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#### 990 Form

**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

Department of the Treasury.

Open to Public

Intern	al Revenu	ie Setvice	The organization may have to use a copy of this return to satisfy state rep	orting red	uiremen	its	Inspection	
A I	A For the 2011 calendar year, or tax year beginning , 2011, and ending , 20							
В	Check if a	k if applicable C Name of organization NEW PROVIDENCE WATER ASSOCIATION D Emp						
	Address cl	hange	Doing Business As NEW PROVIDENCE WATER ASSOCIATION				64-0537446	
<u> </u>	Name cha	nge	Number and street (or P O box if mail is not delivered to street address)	Room/suit	<del>0</del>	E	Telephone number	
Πı	nitial retui	m	P O BOX 542				(601) 267-8691	
$\overline{\sqcap}$	Ferminate	d	City or town, state or country, and ZIP + 4	·			225,771	
Ħ,	Amended	return	Carthage, United States 39051			G	Gross receipts \$	
=		n pending	F Name and address of principal officer CHRIS BILBRO					
			2030 RED DOG ROAD, CARTHAGE, MS 39051	H(a)	s this a gro affiliates?	up retur	m for Yes ∑X No	
1 1	rax-exem	pt status	501(c)(3) <b>X</b> 501(c) ( <b>12</b> ) <b>∢</b> (insert no )	Н(ь)	Are all affilia	ates incl	luded? Yes No	
<u>, , , , , , , , , , , , , , , , , , , </u>	Website	▶ N/A		H(c) (	f "No," attad Group exem	ch a list iption n	(see instructions) umber	
K F	orm of or	rganization	Corporation Trust X Association Other L Year of formation 1	972	M State o	of legal	domicile MS	
Pa	rt I	Summar			-			
			ibe the organization's mission or most significant activities RURAL WATER ASSO	CIATIO	N			
C	2	•		-				
30 A	}					-		
¦ 😂	•							
<del>اهم</del> ۷	2	Check this b	ox ▶ ☐ if the organization discontinued its operations or disposed of more than 25%	of its ne	t assets			
	3		oting members of the governing body (Part VI, line 1a)			3	4	
՝ ≨	4		ndependent voting members of the governing body (Part VI, line 1b)		-	4	0	
e n² s ∉c	5		r of individuals employed in calendar year 2011 (Part V, line 2a)		<u> </u>	5	2	
الما م	1 6		r of volunteers (estimate if necessary)		<u> </u>	6	<del></del>	
<sup>-</sup> Z	70		ed business revenue from Part VIII, column (C), line 12			7a		
4	7a					7b		
	<u>}                                    </u>	ivet unrelate	d business taxable income from Form 990-T, line 34		or Year	76		
	기 .	Contribution	and grants (Part VIII June 1h)	PIK	лтеа		Current Year	
e v	1		s and grants (Part VIII, line 1h)	218,91			207 012	
e		-	vice revenue (Part VIII, line 2g)				207,912	
n u	1		ncome (Part VIII, column (A), lines 3, 4, and 7d)			641	17,859	
е	11		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				005 554	
	_		e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		243,	222	225,771	
	_ I		similar amounts paid (Part IX, column (A), lines 1-3)			0.75	0 222	
E			to or for members (Part IX, column (A), line 4)		<del> </del>	275	2,290	
X P			er compensation, employee benefits (Part IX, column (A), lines 5-10)		67,	435	67,992	
e n			fundraising fees (Part IX, column (A), line 11e)				0	
5			sing expenses (Part X column (D), line 25)			. 4	· · · · · · · · · · · · · · · · · · ·	
e 8			ses (Part IX, column (A)), lines 11 a 11d, 11f-24e) . [ 2 ]		184,		132,481	
			ses Add lines 13-17 (must equal Part IX, column (A), line 25)		254,		202,763	
	19	Revenue les	s expenses Subtract line 18 from line-12.			, 926		
Net Asset	s .			Beginning o			End of Year	
or	20		(Part X, line 16)		1,319,		1,244,249	
Fund Bal-	21		es (Part X, line 26)		346,		249,025	
ances			r fund balances. Subtract line 21 from line 20,		972,	216	995,224	
	rt.II		re Block are that I have examined this return, including accompanying schedules and statements, and to the best of my kr	nowledne en	d helief it i			
			aration of preparer (other than officer) is based on all information of which preparer has any knowledge	iowiougo un	o bellet, it i	•		
		<u> </u>						
Sig	n	Signatur	e of officer		<del></del>	Date	<u> </u>	
	- 1		(1, 1)			20.0	in la lia	
Her	е		S BILBRO, PRESIDENT (his Poullico	<u> </u>			10451112	
		<del></del>	I Date		nant Tark	<u> </u>		
		Print/Type pre	paret s harte		neck 🔀		TIN	
Pai		RUBY FE	The factor of th		olf-employee		P00299008	
	parer		fastax ()	Firm's EIN	<u> </u>			
Use	Only	Firm's addres		Phone no			4 0.65 4500	
		ل	Carthage MS 39051	<u> </u>		- 60	1-267-4702	
May	the IRS	S discuss this	return with the preparer shown above? (see instructions)		<u> </u>		🗌 Yes 🔀 No	

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission RURAL WATER ASSOCIATION
	RORAL WATER ASSOCIATION
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
	(0 do ) (5 0 000 752
4a	(Code
	HUNDRED TWELVE RURAL HOUSEHOLDS. THIS ASSOCIATION PROVIDES WATER SERVICE WITHOUT REGARD TO
	POLITICS, LOBBYING OR RACE.
	FORTICO, RODDING ON RACE.
4b	(Code         ) (Expenses \$         including grants of \$         ) (Revenue \$         )
4c	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	,
4.	Other assessment (December & Schodule O.)
4d	Other program services (Describe in Schedule O)  (Exposes \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
40	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses ▶ 202,763
4e	Inter brodiging service exherises a service service exherises a service service service services and services are services and services and services and services and services are services and services and services and services are services and services and services and services are services are services and services are services are services and services are services

Form 990 (2011) NEW PROVIDENCE WATER ASSOCIATION

64-0537446

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Part IV

**Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)? X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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. 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 X Did the organization receive or hold a conservation easement, including easements to preserve open space, X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X 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," X Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V X 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more 11b X c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more X d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets X X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . . . . Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . . . . . . X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 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 . . . . . . . . . . . . . . . X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E ............ 13 X 13 X Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investmetht, and program service activities outlisde the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV ............... 14b X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV . . . . . . . . . . . . . . . . . 15 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H X . . . . . . . . . . . . . . . . . . 20a b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? ..........

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		_	
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_ X_
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 2º If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		_	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
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	-	<b>X</b>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
_	Schedule L, Part IV.	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	25		<u> </u>
30	conservation contributions? If "Yes," complete Schedule M	30		37
31	Did the organization liquidate, terminate, or dissolve and cease operations? if "Yes," complete Schedule N.	30		_ <u>X</u> _
J1	Part I	31		7.7
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	J1		<u> </u>
J2	complete Schedule N, Part II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 32		<u> </u>
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		37
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		<u> </u>
J- <del>4</del>	IV, and V, line 1	34		37
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	33a		<u> </u>
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	25h		37
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		<u> </u>
50	related organization? If "Yes," complete Schedule R, Part V, line 2	20		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
37	·			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	,-		
20	Part VI	37		<u> </u>
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	X	

Enter the number reported in Box 3 of Form 1096 Enter 0- If not applicable   1a   0   0   1b   1c   1c   1c   1c   1c   1c   1c		Check if Schedule O contains a response to any question in this Part V			. 🗆
be Enter the number of Forms W-2G included in line 1 a Enter -0-If not applicable in the Commission comply with backup withholding rules for reportable gamments to vendors and reportable gamment gamming with making with the manual process reported in Form W-3. Transmittal of Wage and Tax  Statements, filled for the calendar year ending with or within the year covered by this return.  2a					No
bit the organization comply with backup withholding rules for reportable payments to vendors and reportable gaining (gambling) unimings to prize without the provided payment of the provided payment	1a				
seportable gamma (gambing) winnings to prize winners?  Statements, filled for the calendar year ending with or within the year covered by this return.  Statements, filled for the calendar year ending with or within the year covered by this return.  Statements, filled for the calendar year ending with or within the year covered by this return.  2 b   fall least one is reported on line 2 a, did the organization line all required federal employment tax returns?.  2 b   fall least one is reported on line 2 a, did the organization line all required federal employment tax returns?.  3 b   Old the organization have unrelated business gross income of \$1,000 or more during the year?  3 a   Old the organization have unrelated business gross income of \$1,000 or more during the year?  3 a   Old the organization have unrelated business gross income of \$1,000 or more during the year?  3 a   Old the organization have unrelated business gross income of \$1,000 or more during the year?  3 a   Old the organization have unrelated business gross income of \$1,000 or more during the year?  4 a   A army time during the calendar year, did the organization have an interest in, or a signature or other authority over, a fill and a foregross or the progress of the gross or signature or other authority over, a fill and any time during the tax year?  5 a   Old any taxable party northy the organization that was or is a party to a prohibited tax shelter transaction?  5 a   Old any taxable party northy the organization that was or is a party to a prohibited tax shelter transaction?  5 a   Old any taxable party northy the organization that was or is a party to a prohibited tax shelter transaction?  5 a   Old any taxable party northy the organization that was or is a party to a prohibited tax shelter transaction?  5 a   Old any taxable party northy the organization that was or is a party to a prohibited tax shelter transaction?  5 a   Old the organization have annual gross excepts that are normally greater than \$100,000, and did the organization	b	<b>L</b> . — d. — a			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax   Statements, filed for the calendar year ending with or within the year covered by this return.   2a   2   2   3   1   1   1   1   1   1   1   1   1	С				
Statements, filed for the calendar year andring with or within the year covered by this return.	_		1c	X	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, If the sum of lines 1a and 2a greater than 250, you may be required to effect (see instructions)  3a If the organization have unrelated business gross income of \$1,000 or more during the year?  3a J If Yes,* has it field a Form 980-T for this year? If Yo,* provide an explanation in Schedule O. 3b  4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts over a financial account in a foreign country.  5b If Yes,* are fire the name of the foreign country.  5ce in strict the name of the foreign country.  5ce in the name of the foreign country.  5ce in strict the name of the foreign country.  5ce in the organization solution of the value of the goods or services provided?  5ce in the organization receive an apparent in excess of 375 made party as a contribution and party for goods and services provided to the payor?  5ce in the organization receive an apparent in excess of 375 made party as a contribution and party for goods and services provided to the payor?  5ce in the organization receive an	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  Joi the tragnaration have unrelated business gross income of \$1,000 or more during the year?  3a  Joi ff "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  3b  If "Yes," has it filed a Form 990-T for this year?? If "No," provide an explanation in Schedule O  3b  If "Yes," enter the name of the foreign country very a financial account in a foreign country (such as a bank account, securities account, or other financial accountry)  See instructions for filing requirements for Form TD F 90-22 I, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax sheller transaction at any time during the tax year?  5a  Joint any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction?  5b  Joint in the sac of St, and the organization that it was or is a party to a prohibited tax sheller transaction?  5b  Joint in the sac of St, and the organization that it was or is a party to a prohibited tax sheller transaction?  5c  Joes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Jorganizations that may receive deductible contributions under section 170(c).  Do 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  Jorganization state may receive deductible contributions under section 170(c).  Do the organization neceived any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7b  Jorganization services any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c  Jorganization services any funds, d					
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?  3a J fif "Yes," has it filed a Form 990-T for this year? if "No." provide an explanation in Schedule O  4b Al any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; and the organization have an interest in, or a signature or other authority over, a financial account in a foreign country    4c	þ		2b	X	
b If "Yes," has it filled a Form 990-T for this year" If "No." provide an explanation in Schedule 0	2-				
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts)?  b If "Yes," either the name of the foreign country ▶ See instructions for filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for the filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for the filling requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts See instructions for the fill and the see in the filling requirements for Foreign Bank and Financial Accounts See instructions for the filling requirements for Form 5889 required to the corganization selected with every solicitation an express statement that such contributions or girls were not tax deductible.  6a 3 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					<u> </u>
over, a financial account in a foreign country (such as a bank account, or other financial accountry?  If "Yes," enter the name of the foreign country			36		
secount)?  b 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  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  See unstructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  See in Yes," to line 5 a or 5b, did the organization file Form 8886-17  So Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  To Organizations that may receive deductible contributions under section 170(c)  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?  To Did the organization notify the donor of the value of the goods or services provided?  To Did the organization notify the donor of the value of the goods or services provided?  To Did the organization notify the donor of the value of the goods or services provided?  To Did the organization notify the donor of the value of the goods or services provided?  To Did the organization notify the donor of the value of the goods or services provided?  To Did the organization notify the donor of the value of the goods or services provided?  To Did the organization notify the donor of the value of the goods or services provided?  To Did the organization notify the donor of the value of the goods or services provided?  To Did the organization notify the goods of the goods or services provided?  To Did the organization negative and provided in elected the goods or services provided?  To Did the organization negative and p	<b>4</b> a				
b If "Yes," enter the name of the foreign country ►  See mistructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax sheller transaction at any time during the tax year?			4.		
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a	h		48		X
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction?  5b J organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solut any contributions that were not tax deductible?  6a J organizations shat may receive deductible contributions under section \$170(c).  7b If "Yes," did the organization receive deductible contributions under section \$170(c).  7c Organizations that may receive deductible contributions under section \$170(c).  8d organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7c If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b If "Yes," did the organization notify the donor of the value of the goods or services provided?  7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  7c J if "Yes," indicate the number of Forms 8282 filed during the year.  7c J if "Yes," indicate the number of Forms 8282 filed during the year.  7d Did the organization freezived a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7f If the organization freezived a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7f If the organization shall property organization, and according to the supporting organizations in a contribution of cars, both, amplanes, or other wehicles, ad the organization file Form 8899 as required?  7f If the organization shall property organization, and office organization file Form 8899 as required?  7g If the organization shall propered to a donor, donor advised fund maintained by a sponsoring orga					
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5	5a		 5a		•
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  6					X
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Part VI. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent . . . . . . . . . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 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? . . . . . . . . . . . . . . X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? X Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X Each committee with authority to act on behalf of the governing body? X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? b 12b X Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a X 15b X 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 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed MS Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. | Own website Another's website ▼ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy. and financial statements available to the public during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► GARY PHILLIPS (601)267-8238 1201 HWY 35 N Carthage, MS 39051

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Form 990 (2011)

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)	1	inpe	(0		any cu	11011	(D)	(E)	(F)
Name and Title	Average			Posi				Reportable	Reportable	Estimated
	hours per	(do no	ot che	ck ma	ore th	an one		compensation from	compensation from	amount of
	week (describe	box, t	ınless	perso	on is	both an		the	refated organizations	other compensation
	hours for	office	r and	a dire	ctor/t	rustee)		organization	(W-2/1099-MISC)	from the
	related organizations	I t d				Нсв	F	(W-2/1099-MISC)		organization and related
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(1) CHRIS BILBRO		1								
PRESIDENT	2.00	<del> </del>		X					0	775
(2) NANCY SMITH SEC TREASURER	2.00								0	450
(3) THOMAS GRIFFIN	2.00	<del> </del>	-	X			-		-	450
DIRECTOR	2.00			X				(	0	515
(4) TOMMY GANANN	+	<del>                                     </del>	$\vdash$	1		ļ			1	
VICE PRESIDEN	2.00			х				(	o	550
(5)		<u> </u>				<u> </u>	$\vdash$			
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(13)										
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(14)								<del>-</del>		
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EEA

Pa	rt VII   Section A. Officers, Directors, Trustee	s, Key Emplo	oyees,	and	J Hiç	ghes	st Con	npen	sated Employee	s (continued)							
	(A)	(B)				C)			(D)	(E)		(F)					
	Name and Title	Average hours per	(do r	ot ch		sition nore th	han one		Reportable compensation	Reportable compensation from		stimated					
		week					both anustee)	·	from	related	ed other						
	•	(describe hours for	I t d	т-	0	K	Нс е	F	the organization	organizations (W-2/1099-MISC)							
		related	nrı	n r	f	е		0 0	(W-2/1099-MISC)	(**************************************	ог	ganizatio	on				
		organizations in Schedule	ı s e	t s	1	y e	h p l	m				nd relate ganizatio					
		0)		t e	е	m p	s n y	ř			'		_				
			u r a o			0	a e t										
			' '	o n		e	đ										
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(17)							•				-						
(18)		<del>                                     </del>	+	-			-	$\vdash$			+						
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(24)																	
(25)		<del> </del>	<del> </del>					$\vdash$		<del></del>							
<b>\</b> ,																	
1b	Sub-total		<del></del>	<del></del>	<del></del>		• • •	<b>•</b>	·								
C	Total from continuation sheets to Part VII, Section							<b>•</b>									
d	Total (add lines 1b and 1c)					<u> </u>		▶	C	0	<u> </u>	2,	290				
2	Total number of individuals (including but not limited	to those liste	ed abov	ve) v	vho	rece	eived n	nore	than \$100,000 in	_							
	reportable compensation from the organization									0		1	<del></del>				
	Dod the commented but any family affine described						4					Yes	No				
3	Did the organization list any former officer, director					_					.						
4	employee on line 1a? If "Yes," complete Schedule . For any individual listed on line 1a, is the sum of rep										3	<b></b>	X				
•	organization and related organizations greater than												İ				
	individual										4		x				
5	Did any person listed on line 1a receive or accrue c												_ <u></u>				
	for services rendered to the organization? If "Yes,"	complete Sch	edule .	J for	suc	h pe	rson				5		x				
Sec	tion B. Independent Contractors																
1	Complete this table for your five highest compensat	ed independe	nt con	tract	ors	that	receiv	ed m	ore than \$100,00	0 of							
	compensation from the organization. Report compe	nsation for the	e calen	dar	yea	rend	dıng w	ith or	within the organia	zation's tax							
	year	<del> </del>							-								
	(A)								(B)			(C)					
	Name and business addres	5						<u>-</u>	Description of s	ervices	Comp	ensation					
									<del> </del>								
									<del> </del>	-							
			_						<del> </del>	<del></del>							
	Total number of independent contractors (including	but not limited	1 to the	امور	Ister	d ah	OVE) 14	/ho									
2	Total number of independent contractors (including received more than \$100,000 of compensation from				isted	d ab	ove) w	/ho	<u> </u>								

Part \	<b>VIII</b>	Statement of Revenue					
		,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns 1a	1				012, 010, 01014
	b	Membership dues 1b		i			
Contri-	C	Fundraising events 1c					
butions, Gifts,	ď	Related organizations 1d	<del> </del>			-	
Grants	e	Government grants (contributions) . 1e					
and Other		All other contributions, gifts, grants,					
Similar	'						
Amounts	_	and similar amounts not included above 1f  Noncash contributions included in lines 1a-1f	<u></u>			ľ	
	g			-			
	h h	Total. Add lines 1a-1f					
		ACCOUNTED DITE	Business Code	007.010	-		
		MEMBERSHIP DUES	900099	207,912			207,912
Program	b					<del></del>	
Service	C						ļ <u>-</u>
Revenue	d						
	e						
		All other program service revenue					
	g	Total. Add lines 2a-2f		207,912			
	3	Investment income (including dividends, interest and other similar amounts)		17,859			17,859
	4	Income from investment of tax-exempt bond pro	oceeds 🕨				
	5	Royalties	▶				
		(ı) Real	(II) Personal				i
	6a	Gross rents					
	ь	Less rental expenses					
	c	Rental income or (loss)					
	1	Net rental income or (loss)	·		* * * * * * * * * * * * * * * * * * *	-	
	1	Gross amount from sales of (i) Securities	(II) Other				<del></del>
	'a	assets other than inventory	<u> </u>	İ			
	_	Less cost or other basis		1			,
	"	and sales expenses					
0	c	Gain or (loss)		!			
ւ h		Net gain or (loss)	<u> </u>				
е	Į.	Gross income from fundraising		<del></del>		<u> </u>	<del> </del>
r	""	events (not including \$					
R		of contributions reported on line 1c)					
e		See Part IV, line 18 a				1	,
e	h	Less direct expenses b		}			
n		Net income or (loss) from fundraising events .				*******	•
u e		Gross income from gaming activities					_
·	Ja	See Part IV, line 19a	1				
	١ .						
	1	Less direct expenses b					-
		Net income or (loss) from gaming activities			<del></del>	ļ	
	]	Gross sales of inventory, less returns and allowances a					
		Less cost of goods sold $\ldots$ b					
	С	Net income or (loss) from sales of inventory	<u> </u>		<u> </u>		
	<u></u>	Miscellaneous Revenue	Business Code				1
	11a						
	b						
	C						
		All other revenue					
	е е	Total. Add lines 11a-11d					
		Total revenue. See instructions		225,771			225,771

# 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 Q contains a response to any question in this Part IX

	Check it Schedule O contains a response to any ques				
	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Ob, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
2	organizations in the United States See Part IV, line 21.  Grants and other assistance to individuals in				
2			•		
	the United States See Part IV, line 22				····
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
4	United States See Part IV, lines 15 and 16 Benefits paid to or for members	2 200	2 200		<del> </del>
5	Compensation of current officers, directors,	2,290	2,290		
3					
6	trustees, and key employees				
Ü	· · · · · · · · · · · · · · · · · · ·				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	58,725	50.725		
8	Other salaries and wages	38,723	58,725		· · · · · · · · · · · · · · · · · · ·
0	·				
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	0.267	0.067		
10	Payroll taxes	9,267	9,267		
11	Fees for services (non-employees)				
a	Management				
b	Legal	6 250	6.050		·
c d	Accounting	6,250	6,250		
e	Lobbying				
f	Professional fundraising services See Part IV, line 17.				
	Investment management fees				
g 12	Other,				
13	Advertising and promotion				
14	Office expenses				<del></del>
15	Information technology				····
16	Royalties				
17	Travel				<del></del>
18	Payments of travel or entertainment expenses				· · · · · · · · · · · · · · · · · · ·
10	for any federal, state, or local public officials	:			
19	Conferences, conventions, and meetings				
20					·
21	Payments to affiliates				<del></del> -
22	<u></u>	54,050	54.050		
23	Depreciation, depletion, and amortization	8,858	54,050 8,858		
23 24	Other expenses Itemize expenses not covered	0,030	0,036		
47	above (List miscellaneous expenses in line 24e If	ŀ			
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
_	UTILITIES	28,959	28,959		<del></del>
a b	SUPPLIES	10,767	10,767		
_	REPAIRS AND MAINTENANCE	19,145	19,145		<del></del>
c d	MISCELLANEOUS	4,452	4,452		
		4,452	4,452		<del></del>
e 25	All other expenses	202 762	202 762		
25 26	Total functional expenses. Add lines 1 through 24e .  Joint costs. Complete this line only if the	202,763	202,763	0	0
20	organization reported in column (B) joint costs	į			
	from a combined educational campaign and				
	fundraising solicitation Check here If		-		
	following SOP 98-2 (ASC 958-720)				

art X	Balance Sheet	·	,	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	137,142	1	107,189
2	Savings and temporary cash investments	385,864	2	294,71
3	Pledges and grants receivable, net	<del></del>	3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key		<del>  -  </del>	
	employees, and highest compensated employees Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)		6	
7	Notes and loans receivable, net	·	7	
8	Inventories for sale or use		8	······································
9	Prepaid expenses and deferred charges	4,367	9	4,36
10		4,307		4,30
'0'	other basis Complete Part VI of Schedule D 10a 1,680,757			
	Less accumulated depreciation	790,632	10c	736,58
11		790,632	11	730,30
	Investments - publicly traded securities		12	
12	Investments - other securities See Part IV, line 11		1	<del></del>
13	Investments - program-related See Part IV, line 11		13	100 00
14	Intangible assets	1 170	14	100,22
15	Other assets See Part IV, line 11	1,170	15	1,17
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,319,175	16	1,244,24
17	Accounts payable and accrued expenses	820	17	82
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities	<del></del>	20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key			
	employees, highest compensated employees, and disqualified persons		_	
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	328,503	23	230,56
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
ł	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	17,636	25	17,63
26	Total liabilities. Add lines 17 through 25	346,959	26	249,02
	Organizations that follow SFAS 117, check here ▶ 🔀 and complete			
F	lines 27 through 29, and lines 33 and 34.	·	_	
n 27	Unrestricted net assets	972,216	27	995,22
d 28	Temporarily restricted net assets		28	
B 29	Permanently restricted net assets		29	
a	Organizations that do not follow SFAS 117, check here ▶ 🗍 and			
!	complete lines 30 through 34.			<del></del>
a n 30	Capital stock or trust principal, or current funds		30	
C 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	Retained earnings, endowment, accumulated income, or other funds		32	
e   32	retained carmings, endowment, adeamatated meeting, or early ferred			
e	Total net assets or fund balances	972,216	33	995,22

Form 990 (201	1) MEN DROUTDENCE WARED ACCOCIANTON	64 0505446	D. 44
		64-0537446	Page 12
Part XI	Reconciliation of Net Assets		
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	🗆
4	•	1 . 1	
	enue (must equal Part VIII, column (A), line 12)		225,771
2 Total exp	penses (must equal Part IX, column (A), line 25)	. 2	202,763
3 Revenue	less expenses Subtract line 2 from line 1	. 3	23,008
4 Net asse	its or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	972,216
5 Other ch	anges in net assets or fund balances (explain in Schedule O)	. 5	0
6 Net asse	its or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,		
column (	B))	.   6	995,224
	Financial Statements and Reporting	1	
(	Check if Schedule O contains a response to any question in this Part XII		🗆
			Yes No

Page 12

	Check if Schedule O contains a response to any question in this Part XII			. 🗆		
			Yes	No		
1	Accounting method used to prepare the Form 990 🗌 Cash 🔀 Accrual 🗎 Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X		
b	Were the organization's financial statements audited by an independent accountant?	2b		X		
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, explain in		,			
	Schedule O			i		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were					
	issued on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
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		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b				
	EEA					

#### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number NEW PROVIDENCE WATER ASSOCIATION 64-0537446 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts 1 Aggregate contributions to (during year) . . . . . 2 3 Aggregate grants from (during year) . . . . . . . Aggregate value at end of year . . . . . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year ь 2h 2c Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items 

4	Describe in Part XIV the intended uses of the organization's endowment funds						
Pa	rt VI Land, Buildings, and Equipmen	t. See Form 990, Part	X, line 10				
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value		
1a	Land		2,040	to the symmetry of	2,040		
b	Buildings		1,850	1,850			
С	Leasehold improvements						
d	Equipment		1,676,867	942,325	734,542		
е	Other						
	I. Add lines 1a through 1e (Column (d) must equal Fo	rm 990, Part X, column	(B), line 10(c) )		736.582		

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Page 3

Part VII	investments - Other Securities	s. See Form 990, Part X, line 12		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market v	
(1) Financial	derivatives			
	eld equity interests			
(3) Other				
(A)				····
(B)				
(C)				
(D)				
(E)				
(F)				
(G)	<u> </u>			
(H)				
	(b) must equal Form 990, Part X, col (B) line 12)	<b>•</b>		
Part VIII	Investments - Program Relate	d. See Form 990. Part X. line 13	<del> </del>	
1 411 1111	(a) Description of investment type	(b) Book value	(c) Method of valuation	<del></del> -
	(a) Description of investment type	(b) Book value	Cost or end-of-year market vi	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				·····
(9)				
(10)				
	(b) must equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>		
Part IX	Other Assets. See Form 990, Part			
		(a) Description		(b) Book value
	TY DEPOSITS			1,170
(2)				<del></del>
(3)				<del></del>
(4)				
<u>(5)</u> (6)				
(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, col (B)	) line 15 )		1,170
Part X	Other Liabilities. See Form 990, Pa			
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2) METER	R DEPOSITS	17,636		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
_(9)				
(10)				
(11)				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 25)	17,636		·,,, ······

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

Sched	ule D (Form 990) 2011 NEW PROVIDENCE WATER ASSOCIATION	64-	-0537446	Page 4	
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements					
1	Total revenue (Form 990, Part VIII, column (A), line 12)				
2	Total expenses (Form 990, Part IX, column (A), line 25)				
3	Excess or (deficit) for the year Subtract line 2 from line 1		+		
4	Net unrealized gains (losses) on investments		+		
5	Donated services and use of facilities				
6	Investment expenses				
7	Prior period adjustments			<del></del>	
8	Other (Describe in Part XIV )				
9	Total adjustments (net) Add lines 4 through 8	<del></del>		<del></del>	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	1		<del></del>	
	rt XII Reconciliation of Revenue per Audited Financial Statements With				
1	Total revenue, gains, and other support per audited financial statements		1	<u></u>	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	· · · · · · · -  -	·• • • • • • • • • • • • • • • • • • •		
ъ а	Net unrealized gains on investments	No.	*** **		
b	Donated services and use of facilities	· · · · · · · · · · · · · · · · · · ·	, a.		
	Recoveries of prior year grants				
C	· · · · ·		*		
d		<del></del> ;*	20		
e	Add lines 2a through 2d	<del></del>	2e	_	
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	12.7 856	E		
a	Investment expenses not included on Form 990, Part VIII, line 7b	jî			
þ	Other (Describe in Part XIV.)		` -		
C	Add lines 4a and 4b	<u> </u>	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5		
<u> </u>	rt XIII Reconciliation of Expenses per Audited Financial Statements Wit		. 1		
1	Total expenses and losses per audited financial statements	<u> </u>	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	e.	وبالم		
а	Donated services and use of facilities				
b	Prior year adjustments	f			
C	Other losses				
d	Other (Describe in Part XIV )	la	100		
е	Add lines 2a through 2d	<del></del>	2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	2.0	ξ		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		`		
b	Other (Describe in Part XIV )				
С	Add lines 4a and 4b		4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5		
_	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4				
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4	b Also complete			
this part to provide any additional information					

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

NEW PROVIDENCE WATER ASSOCIATION

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number

64-0537446

O1. Members or stockholder classes and rights (Part VI, line 6)

EACH HOUSEHOLD IN THE WATER ASSOCIATION IS A MEMBER OF THE WATER ASSOCIATION AND HAS ONE

VOTE FOR DECIDING ON THE ELECTION OF BOARD MEMBERS.

O2. Member election for additional members (Part VI, line 7a)

THE WATER ASSOCIATION IS COMPOSED OF EACH HOUSEHOLD AS A MEMBER OF THE ASSOCIATION WITH

ONE VOTE.THE ASSOCIATION VOTES FOR THE ELECTION OF ALL BOARD MEMBERS AS THEIR TERMS OF

SERVICE EXPIRE.

O3. Governing body decisions (Part VI, line 7b)

THE MEMBERS OF THE WATER ASSOCIATION VOTE TO REPLACE BOARD OF DIRECTOR MEMBERS AS THEIR

TERMS OF SERVICE EXPIRE.

05. Conflict of interest policy compliance (Part VI, line 12c)

THE BOARD OF DIRECTORS ARE ASKED YEARLY AT THE LAST MEETING OF THE YEAR IF

ANYONE HAS ANY CONFLICT OF INTEREST AT THE PRESENT TIME OR IF ANY SHOULD ARISE IN THE

THE BOARD OF DIRECTORS IS SUPPOSED TO REVIEW THE FORM 990 AFTER ITS COMPLETION BEFORE

FUTURE IT MUST BE REPORTED TO THE BOARD.

SUBMITTING TO IRS.

06. Governing documents, etc, available to public (Part VI, line 19)

A COPY IS KEPT ON FILE WITH THE SECRETARY TREASURER TO PRESENT TO ANYONE REQUESTING TO

REVIEW THE YEARLY FORM 990 IN THE OFFICE OF THE SECRETARY TREASURER.

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Name of the organization	Employer identification number
NEW PROVIDENCE WATER ASSOCIATION	64-0537446
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07. 7. 3. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.	-,
07. Explanation of other changes in net assets or fund balances (Part XI, 1	ine 5)
THERE WERE NO ACCOUNTS RECEIVABLES IN 2011	
THE TO ACCOUNT MODIFIED IN 2011	