camden Board Member	1 0	Х						0	0	0	
Brian Bisson Board Member	1 0	Х						0	0	0	
Don Broussard Board Member	1 0	Х						0	0	0	
Raymond Bilevicius Board Member	1 0	Х						0	0	0	
Daniel Duchniak Board Member	1 0	Х						0	0	0	
Joel Neulight Board Member	1 0	Х						0	0	0	
John Batten Board Member	1 0	Х						0	0	0	
Joe Jacangelo Board Member	1 0	Х						0	0	0	

Compensated Employees, and	and Independent Contractors										
(A) Name and Title	(B) Average hours		<b>(C)</b> Position (check all that apply)					(D) Reportable compensation	<b>(E)</b> Reportable compensation	(F) Estimated amount of other compensation	
	per week	Individual trustaa or diisctor	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	from the organization and related organizations	
David LaFrance Executive Director	40 0			Х				240,103	0	43,693	
Paula MacIlwaine Deputy Executive Director	40 0			х				216,176	0	43,256	
Thomas Curtis Deputy Executive Director- DC	40 0			х				198,712	0	33,930	
KEVIN MANN CHIEF FINANCIAL OFFICER	40 0			х				109,577	0	25,497	
LYNN LASKEY CHIEF FINANCIAL OFFICER	40 0			х				81,254	0	8,481	
Robert Huff Dırector of Info Technology	40 0					Х		137,451	0	20,296	
Elizabeth Haigh Director of Publishing	40 0					Х		131,416	0	17,557	
James Roberson Director of Federal Relations	40 0					Х		123,766	0	15,408	
Roy Martinez Dir of Engineering & Tech Svcs	40 0					Х		115,607	0	13,363	
Tanıa Haskıns Director of Administration	40 0					Х		112,986	0	14,890	

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DLN: 93493223010252

OMB No 1545-0047

### 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 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

- ◆ 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

exempt funtion activities

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

	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, I oction 501(c)(4), (5), or (6) organizations Complete Part III	ine 35c (Pro	xy Ta	x), then	
Na	me of the organization ERICAN WATER WORKS ASSOCIATION	Employer 10		cation numbe	er
Par	t I-A Complete if the organization is exempt under section 501(c) or is a		•	ganizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities on be in opposition to candidates for public office in Part IV	ehalf of or			
2	Political expenditures	<b>•</b>	\$_		
3	Volunteer hours		-		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	<b>•</b>	\$_		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	<b>•</b>	\$_		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No
4a	Was a correction made?			☐ Yes	┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the organization is exempt under section 501(c) except	section 5	01(c	(3).	

Did the filing organization file Form 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

(a) Name	( <b>b)</b> Address	<b>(c)</b> EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

section 4911 tax for this year?

┌ Yes ┌ No

Sc	hedule C	(For	rm 990 or 990-EZ) 2011 Pag
P	art II-	<b>1</b>	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election
			under section 501(h)).
A	Check	$\neg$	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, E
			expenses, and share of excess lobbying expenditures)
В	Check	$\Box$	if the filing organization checked box A and "limited control" provisions apply

<u>B</u>	Check   If the filing organization checked bo	x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	16,748	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	131,968	
c	Total lobbying expenditures (add lines 1a and 1i	148,716		
d	Other exempt purpose expenditures		27,285,438	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	27,434,154	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		
j	If there is an amount other than zero on either li	ne 1h or line 1ı, did the organization file Form 472	20 reporting	□ Ves □ No

### 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendi	tures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) Total
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
ь 	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
_с	Total lobbying expenditures	150,189	150,650	125,445	148,716	575,000
d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	26,191	16,763	19,302	16,748	79,004

_	edule C (Form 990 or 990-EZ) 2011				Page <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768 
		(	a)	(	b)
		Yes	No	Am	ount
1	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				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i		_		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
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				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	)(5), d	or sect	tion
			_	Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier | Return Reference | Explanation

DLN: 93493223010252

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Inspection

Internal Revenue Service Name of the organization

Assets included in Form 990, Part X

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

► Attach to Form 990. ► See separate instructions. **Employer identification number** AMERICAN WATER WORKS ASSOCIATION

				660277
Pai	organizations Maintaining Donor A organization answered "Yes" to Form 9		ar Funds o	or Accounts. Complete if the
	organization answered tes to form 9	(a) Donor advised funds	(	<b>b)</b> Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (durıng year)			
ŀ	Aggregate value at end of year			
	Did the organization inform all donors and donor adv funds are the organization's property, subject to the			sed <b>Yes No</b>
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the be conferring impermissible private benefit			
Par	t III Conservation Easements. Complete	ıf the organızatıon answered "Ye	es" to Form	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat  Preservation of open space	tion or pleasure) Preservation Preservation	of a certified	cally importantly land area I historic structure
2	Complete lines 2a-2d if the organization held a qua easement on the last day of the tax year	lified conservation contribution in the	form of a co	nservation
				Held at the End of the Year
a	Total number of conservation easements		2a	
	Total acreage restricted by conservation easement		2b	
	Number of conservation easements on a certified hi	. ,	2c	
	Number of conservation easements included in (c) a		2d	
	Number of conservation easements modified, transf	erred, released, extinguished, or term	ninated by th	e organization during
	the taxable year ▶			
ŀ	Number of states where property subject to conserv	vation easement is located ▶		
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds		, handling of	violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation e	asements du	iring the year 🕨
7	A mount of expenses incurred in monitoring, inspect			
3	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements o	ofsection	┌ Yes ┌ No
	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's fina		
art	Organizations Maintaining Collectic Complete if the organization answered			ner Similar Assets.
1a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets helprovide, in Part XIV, the text of the footnote to its fi	d for public exhibition, education or re	search in fur	
b	If the organization elected, as permitted under SFA historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or resea		
	(i) Revenues included in Form 990, Part VIII, line	1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>►</b> \$
	If the organization received or held works of art, his following amounts required to be reported under SFA		ets for financ	
а	Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$

Cat No 52283D

Schedule D (Form 990) 2011

Sched	dule D (Form 990) 2011										Page 2
Part	Organizations Maintaining Co	llections of Art,	His	torical T	reası	ıres, or Ot	he	r Similar	Asse	ts (co	ntinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	ie following	that a	e a significar	nt u	se of its co	llection	l	
а	Public exhibition		d	┌ Loar	orexc	hange progra	ms				
b	Scholarly research		e	┌ Othe	er						
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIV	ollections and explai	n hov	v they furth	er the	organızatıon's	sex	empt purpo	se in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			,				ılar	Γ.	Yes	┌ No
Par	Part IV, line 9, or reported an ar					n answered	"Y	es" to For	m 990	,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermed	dıary	for contrib	utions	or other asse	ets r	not	Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	V and complete the f	ollow	ıng table							
									Amou	nt	
С	Beginning balance					1	1c				
d	Additions during the year					<u> </u>	Ld				
e	Distributions during the year					<u> </u>	Le				
f	Ending balance					1	1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/									
Par	t V Endowment Funds. Complete	ıf the organızatıon	ans	wered "Y	es" to	Form 990, I	Par	t IV, line :	10.		
		(a)Current Year	(b)	Prior Year	+ ` _	vo Years Back	<del>  `                                   </del>	Three Years E		<b>)</b> Four Y	ears Bacl
.a	Beginning of year balance	1,775,610		1,728,00	_	1,605,606		1,541	·		
	Contributions	37,803		41,34	_	94,269	_		,349		
С	Investment earnings or losses	45,736		53,11	_	64,898			,278		
	Grants or scholarships	43,877		46,85	6	36,767		47	,617		
	Other expenditures for facilities and programs										
	Administrative expenses	4.045.070		4 775 64		4 700 005		4.505			
g	End of year balance	1,815,272		1,775,61	0	1,728,006		1,605	,606		
2	Provide the estimated percentage of the year		s								
а	Board designated or quasi-endowment 🕨	2 760 %									
b	Permanent endowment ► 69 940 %										
c	Term endowment ► 27 300 %										
3a	Are there endowment funds not in the posse	ssion of the organiza	tion t	that are he	ld and a	admınıstered	for	the			
	organization by							Г	2-(:)	Yes	No
	(i) unrelated organizations				•		•		3a(i)		No No
b	(ii) related organizations		on S	chedule P				· • • [	3a(ii) 3b		l NO
4	Describe in Part XIV the intended uses of the				•		•				<u> </u>
Pari	VI Land, Buildings, and Equipme				10.						
	Description of property		,	(a) Cost of basis (inve	or other	(b)Cost or other		(c) Accumu depreciat		( <b>d</b> ) Bo	ok value
1a	and					252,4	423				252,423
	Buildings					9,826,9	-	3.77	77,237		6,049,70
	easehold improvements					209,8	_		04,817		4,99
	quipment					1,642,4	-		36,321		156,16:
	· ·					6,088,7	_	· · · · · · · · · · · · · · · · · · ·	34,849		1,753,904
	Add lines 1a-1e (Column (d) should equal F			l line 10(c)	.) .	1		▶	. 1,515		8,217,184
	The state of the s	222, rais Ny colum		, 20(0)	, · ·	· · ·	•	Schedu			

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of the of year market value
(2)Closely-held equity interests		
(3)Other		_
(A) CERTIFICATE OF DEPOSITS	8,585,000	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	8,585,000	
Part VIII Investments—Program Related. Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	<b>•</b>	
Part IX Other Assets. See Form 990, Part X, I		
(a) Descri	ption	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. See Form 990, Part		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
PENSION LIABILITY	6,063,046	
	-	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	5.052.045	
2. Fin 49 (ASC 740) Ecotnote. In Part VIV. provide the tea	, ,	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	28,881,765
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	27,434,154
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,447,611
4	Net unrealized gains (losses) on investments	4	-5,820
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	-3,594,565
9	Total adjustments (net) Add lines 4 - 8	9	-3,600,385
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,152,774
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	26,635,185
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines <b>2a</b> through <b>2d</b>	2e	-2,246,580
3	Subtract line <b>2e</b> from line <b>1</b>	3	28,881,765
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)	4-	
с 5	Add lines <b>4a</b> and <b>4b</b>	4c 5	28,881,765
	<b>XIII</b> Reconciliation of Expenses per Audited Financial Statements With Expenses		<u> </u>
1	Total expenses and losses per audited financial	<u>                                    </u>	28,787,959
	statements	1	, ,
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV)		
е	Add lines <b>2a</b> through <b>2d</b>	2e	1,353,805
3	Subtract line <b>2e</b> from line <b>1</b>	3	27,434,154
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		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	27,434,154

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

#### 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 IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
PART V, LINE 4	DESCRIBE THE INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS	THE ORGANIZATION HAS DONOR RESTRICTED ENDOWMENT FUNDS ESTABLISHED FOR THE PURPOSES OF PROVIDING INCOME TO AWARDS AND SCHOLARSHIPS THE ASSOCIATION RECEIVES CONTRIBUTIONS IN SUPPORT OF THE FOLLOWING AWARDS (1) WOLMAN - AN AWARD OF EXCELLENCE TO RECOGNIZE THOSE WHOSE CAREERS IN THE WATER WORKS INDUSTRY EXEMPLIFY VISION, CREATIVITY, AND EXCELLENT PROFESSIONAL PERFORMANCE CHARACTERISTIC OF ABEL WOLMAN'S LONG AND PRODUCTIVE CAREER (2) LARSON - SCHOLARSHIPS HONOR THE MEMORY OF DR LARSON BY PROVIDING SUPPORT AND ENCOURAGEMENT TO OUTSTANDING GRADUATE STUDENTS PREPARING FOR CAREERS IN THE FIELDS OF SCIENCE OR ENGINEERING TO WHICH DR LARSON MADE SIGNIFICANT CONTRIBUTIONS
Part XI, Line 8	Other Changes to Net Assets	Change in Minimum Pension Liability (3,594,565)
Part XII, Line 2d	Reconciliation of Revenue	Cost of Goods Sold Reclassed From Revenue and Netted Against Expense 1,350,305 Change in Minimum Pension Liability (3,594,565) Eliminate Conference Contribution to Internal Scholarship fund 3,500 Total (2,240,760)
Part XIII, Line 2d	Reconciliation of Expense	Cost of Goods Sold Reclassed From Revenue and Netted Against Expense 1,350,305 Eliminate Conference Contribution to Internal Scholarship fund 3,500 Total 1,353,805
Part X, Question 2	Uncertain Tax Positions	Management has evaluated their income tax positions under the guidance included in ASC 740 Based on their review, management has not identified any material uncertain tax positions to be recorded or disclosed in the financial statements

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493223010252

OMB No 1545-0047

SCHEDULE F (Form 990)

### Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection** 

Department of the Treasury Internal Revenue Service

to Part I

c Totals (add lines 3a and 3b)

	ne of the organization ERICAN WATER WORKS ASSOCI	IATION				Employer identif	fication number
A IYI E	ERICAN WATER WORKS ASSOCI	IATION				13-5660277	
Pa	General Information "Yes" to Form 990, Pa			the United States.	Complete		tion answered
1	For grantmakers. Does the	·		ds to substantiate the	amount	of the grants o	r
_	assistance, the grantees' eli	_				<del>-</del>	
	the grants or assistance? .		=				✓ Yes
2	<b>For grantmakers.</b> Describe in Pa United States	art V the organ	ızatıon's proced	ures for monitoring the u	se of grant	t funds outside the	2
3	Activites per Region (Use Part	V ıf addıtıonal	space is needed	1)	_		
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees or agents in region o independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	ity listed in (d) is a service, describe cific type of ie(s) in region	(f) Total expenditures for region/investments in region
	North America	0	0	Grantmaking	OPERATI	NG SUPPORT	293,548
	East Asia and the Pacific	0	0	Program Services	CONFERE	NCES/TRAVEL	54,178
	Europe (Including Iceland and Greenland)	0	0	Program Services	CONFERE	ENCES/TRAVEL	13,100
	North America	0	0	Program Services	CONFERE	NCES/TRAVEL	42,984
	South Asia	0	0	Program Services	CONFERE	ENCES/TRAVEL	10,500
	Sub-total	0	C				414,316

414,316

(a) Name of

Use Part V if additional space is needed.

(c) Region

(d) Purpose of

(b) IRS code

Part II

1

(i) Method of

(a) Name of organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other
		North America	O per Support	30,747	check			
		North America	O per Support	37,003	check			
		North America	O per Support	15,000	check			
		North America	O per Support	136,269	check			
		North America	O per Support	17,877	check			
		North America	O per Support	56,652	check			
-								
Enter total nu tax-exempt b	imber of recipions the IRS, or f	ent organizations or which the grar	listed above that are itee or counsel has p	recognized as chari rovided a section 50:	ties by the foreign co 1(c)(3) equivalency	ountry, recognized letter	as . ►	6
•	•	_	entities					0
		-						F (Form 990) 2011

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . . . . . .

(e) A mount of

(f) Manner of

(g) A mount of

of non-cash

(h) Description

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	( <b>f</b> ) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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						1	dula E (Earre 000) 2011

### Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	굣	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Г	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	[ত	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	া	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	া	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ন	Νo

Schedule F (Form 990) 2011

Part V	Supplemental Informat	ion

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

information.		
Identifier	ReturnReference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS OUTSIDE THE U S	PART 1, LINE 2	MEMBER SECTION ALLOTMENTS THE ASSOCIATION'S BOARD OF DIRECTORS APPROVES ANNUAL ALLOTMENTS EACH YEAR PAYABLE TO ITS MEMBER SECTIONS THIS ALLOTMENT PROVIDES OPERATIONAL SUPPORT TO THE MEMBER SECTIONS FOR THE CALENDAR YEAR
		Schedule F (Form 990) 2011

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Schedule I

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

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

OMB No 1545-0047

DLN: 93493223010252

**Inspection** 

Department of the Treasury Internal Revenue Service Name of the organization

(Form 990)

AMERICAN WATER WORKS ASSOCIATION

Employer identification number 13-5660277

Part II Grants and Other A Form 990, Part IV, line Part IV and Schedule	ssistance to Gove e 21 for any recip	vernments and O	rganizations in the nore than \$5,000. Che	United States. Con eck this box if no one	recipient receive	ed more than \$5,000	. Use
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grader or assistance
See Additional Data Table							

Part III	Grants and Other Assistance to Individuals in the United States. C	Complete if the organization	answered "Yes"	to Form 990,	Part IV, line	e 22.
	Use Schedule I-1 (Form 990) if additional space is needed.					

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	<b>(f)</b> Description of non-cash assistance
(1) AWARDS (WOLMAN)	3	31,877			
(2) SCHOLARSHIPS (LARSON)	2	12,000			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURES FOR	PART I, LINE 2	FUNDS ARE DISTRIBUTED AS AWARDS AND SCHOLARSHIPS TO RECIPIENTS SCHOLARSHIP FUNDS SUPPORT
MONITORING THE USE		EDUCATION FEES IN REGARDS TO THE WOLMAN AWARDS - MID-WAY THROUGH THE YEAR OF SUPPORT, AWWA
OF GRANT FUNDS IN		REQUESTS FROM THE STUDENT A LETTER STATING THE PROGRESS TOWARDS THEIR DEGREE TO INCLUDE AN
THE U S		ABSTRACT OF RESEARCH, AND ALSO A LETTER FROM THEIR ADVISOR WITH SIMILAR INFORMATION MEMBER
		SECTION ALLOTMENTS THE ASSOCIATION'S BOARD OF DIRECTORS APPROVES ANNUAL ALLOTMENTS EACH
		YEAR PAYABLE TO ITS MEMBER SECTIONS THIS ALLOTMENT PROVIDES OPERATIONAL SUPPORT TO THE
		MEMBER SECTIONS FOR THE CALENDAR YEAR CONTRIBUTIONS PAYABLE TO AWWA RESEARCH FOUNDATION
		(AWWARF) AND WATER FOR PEOPLE AWWA MAINTAINS A PROGRAM WHEREBY A VOLUNTARY CONTRIBUTION IS
		MADE TO AWWARF AND WATER FOR PEOPLE IN SUPPORT OF THEIR ORGANIZATIONAL ACTIVITIES

Software ID: Software Version:

**EIN:** 13-5660277

Name: AMERICAN WATER WORKS ASSOCIATION

### Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Form 990,Schedule 1	., r arc 11, Gr	unes una ocn	Assistant	To dovern	Inches and c	y garnzacions	III the officed St
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
WATER RESEARCH FOUNDATION6666 W Quincy Street Denver,CO 80235	13- 6211384	501(C)(3)	25,000				O perating Support
WATER FOR PEOPLE 6666 W Quincy Street Denver, CO 80235	84- 1166148	501(C)(3)	56,125				O perating Support
ALASKA22457 Hilltop Cir Chugiak, AK 995675708	92- 0104130	501(C)(3)	15,000				O perating Support
ALABAMA - MISSISSIPPI517 Planters Dr Pearl,MS 392087028	23- 7026150	501(C)(3)	34,332				O perating Support
ARIZONA1042 Wllw Crk Rd A101-510 Prsctt, AZ 86301	23- 7026151	501(C)(3)	30,529				O perating Support
CALIFORNIA- NEVADA10574 Acacia St D6 Rancho Ccmnga, CA 91730	94- 6114828	501(C)(3)	228,772				O perating Support
CHESAPEAKE1001 LILY SPRGS RD GLENVILLE,PA 17329	52- 1182688	501(C)(3)	27,153				O perating Support
CONNECTICUT72 ROCKLAND AVE WATERBURY,CT 06708	06- 6100180	501(C)(3)	21,865				O perating Support
FLORIDA1300 9TH ST BLD B-124 SAINT CLOUD,FL 34769	23- 7027079	501(C)(3)	85,259				O perating Support
GEORGIA1120 SANCTUARY PKWY ALPHARETTA,GA 30009	58- 1815129	501(C)(3)	42,152				O perating Support
HAWAII2153 N KING ST SUITE 200 Honolulu,HI 96819	99- 0165772	501(C)(3)	15,000				O perating Support
ILLINOIS545 S Randall Rd St Charles, IL 601741533	23- 7026152	501(C)(3)	59,273				O perating Support
INDIANA8365 Keystone Xng St 300 Indnpls,IN 46240	23- 7026153	501(C)(3)	39,773				O perating Support
INTERMOUNTAIN 3430 Danish Rd Sandy,UT 840932139	23- 7026154	501(C)(3)	19,270				O perating Support
iowa100 court ave 203 des moines,IA 50309	23- 7026138	501(C)(3)	19,998				O perating Support
KANSASPO BOX 3046 SALINA,KS 67402	23- 7026155	501(C)(3)					O perating Support
KENTUCKY- TENNESSEEPO Box 22788 Louisville, KY 402520788	23- 7026156	501(C)(3)	50,126				O perating Support
MICHIGANPO Box 609 Grand Ledge, MI 488370609	38- 6073280	501(C)(3)	46,842				O perating Support
MINNESOTA701 XENIA AVE 600 MINNEAPOLIS, MN 55416	23- 7026161	501(C)(3)	30,088				O perating Support
MISSOURI2717 SW MONARCH DR LEES SUMMIT, MO 64082	23- 7026157	501(C)(3)	25,887				O perating Support

### Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Form 990,Schedule	I, Part II, G	rants and Otl	her Assistan	ce to Govern	ments and C	Organizations	in the United S
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTANAPO Box 582 Seeley Lake, MT 598680582	23- 7026158	501(C)(3)	15,000				O perating Support
NEBRASKAPO Box 95026 Lincoln,NE 68509	23- 7026159	501(C)(3)	15,000				O perating Support
NEW ENGLAND125 Hopping Brook Rd Holliston, MA 01746	04- 1666330	501(C)(3)	57,660				O perating Support
NEW JERSEY207 DEPEW ST DUMONT,NJ 07628	22- 6049378	501(C)(3)	38,810				O perating Support
NEW YORK614 7TH NORTH ST LIVERPOOL, NY 13088	11- 6026214	501(C)(3)	65,940				O perating Support
NORTH CAROLINA 3725 National Dr Ste 217 Raleigh, NC 27612	56- 6045934	501(C)(3)	43,230				O perating Support
NORTH DAKOTA918 E Divide Ave Bismarck, ND 585011947	44- 0420756	501(C)(3)	15,000				O perating Support
OHIO3972 Indianola Ave Columbus, OH 432143158	23- 7026162	501(C)(3)	72,360				O perating Support
PACIFIC NORTHWESTPO Box 872467 VANCOUVER, OR 98687	23- 7026163	501(C)(3)	84,684				O perating Support
PENNSYLVANIA1309 Bridge St New Cumberland, PA 17070	23- 7026164	501(C)(3)	63,466				O perating Support
PUERTO RICOPO BOX 1218 CATANO,PR 00963	66- 0343550	501(C)(3)	15,000				O perating Support
ROCKY MOUNTAIN 1685 S COLORADO UNIT S-3 Denver,CO 80222	23- 7026165	501(C)(3)	66,578				O perating Support
SOUTH CAROLINA 130 Gibson Rd Lexington, SC 290723429	23- 7052846	501(C)(3)	28,646				O perating Support
SOUTH DAKOTA 23343 479TH AVE EGAN,SD 57024	23- 7026166	501(C)(3)	15,000				O perating Support
SOUTHWEST2820 N Pierce St Little Rock, AR 722072824	23- 7026167	501(C)(3)	38,679				O perating Support
TEXASPO BOX 80510 Austin,TX 78708	75- 1388778	501(C)(3)	104,484				O perating Support
VIRGINIAPO Box 55420 Virginia Beach,VA 234719420	23- 7026168	501(C)(3)	53,873				O perating Support
WEST VIRIGINIAPO Box 1355 Saint Albans, WV 251771355	31- 0988950	501(C)(3)	15,000				O perating Support
WISCONSINPO BOX 635 Oak Creek,WI 531540635	23- 7026169	501(C)(3)	28,902				O perating Support

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DLN: 93493223010252

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

**Compensation Information** 

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization	Employer identification number
AMERICAN WATER WORKS ASSOCIATION	
	42.5662277

13-5660277 **Questions Regarding Compensation** Yes Νo 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 Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 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 Compensation committee ✓ Written employment contract 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 Receive a severance payment or change-of-control payment? 4a Nο 4h Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo **4**c Participate in, or receive payment from, an equity-based compensation arrangement? Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only 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 The organization? **5**a Νo 5b Any related organization? Νo 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 The organization? Νo 6b Any related organization? Νo 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 payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Yes Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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

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

			<u> </u>					
(A) Name	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) David LaFrance (i)	239,113	0	990 0	37,050 0	6,643 0	283,796 0	0	
(2) Paula MacIlwaine (i)	178,696 0	13,000 0	24,480 0	35,183 0	8,073 0	259,432 0	13,000 0	
(3) Thomas Curtis (II)	185,732 0	11,000 0	1,980 0	32,970 0	960 0	232,642	11,000 0	
(4) Robert Huff (I)	136,106 0	0	1,345 0	19,906 0	390 0	157,747 0	0	

Schedule J (Form 990) 2011

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
		First class or charter travel is offered to Officers of the Association if the trip is beyond Continental North America and any single segment exceeds seven hours. In 2011, AWWA did not provide or reimburse any officers for first class or charter travel.
	· '	Performance bonuses were paid to the highest compensated employees and executive bonuses were paid to the officers. The compensation committee determined the amount of executive bonuses paid to the officers.

Schedule J (Form 990) 2011

#### DLN: 93493223010252

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

**SCHEDULE 0** 

(Form 990 or 990-EZ)

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

Name of the organization AMERICAN WATER WORKS ASSOCIATION **Employer identification number** 

13-5660277

ldentifier	Return Reference	Explanation
Description of Other Program Services	FORM 990, PART III, QUESTION 4D	Committees - Includes development and implementation of information projects, media relations, inquiries, and the National Drinking Water Week campaign
Material Differences in Voting Rights	FORM 990, PART VI, QUESTION 1A	In the case of elections for the President-Elect, Directors-at-Large, and Vice Presidents, only the 47 Section Directors and Directors-at-large may vote
Classes of Members	FORM 990, PART VI, QUESTION 6	Members of the organization include individual members, service provider members and utility members
How Org ensures local unit's activities are consistent with its own	FORM 990, PART VI, QUESTION 10B	An Affiliation Agreement has been developed and rolled out to Sections for signature. A majority of Sections have signed this agreement.
PROCESS TO REVIEW THE FORM 990	FORM 990, PART VI, QUESTION 11A	THE FORM 990 IS PREPARED BY A THIRD PARTY PREPAPER AND IS REVIEWED BY THE AUDIT COMMITTEE. BOARD MEMBERS ARE NOTIFIED BY E-MAIL THAT THE FORM 990 IS AVAILABLE FOR REVIEW ON-LINE BEFORE BEING FILED WITH THE IRS
PROCESS FOR MONITORING COMPLIANCE WITH CONFLICT OF INTEREST POLICY	FORM 990, PART VI, QUESTION 12C	OFFICERS AND DIRECTORS ANNUALLY COMPLETE A DISCLOSURE FORM CONFLICTS WITH REGARDS TO CONTRACTS OR TRANSACTIONS ARE DISCLOSED PRIOR TO ANY MEETING WHERE ACTION IS REQUIRED THESE DISCLOSURES ARE REFLECTED IN THE MEETING MINUTES OFFICERS/DIRECTORS WITH CONFLICTS ARE NOT ALLOWED TO PARTICIPATE IN OR DISCUSS THE MATTER AND ARE NOT ALLOWED TO VOTE. CONFLICTS ARE DEALT WITH AT THE BOARD AND MANAGEMENT LEVEL.
REVIEW OF CEO OR TOP MGMT OFFICIAL COMPENSATION	FORM 990, PART VI, QUESTION 15A & 15B	The current Executive Director started in May 2010. A compensation (salary and bonus) review was conducted for 2011 by the compensation committee. For the payment of bonuses for the Deputy EDs and CFO, the review was conducted in 2011 by the compensation committee and approved by the Executive committee. In addition, bonus amounts are generally determined by individual employment contract provisions. In determining the starting compensation for the Executive Director, the AWWA President (chair of Compensation Committee) was provided (1) executive salary information including survey comparability data and (2) executive salary information from the form 990s of other associations to use as resources to determine starting salary and for discussion with the Compensation Committee. In determining the Executive Director's bonus for 2011, the compensation committee was provided with comparable market data and benchmarking information. In addition, the ED's performance was reviewed by the Compensation Committee in relation to predetermined performance goals and objectives, prior to awarding the bonus. The executive committee ratified the decision of the compensation committee.
Governing Documents, Conflict of Interest Policy and Financial Statements	FORM 990, PART VI, QUESTION 19	AWWA's governing documents, finacial statements, and conflict of interest policy are made available to the public upon request for a valid buiness purpose
Members	Form 990, Part VI, Question 7a	Members appoint the Section Director of their respective Section Section Directors are voting members of the Board of Directors
OTHER CHANGES TO NET ASSETS	PART XI LINE 5	Unrealized Loss (5,820) Change in Minimum Pension Liability (3,594,565) Total (3,600,385)
Document Retention Policy	Part VI Question 14	AWWA has a written document retention policy but not a written document destruction policy

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### 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.

OMB No 1545-0047

DLN: 93493223010252

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

Internal Revenue 9	Gervice					Tt	nspectio	n
Name of the AMERICAN WA	e organization TER WORKS ASSOCIATION				Employer i	dentification number		
					13-56602	77		
Part I	Identification of Disregarded Entities (Comp	lete if the organizati	on answered "Yes'	' on Form 990, P	art IV, line 33.)			
	(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II	Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	izations (Complete the tax year.)	ıf the organızatıor	n answered "Yes"	' on Form 990, F	Part IV, line 34 becau	ise it had	one
	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	domicile (state   Exempt Code section		s Direct controlling entity	(g) Section 512(b)(1: controlled organization	
							Yes	No
							+	+
For Privacy	Act and Paperwork Reduction Act Notice, see the Instruct	ions for Form 990.	Cat No 50	0135Y	·	Schedule R	Form 990	2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, lin	ie 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

nanaging (k)	es No				
(j) General d managin partner?	Yes N				
(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)					
rtionate	No		<u>.                                    </u>		-
(h) Dispropr allocatio	Yes				
(g) Share of end-of- year assets					
<b>(f)</b> Share of total Income					·
(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)					
i '					
(c) Legal domicile (state or foreign country)					
Philitary activity					
<b>(a)</b> Name, address, and EIN of related organization					

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership
(1) AWWA ASSOCIATION SERVICES INC 6666 WEST QUINCY AVENUE DENVER, CO 80235 84-1265561	INACTIVE	DE	NA	C Corp			100 000 %

Part	<del></del>	s" on Form 990, Par	T IV, line 34, 35, 3	35A, Or 36.)	Yes	No
	lote. Complete line 1 if any entity is listed in Parts II, III or IV		TT TV2		res	NO
	ing the tax year, did the orgranization engage in any of the following transactions with one or more related organ	nizations listed in Parts	S 11-1V /	4-		NI-
	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a 1b	1	No No
	Gift, grant, or capital contribution to related organization(s)			1b 1c		No
	Gift, grant, or capital contribution from related organization(s)			1d		No
	oans or loan guarantees to or for related organization(s)			1u 1e	_	No
e L	oans or loan guarantees by related organization(s).			16	+	110
f S	sale of assets to related organization(s)			1f		No
	Purchase of assets from related organization(s)			1g		No
	exchange of assets with related organization(s)			1h		No
	ease of facilities, equipment, or other assets to related organization(s)			1i		No
	substantial of equipment, or earlier about to related organization (e)					
j L	ease of facilities, equipment, or other assets from related organization(s)			1 <u>j</u>		No
_	Performance of services or membership or fundraising solicitations for related organization(s)			1k		No
	erformance of services or membership or fundraising solicitations by related organization(s)			11		No
m S	sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1m	,	No
n S	Sharing of paid employees with related organization(s)			1n		No
<b>o</b> F	Reimbursement paid to related organization(s) for expenses			10		No
p F	Reimbursement paid by related organization(s) for expenses			<b>1</b> p		No
q	Other transfer of cash or property to related organization(s)			<b>1</b> q		No
r C	ther transfer of cash or property from related organization(s)			1r		No
<b>2</b> I	f the answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	ncluding covered relati	onships and transact	cion thresholds		
	(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved	(d) Method of determing Involved		unt
1) 2)						
2)						
3)						
4)						
5)						
6)		1		I		

#### Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on 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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Disproprtionate alloc		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	<b>j)</b> eral or aging ener?	<b>(k)</b> Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

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### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

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