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SCANNED NOV 2 6 2013

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047

Open to Public Inspection

АГ	or the	2012 Calendar year, or tax year beginning and e	nuing					
Bca	heck if pplicable	C Name of organization		D Employer identifica	ation number			
	Addres change	Air & Waste Management Association						
	Name change	Doing Business As		25-60	48614			
	initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number				
	Termin-		rd Fl		232-3444			
	Amend	<u> </u>		G Gross receipts \$	3,588,756.			
\vdash	⊥return ∏Applica							
_	⊥tión pendin			H(a) Is this a group ret	um ☐Yes X No			
		F Name and address of principal officer: Amy Gilligan		for affiliates?				
		same as C above	, . ,	H(b) Are all affiliates inclu	ıded? Yes No			
1 7	ſax-exe	empt status: X 501(c)(3) 501(c) () ((Insert no.) 4947(a)(1) o	r 527	If "No," attach a li	st. (see instructions)			
J	Nebsit	e: ▶ www.awma.org		H(c) Group exemption	number >			
KF	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 1952 M	State of legal domicile: PA			
_		Summary	<u></u>	······································				
		Briefly describe the organization's mission or most significant activities: The m	niggio	on of the Ass	ociation			
Governance	' '	is to promote a clean environment, provid	10 100	dorchin in t	he fields			
ᄪ	-							
F	2 (Check this box 🕨 📖 if the organization discontinued its operations or dispos	ed of more	e than 25% of its net ass				
8	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	18			
G	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	18			
Š	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	25			
Activities &	Ĭ	Total number of volunteers (estimate if necessary)		6	1000			
€	1	Total unrelated business revenue from Part VIII, column (C), line 12		7a	144,106.			
¥					0.			
	b	Net unrelated business taxable income from Form 990-1, line 34/	<u> </u>	7b				
	1	Contributions and grants (Part VIII, line 1h)	<u> </u>	Prior Year	Current Year			
ø	8 (1,195,883.	1,117,777.			
Ē	9 1	Program service revenue (Part VIII, line 2g) NOV 1 2013		1,995,531.	2,157,101.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		62,900.	54,886.			
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 86, 90, 10c, and 11e)		1,954.	88.			
		Total revenue - add lines 8 through 11 (must-equal-Part-VIII, column (A), line 12)		3,256,268.	3,329,852.			
			-	21,900.	20,955.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>		20,555.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	_	0.	4 000 600			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,271,111.	1,270,670.			
Š	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses	Ь.	Total fundraising expenses (Part IX, column (D), line 25)	32. 🗆					
ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,032,789.	2,175,087.			
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		3,325,800.	3,466,712.			
			. –	<69,532.				
or		Revenue less expenses Subtract line 18 from line 12						
ts o			B	eginning of Current Year	End of Year			
Net Assets	20	Total assets (Part X, line 16)	<u> </u>	2,287,973.	2,175,483.			
ide Ide	21	Total liabilities (Part X, line 26)	<u> </u>	894,526.	820,037.			
컆	22	Net assets or fund balances. Subtract line 21 from line 20		1,393,447.	1,355,446.			
	art II	Signature Block						
Und	er pena	ities of perjury, I declare that I have examined this return, including accompanying schedules	and staten	nents, and to the best of my	knowledge and belief, it is			
	•	t, and complete. Declaration of preparer (other than officer) is based on all information of wh		•	,			
	, 0000	1 7 4 M VA		1/14//2				
		Signature of Officer		Date	·			
Sig	ın			5410				
He	re	Amy Gilligan, Treasurer						
		Type or print name and title						
		Print/Type preparer's name Preparer's signature		Date Check	PTIN			
Pai	d	JOEL S. KUNKEL	CPA	10/23/13 self-employed	P00100507			
Pre	parer	Firm's name HERBEIN + COMPANY, INC.		Firm's EIN	23-2415973			
Use Only Firm's address 530 PELLIS RD, STE 7000								
500		GREENSBURG, PA 15601-4585		Dhono no 7	24-834-7053			
		L		Phone no. 72				
<u> Ma</u>	y the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			
2320	001 12-1	0-12 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2012)			

See Schedule O for Organization Mission Statement Continuation

Form 990 (2012)

Form 990 (2012) Air & Waste Management Association

Part IV | Checklist of Required Schedules

			Yes	No_
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		x
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	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	10	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.	*		,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
þ	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		X
С	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		х
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	١	х	
L	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		-
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	and the second s	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
	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, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ	х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u></u>	X
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	 	X
2 0a		20a	<u> </u>	Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
		Earn	agn.	いつつすつ

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		103	-140
	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 2? 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		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		
	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		X
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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	i	X
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		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?		1	
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	-	X
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	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
þ	If "Yes" to line 35a, 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	ļ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	l .		٠,,
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			۹,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		.	
	Note. All Form 990 filers are required to complete Schedule O	_38_	<u> </u>	<u> </u>
		Form	99U	(2012)

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V							
	Check is deficulted contains a response to any question in this Part v				V _c -	N ₂		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	l 1a	34		Yes	No		
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	reporta	ible gaming					
	(gambling) winnings to prize winners?	•		1c	х	•		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1						
	filed for the calendar year ending with or within the year covered by this return	2a	25					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	ırns?		2b	X			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)						
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	X			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	Х			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•		- J			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	int)?	_4a	X			
D	If "Yes," enter the name of the foreign country: Canada See protections for files year month for Form TD F 00 00 1. Report of Foreign Reply and Foreign	A						
5a	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	ACCOU	nts	Ea		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action'	,	5a 5b		$\frac{x}{x}$		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	action		5c				
	<u>-</u>	he ora	anization solicit					
	any contributions that were not tax deductible as charitable contributions?		arnization condit	6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	rtions o	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 so	ervices	orovided to the payor?	7a		X		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas rec	uired			X		
	to file Form 8282?							
	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		ct?	7e	-	X		
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con		200	7f		X		
g h	If the organization received a contribution of qualified intellectual property, did the organization file file the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g 7h		X		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. I			/!!				
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a			8	- ~	X		
9	Sponsoring organizations maintaining donor advised funds.	- -	no daning mo you.					
а	Did the organization make any taxable distributions under section 4966?			9a		X		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X		
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
11	Section 501(c)(12) organizations. Enter:		1					
а	Gross income from members or shareholders	11a						
þ	Gross income from other sources (Do not net amounts due or paid to other sources against			ŀ				
46	amounts due or received from them.)	11b	<u> </u>			^		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	7 	12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u></u>		ŀ			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			122				
a	Note. See the instructions for additional information the organization must report on Schedule O.			13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1				
-	organization is licensed to issue qualified health plans	13ь						
С	Enter the amount of reserves on hand	13c		1				
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ile O		14b				
				Forn	990	(2012)		

Form 990 (2012) Air & Waste Management Association 25-6048614 Page
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					X				
Sec	tion 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	1a	18							
	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 0.									
b	Enter the number of voting members included in line 1a, above, who are independent	1b	18							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p wrth	any other							
	officer, director, trustee, or key employee?		_	2		X				
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision							
	of officers, directors, or trustees, or key employees to a management company or other person?			3		_ X				
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X				
6	Did the organization have members or stockholders?			6	X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or		x					
	more members of the governing body?									
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?									
8										
а	a The governing body?									
b	b Each committee with authority to act on behalf of the governing body?									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)							
					Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a	X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapte	s, affiliates,		x					
	and branches to ensure their operations are consistent with the organization's exempt purposes?									
11a	11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	-	_	12a	X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		-	12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," a	escribe							
	ın Schedule O how this was done			12c	X					
13	Did the organization have a written whistleblower policy?			13	X					
14	Did the organization have a written document retention and destruction policy?			14	Х					
15	Did the process for determining compensation of the following persons include a review and approve	al by ı	ndependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,								
a	The organization's CEO, Executive Director, or top management official			15a	X	<u> </u>				
b	Other officers or key employees of the organization			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 arrange	ment	vith a		-					
	taxable entity during the year?			16a		<u> </u>				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		•							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	ınızatı	on's							
	exempt status with respect to such arrangements?	·		16b						
	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed PA									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ı (Sec	tion 501(c)(3)s only) :	avaılat	ie					
	for public inspection. Indicate how you made these available. Check all that apply.	^	hadala Ol							
	Own website X Another's website X Upon request Other (explain		•							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict	of interest policy, an	d finar	ncial					
	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 a	and red	ords of the organiza	tion: 🕨	-					
	W.G. Braun - 412-232-3444 420 Fort Duquesne Boulevard, Pittsburgh, PA 15222	2 – 1 /	35							

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Air & Waste Management Association

25-6048614

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

- 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.

(A)	(B)	orga	(C)			npei	isat	(D)	(E)	(F)
Name and Title	Average		not c	Pos heck	rtion more	than		Reportable	Reportable	Estimated
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	Individual trustee or director	#			ated		organization	(W-2/1099-MISC)	from the
	related organizations	nstee.	nstitutional trustee		8	npens		(W-2/1099-MISC)		organization and related
	below	duait tr	tona	_	d d	st con yee	<u>.</u>			organizations
	line)	мриј	Institu	Officer	Key employee	Highest compensated employee	Р огтег			
(1) Mark Rood	5.00								_	
Director		X			<u> </u>	<u> </u>		0.	0.	0.
(2) Howard Saxion	5.00	l						_	_	
Director		X						0.	0.	0.
(3) Daniel Weiss	5.00	l								•
Director		X					<u> </u>	0.	0.	0.
(4) Patricia Brush	5.00			l		;			_	•
Director		X		<u> </u>	_	<u> </u>		0.	0.	0.
(5) Diane Freeman	5.00			1						
Director		Х		_		<u> </u>		0.	0.	0.
(6) Pamela Heckel	5.00	l								_
Director		Х					<u> </u>	0.	0.	0.
(7) Harry Klodowski	5.00			ŀ						•
Director		X	<u> </u>	<u> </u>	_	┞	_	0.	0.	0.
(8) Raghavan Ramanan	5.00				i		1			
Director		X	_	<u> </u>	<u> </u>	ļ	_	0.	0.	0.
(9) Naresh Kumar	5.00									
Director	F 00	X	_	<u> </u>		┡	<u> </u>	0.	0.	0.
(10) Jennifer Tullier	5.00									•
Director	F 00	X	┡	<u> </u>	┡	┡	<u> </u>	0.	0.	0.
(11) Brent Nixon	5.00	x						0.	0.	^
Director	5.00	_	├		⊢	⊢	<u> </u>	0.	U •	0.
(12) Merlyn Hough Immediate Past President	3.00	x					ŀ	0.	0.	0.
(13) Michael Miller	5.00	<u> </u>	\vdash	\vdash	⊢	╁	\vdash	<u> </u>	0.	•
President Elect	3.00	X			1			0.	0.	0.
(14) Sara Head	5.00	^		 	╁	-	_		0.	
President	7.00	X		x				0.	0.	0.
(15) Jeanne C Ng	5.00	<u> </u>	\vdash		┢	\vdash	\vdash		•	
Vice President	3.00	x		x	l			0.	0.	0.
(16) Laki Tisopulos	5.00		-	 	\vdash	\vdash	\vdash	 		
Vice President		x		X				0.	0.	0.
(17) Brad Waldron	5.00	ᢡ	\vdash	Ë	\vdash	 	\vdash			
Vice President	3.00	x		x]			0.	0.	0.
					Ц.		<u> </u>		<u> </u>	<u>~~</u>

Part VII Section A. Officers, Directors, Trus	tees. Kev Em	plov	ees	. an	d Hi	ahe	st C	ompensated Employe	es (continued)			_	
(A)	(B)	(B) (C)				(D) (E)				(F)			
Name and title	Average	١		Pos	rtion	1		Reportable	Reportable		Es	timate	ed
	hours per	box	, unle	ss pe	rson	than is bot	h an	compensation	compensation	·		nount	-
	week		cer ar	nd a d	recto	or/trus	tee)	from	from related			other	
	(list any	ecto		ĺ				the	organizations			pensa	
	hours for related	- F	, e			ated		organization	(W-2/1099-MIS	C)		om th	
	organizations	ustee	trust		 	Suedi		(W-2/1099-MISC)			_	anızat d relat	
	below	lual tr	tonal		atota	yee	_					u reiat anizati	
	line)	Individual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former				5.5.		
(18) Amy Gilligan	5.00		_	_	-	 •							
Treasurer		1		X				11,000.		0.			0.
(19) Jim Powell	5.00	Γ				Γ							
Secretary/Executive Director				X				31,269.		0.			0.
(20) Michael Kelly	5.00												
Past Secretary/Executive Director				X				63,392.		0.			0.
(21) Robert Hall	5.00											-	
Past Secretary/Executive Director				X				55,769.		0.			0.
		<u> </u>											
					l		ŀ						
						L							
			1										
					_	_							
						İ							
				_	_	_	<u> </u>						
							l						
	L	<u> </u>	L	l	<u> </u>	Ļ	<u> </u>	161 420		_			
1b Sub-total								161,430.		00			0.
c Total from continuation sheets to Part V	II, Section A							0.			0.		
d Total (add lines 1b and 1c)			1 4		<u> </u>	<u></u>		161,430.	000 -4				<u> </u>
2 Total number of individuals (including but r	iot ilmited to tr	iose	IISTE	eo a	DOV	e) wi	10 r	eceived more than \$100	,000 of reportable)			0
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director or tr	ıcta	o ka	ov or	mple	.voo	or	highest compensated a	mployee on			100	
line 1a? If "Yes," complete Schedule J for s			C, NC	sy Ci	пріс	усс	, 01	riigilest compensated e	inployee on		3	•	x
4 For any individual listed on line 1a, is the si			amn	ene:	atıor	n anı	d of	her compensation from	the organization		-		
and related organizations greater than \$15	•		•					•	the organization		4	~~ ~	X
5 Did any person listed on line 1a receive or									idual for services		Ť		
rendered to the organization? If "Yes," com							Ciu	tod organization or many	iddai for oor vicco		5		X
Section B. Independent Contractors					,,,,,,								
Complete this table for your five highest co	mpensated in	depe	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of com	pens	ation	from	
the organization. Report compensation for	-												
(A)								(B)			((C)	
Name and business	address	N	CMC	Ε				Description of s	services	С		nsatio	n
				_								_	
2 Total number of independent contractors (including but r	not li	mıte	d to	tho	se li	stec	d above) who received n	nore than				
\$100,000 of compensation from the organ	zation				1	0							

		Check if Schedule O cont	ains a response	to any question	in this Part VIII			
	. "			, , , ,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts nts	1 a	Federated campaigns	1a					
를 하	b	Membership dues	1b	797,097.	1			
P, E	С	Fundraising events	1c		1			
분히	d	.	1d					:
E,č	е	Government grants (contribut	ions) 1e					
is S	f	All other contributions, gifts, gran	ts, and					
138		similar amounts not included abo	ve 1f	320,680.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	1a-1f \$		}			
<u> </u>	h	Total. Add lines 1a-1f		<u> </u>	<u>1,117,777.</u>			
				Business Code				
8	2 a		ation p		1,733,333.	1,733,333.		
Program Service Revenue	b	Publications		511120	423,768.	279,662.	144,106.	
S E	С							
ě a	d							
<u>6</u>	е							
₫	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		<u> </u>	2,157,101.			
- 1	3	Investment income (including	dividends, inte	rest, and				
		other similar amounts)		•	55,737.			55,737.
	4	Income from investment of ta	x-exempt bond	proceeds >				
	5	Royalties						
l			(i) Real	(ıı) Personal				
	6 a	Gross rents]			
	b	Less: rental expenses						
	С	Rental income or (loss)		<u> </u>				
1	d	Net rental income or (loss)		<u> </u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	258,053	•				
	b	Less: cost or other basis				,	`	
		and sales expenses	258,904					
	С	Gain or (loss)	<851	•Þ				
ŀ	d	Net gain or (loss)			<851.	>		<851.
<u>o</u>	8 a	Gross income from fundraisin	g events (not					
enne		including \$	of					
Other Rev		contributions reported on line	1c). See					
e E		Part IV, line 18	•	a	1	•		
됩		Less: direct expenses		o		.		
	С	Net income or (loss) from fund	draising events					
i	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19		•	1			
	þ	Less direct expenses	ı	o				-
	С	Net income or (loss) from gan	ning activities					
	10 a	Gross sales of inventory, less	returns		ľ			
		and allowances	•	9]			
	b	Less: cost of goods sold	ı	·	1			
	С	Net income or (loss) from sale	es of inventory					
[_	Miscellaneous Revenu	ie	Business Code				
	11 a	Other income		900099	88.			88.
	b			<u></u>				
-	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		•	88.			
1	12	Total revenue. See instructions.			13.329.852.	2,012,995.	144.106.	54,974.

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	mplete column (A)	
	Check if Schedule O contains a respor	ise to any question in thi	s Part IX	,	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	20,955.	20,955.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	150 100	110 100	54 050	
	trustees, and key employees	170,198.	119,139.	51,059.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	001 005	600 410	264 572	16 003
7	Other salaries and wages	881,905.	600,410.	264,572.	16,923.
8	Pension plan accruals and contributions (include	21 7/11	19,709.	0 522	2 510
_	section 401(k) and 403(b) employer contributions)	31,741. 109,926.	72,299.	9,522.	2,510. 4,649.
9	Other employee benefits	76,900.	53,830.	23,070.	4,049.
10	Payroll taxes	70,300.	33,630.	23,070.	
11	Fees for services (non-employees):	220 110	220,685.	0 131	
a	Management	230,119.	220,003.	9,434.	
b	Legal	13,800.		13,800.	
C	Accounting	13,000.		13,000.	
d	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
y	column (A) amount, list line 11g expenses on Sch Q.)	85,780.	75,526.	10,254.	
12	Advertising and promotion	19,225.	19,225.		
13	Office expenses	253,901.	217,015.	36,886.	
14	Information technology	16,523.	995.	15,528.	
15	Royalties	·			
16	Occupancy	117,647.	82,353.	35,294.	
17	Travel	200,894.	157,798.	43,096.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	877,210.	861,940.	15,270.	
20	Interest	5,379.		5,379.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	70,981.	49,687.	21,294.	
23	Insurance	43,772.	43,187.	585.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)	:			
а	Printing and publicatio	144,628.	142,846.	1,782.	
b	Miscellaneous	67,252.	51,820.	15,432.	
c	Professional developmen	23,292.	· · · · · · · · · · · · · · · · · · ·	23,292.	
d	Postage and shipping	3,145.	2,849.	296.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,466,712.	2,812,268.	630,362.	24,082.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here if following SOP 98-2 (ASC 958-720)				

Га	πχ	Balance Sneet					
		Check if Schedule O contains a response to an	y question in this Pa	rt X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			17,724.	1	25,488.
	2	Savings and temporary cash investments		. [2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		Ī	216,445.	4	180,508.
	5	Loans and other receivables from current and for	ormer officers, direct	tors,			
		trustees, key employees, and highest compensi	ated employees. Co	mplete			
		Part II of Schedule L		-		5	•
	6	Loans and other receivables from other disquali	fied persons (as def	ned under			
		section 4958(f)(1)), persons described in section	n 4958(c)(3)(B), and	contributing			
		employers and sponsoring organizations of sec	tion 501(c)(9) volunta	ary			
	1	employees' beneficiary organizations (see instr).	. Complete Part II of	Sch L		6	
Assets	7	Notes and loans receivable, net	·	Γ		7	
4ss	8	Inventories for sale or use	•	Ī	36,900.	8	28,508.
	9	Prepaid expenses and deferred charges		ſ	45,103.	9	28,508. 37,551.
	10a	Land, buildings, and equipment: cost or other	1 1				
		basis. Complete Part VI of Schedule D	10a 57	74,538.			
	b	Less: accumulated depreciation	10b 36	55,812.	226,039.	10c	208,726.
	11	Investments - publicly traded securities		1,740,858.	11	208,726. 1,689,685.	
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			4,904.	15	5,017.
	16	Total assets. Add lines 1 through 15 (must equ	ial line 34)		2,287,973.	16	2,175,483.
	17	Accounts payable and accrued expenses			256,226.	17	186,901.
	18	Grants payable		18			
	19	Deferred revenue		486,044.	19	392,490.	
	20	Tax-exempt bond liabilities	ſ		20		
ç	21	Escrow or custodial account liability. Complete	Part IV of Schedule	D [21	
Liabilities	22	Loans and other payables to current and forme	r officers, directors,	trustees,			
abi		key employees, highest compensated employee	es, and disqualified j	persons.			
3		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated third parties	Ī	125,000.	23	215,000.
	24	Unsecured notes and loans payable to unrelate	ed third parties	1		24	
	25	Other liabilities (including federal income tax, pa	ayables to related the	ırd			
		parties, and other liabilities not included on lines	s 17-24). Complete F	Part X of			
		Schedule D	•		27,256.	25	25,646.
	26	Total liabilities. Add lines 17 through 25			894,526.	26	820,037.
		Organizations that follow SFAS 117 (ASC 958	B), check here	X and			
S		complete lines 27 through 29, and lines 33 ar	nd 34.	ŀ			
ğ	27	Unrestricted net assets			779,225.	27	784,093.
ala	28	Temporarily restricted net assets			614,222.	28	571,353.
B	29	Permanently restricted net assets	-	Ī		29	
Fund Balances		Organizations that do not follow SFAS 117 (A	ASC 958), check her	re ▶□ 「			
þ		and complete lines 30 through 34.		1			
Net Assets or	30	Capital stock or trust principal, or current funds	•			30	
1886	31	Paid-in or capital surplus, or land, building, or ed	= = = = = = = = = = = = = = = = = = =	Ī		31	
et A	32	Retained earnings, endowment, accumulated in		ıs İ		32	
ž	33	Total net assets or fund balances	,	Ī	1,393,447.	33	1,355,446.
	34	Total liabilities and net assets/fund balances			2,287,973.	34	2,175,483.

	990 (2012) Air & Waste Management Association	25-60	<u>48614</u>	Pag	ge 12
Pa	t XI Reconciliation of Net Assets		<u> </u>		
	Check if Schedule O contains a response to any question in this Part XI				
			2 22		- 0
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,32	9,8	<u>52.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,46		
3	Revenue less expenses Subtract line 2 from line 1	3	<13		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,39		
5	Net unrealized gains (losses) on investments	5	9	8,8	59.
6	Donated services and use of facilities .	6			
7	Investment expenses	7			
8	Prior period adjustments .	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,35	5,4	46.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	-	•		\mathbf{x}
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis.			
	consolidated basis, or both:	,			
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit			
	review, or compilation of its financial statements and selection of an independent accountant?	io addit,	2c	[~] X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sci	nedule O			
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S				
Ju	Act and OMB Circular A-133?	gio / tauti	3a		x
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit	34		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	anou auuit	3b		
	or addito, explain with in contiduite or and describe any steps taken to undergo such addits	-		990	(2012)
			1 01111	~~~	(2012)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

25-6048614

2012

Air & Waste Management Association

Part I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this part	.) See ınst	ructions				
he orgar	nization is not a	private foundation	because it is: (For lines 1	through 1	1, check	only one b	ox.)					
1 🔲			s, or association of churc									
2 🗀	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sci	hedule E.)			, ., .,					
з 🗀			tal service organization of	-	n section	170(b)(1)(A)(iii).					
4	-	•	operated in conjunction					(b)(1)(A)(ii	i). Enter	the hospita	l's nan	ne.
	city, and stat	_	<u> </u>						,			
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governi	mental uni	t describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6		_	ent or governmental und									
7 📖			eives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general	public des	cribed	ın
	•	b)(1)(A)(vi). (Comple	•		_							
8 🖳	_		ection 170(b)(1)(A)(vi).		•							
9 X	_		eives. (1) more than 33 1				-			•	•	
			nctions - subject to certa	-	•	•				-		
			axable income (less sect	ion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nızatıon	after June	30, 197	75
		509(a)(2). (Complete	·									
10	-		perated exclusively to te	•	•			•				
11 📖	_	- :	perated exclusively for the		•				•			or
	more publicly	supported organiza	ations described in section	on 509(a)(1	I) or section	on 509(a)(2	?). See se c	tion 509 (a	a)(3). Ch	eck the bo	k that	
		· · · · · · · · · · · · · · · · · · ·	organization and comple	ete lines 1	1e through	11h.						
	a LLL Type	I b ☐ Tչ	/pell c T	ype III - Fui	nctionally	ntegrated	d	і 📖 Тур	e III - No	n-functiona	.lly integ	grated
e 📖	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified	persons of	her tha	an
	foundation m	nanagers and other t	han one or more publicly	/ supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or	section 50	9(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check th	nis box .									
g	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?			
	(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons o	lescribed i	ın (ıi) and (ııı) below	',	Yes	No
	the gove	erning body of the si	upported organization?							11g(i)		<u> </u>
	(ii) A famıly	member of a persor	n described in (i) above?							11g(ii)	<u>ш</u>	<u> </u>
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	⊋ ?					11g(iii	<u> </u>	<u>L</u>
h	Provide the f	ollowing information	about the supported org	ganızatıon((s).							
(i) Nami	e of supported	(ii) EIN	(iii) Type of organization		rganization		notify the	(vi) ls	the	(vii) Amour	it of mo	netarv
orç	janization	','	(described on lines 1-9	in col. (i) lis	•	organizat		organizátic (i) organiz	ed in the		pport	,
			above or IRC section (see instructions))	governing	ocument?	(i) of you	support?	U.S	.?			
			(see mstructions))	Yes	No	Yes	No	Yes	No			
			-									
				ļ								

Schedule A (Form 990 or 990-EZ) 2012						Dogo 9
Part II Support Schedule for (
(Complete only if you checked				n failed to qualify	under Part III. If the	e organization
fails to qualify under the tests	listed below, plea	se complete Part	······	····		
Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not				i		
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge		 				
4 Total. Add lines 1 through 3						
5 The portion of total contributions				ļ		
by each person (other than a						
governmental unit or publicly						
supported organization) included on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)						
```						
6 Public support. Subtract line 5 from line 4 Section B. Total Support					<u></u>	
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	(a) 2000	(b) 2009	(6) 2010	(u) 2011	(e) 2012	(i) iotai
8 Gross income from interest.						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
9 Net income from unrelated business						
activities, whether or not the				1		
business is regularly carried on						
10 Other income. Do not include gain					1	
or loss from the sale of capital						
assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10				1		-
12 Gross receipts from related activities,	etc (see instruction	ons)		· · · · · · · · · · · · · · · · · · ·	12	·
13 First five years. If the Form 990 is for		•	d, fourth, or fifth to	ax year as a section		
organization, check this box and stop			· · · · · · · · · · · · · · · · · · ·		( / / /	▶□
Section C. Computation of Publi		rcentage			· · · · · · · · · · · · · · · · · · ·	
14 Public support percentage for 2012 (li	ne 6, column (f) d	vided by line 11, o	column (f))		14	%
15 Public support percentage from 2011	Schedule A, Part	II, line 14	-		15	%
16a 33 1/3% support test - 2012. If the o	rganization did no	t check the box o	n line 13, and line	14 is 33 1/3% or	more, check this bo	ox and
stop here. The organization qualifies a	as a publicly supp	orted organizatior	1		-	. ▶□
1 00 400/			40 40			

b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

Sec	ction A. Public Support	slow, please comp	nete Part II.)	<u> </u>			
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(4) 2000	(2) 2000	(0) 20.0	1474	(5),2012	(1) 10101
•	membership fees received. (Do not						
	include any "unusual grants.")	1683198.	1330848.	1366969.	1195883.	1117777.	6694675.
2	Gross receipts from admissions,						
	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		•				
3	Gross receipts from activities that						<del>_</del>
3	are not an unrelated trade or bus-						
	iness under section 513	3058450.	1933566.	2400576.	1870627	2012995.	11276214.
A	Tax revenues levied for the organ-						
-	ızatıon's benefit and either paid to	:					
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	151221	005111	000000	2055542	0400000	4 5 6 5 6 6 6
6	Total. Add lines 1 through 5	4741648.	3264414.	3767545.	3066510.	3130772.	17970889.
7a	Amounts included on lines 1, 2, and		1				
	3 received from disqualified persons						0.
t	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						0.
	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6.)	L			<u> </u>		17970889.
	ction B. Total Support	<del></del>			· · · · · · · · · · · · · · · · · · ·		T
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009 3264414.	(c) 2010 3767545.	(d) 2011	(e) 2012	(f) Total 17970889.
	Amounts from line 6	4741648.	3264414.	3/6/545.	3066510.	3130//2.	1/9/0889.
10a	Gross income from interest, dividends, payments received on	ļ					
	securities loans, rents, royalties	112 210	CF 0F0	60 017	(2, 020	EE 727	250 052
	and income from similar sources	113,310.	65,859.	62,217.	62,830.	55,737.	359,953.
Ł	Unrelated business taxable income						
	(less section 511 taxes) from businesses	100 100	100 540	107 (10		144 100	404 450
	acquired after June 30, 1975		123,540.		60.000		484,450.
	Add lines 10a and 10b	222,502.	189,399.	169,829.	62,830.	199,843.	844,403.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital		5,894.	<8,072.	> 1,954.	88.	<136.>
13	assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12)	4964150.	3459707.	3929302.	3131294.		18815156.
	First five years. If the Form 990 is for		٠		· · · · · · · · · · · · · · · · · · ·	·	
	check this box and stop here	, <b></b>	,,	.,,			<b>▶</b> □
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
_	Public support percentage for 2012 (			column (f))		15	95.51 %
	Public support percentage from 2011		-		_	16	95.11 %
	ction D. Computation of Inve						
17	Investment income percentage for 20	012 (line 10c, colur	mn (f) divided by lii	ne 13. column (f))	-	17	4.49 %
18				,		18	4.89 %
	a 33 1/3% support tests - 2012. If the			on line 14, and line	e 15 is more than 3	<del></del>	
	more than 33 1/3%, check this box a						<b>►</b> X
ı	o 33 1/3% support tests - 2011. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	eck this box and <b>s</b>	top here. The orga	anızatıon qualıfıes	as a publicly supp	orted organization	<b>▶</b> ∐_
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check ti	his box and see in	structions	<u>▶</u>

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ 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.

2012
Open to Public Inspection

Name of the organization

Air & Waste Management Association

Employer identification number 25-6048614

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds of	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised	d funds
_	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	sed only
	for charitable purposes and not for the benefit of the donor o	• •	-
	impermissible private benefit?	, , , , ,	Yes No
Par		ganization answered "Yes" to Form 990, Pai	rt IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an histo	orically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of	f a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
đ	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structur	re l
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the o	organization during the tax
	year▶	-	
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements is	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements dur	ring the year >
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	he year <b>▶</b> \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expense s	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes th	ne organization's accounting for
	conservation easements		
Pa	t III Organizations Maintaining Collections o		her Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtherand	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of publ	lic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X	•	► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

			ement Asso				<u>48614</u>	
Par	t III   Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Oth	er Simil	<u>ar Asse</u>	<b>ts</b> (continue	ed)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that are a	significant	use of its	collection it	ems
	(check all that apply):							
а	Public exhibition	d	Loan or excl	nange programs				
b	Scholarly research	е	Other		<u>.                                      </u>			
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's ex	empt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or other simil	ar assets	_		
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	illection?			Yes	No_
Par	t IV Escrow and Custodial Arran	<b>gements.</b> Comple	ete if the organizatio	n answered "Yes" t	o Form 990	), Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	t X, line 21.	-					
<b>1</b> a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other assets no	ot included	_	٦ .	
	on Form 990, Part X?			ė ė			Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					
							Amount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f	<u> </u>		
	Did the organization include an amount on Fe					L	」 Yes	No ا
	If "Yes," explain the arrangement in Part XIII.		•					
Pa	t V Endowment Funds. Complete							
		(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four ye	ars back
1a	Beginning of year balance	99,441.	96,001.	51,049	<u> </u>			
b	Contributions			05.000	ļ	50 505		
С	Net investment earnings, gains, and losses	47,379.	<354.		<del> </del>	60,797.		
	Grants or scholarships		3,794.	8,654	<del> </del>	9,748.	-	
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses	445.000	00.444	25 221		51 040		
g	End of year balance	146,820.	99,441.	96,001	<u>·1</u>	51,049.		
2	Provide the estimated percentage of the curr	rent year end baland		a)) held as:				
а	Board designated or quasi-endowment		_%					
	Permanent endowment	%						
С	Temporarily restricted endowment	%						
_	The percentages in lines 2a, 2b, and 2c should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a should be a sh							
За	Are there endowment funds not in the posse	ession of the organiz	ation that are held a	ind administered for	the organ	ization	<u></u>	1
	by:							es No X
	(i) unrelated organizations			•			3a(i)	$\frac{\hat{x}}{x}$
	(ii) related organizations		0 50				3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations						3b	
B2	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm					<u></u>		
ra				or other (-)	A a a u u	- T	/d\ Paster	ralua.
	Description of property	(a) Cost or o basis (investr			Accumulat epreciation		(d) Book v	alue
	Land	Dasis (illvesti	nenty basis	(Oli 161)	CPICCIALIUI	<del>` </del>		
	Land	<u> </u>				-		
b	Buildings			2,433.	10,4	98	11	,935.
C	Leasehold improvements			2,105.	355,3			, <del>791.</del>
	Equipment			2,103.	333,3	<u></u>	170	,,,,,
e Tota	Other  I. Add lines 1a through 1e. (Column (d) must e	equal Form 990 Part	X column (R) line 1	10(c).)			208	,726.

Schedule D (Form 990) 2012 Air & Waste	Management	Association	25	-6048614 Page 3
Part VII Investments - Other Securities. Set  (a) Description of security or category (including name of security)			luction Cost on one	l of the owner wheels to be a
<del></del>	(b) Book value	(c) Method of Va	aluation: Cost or end	f-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests (3) Other				
(A)				
(B)				
(C)				
(D)	<del> </del>		<del></del>	
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related. S				
(a) Description of investment type	(b) Book value	(c) Method of va	aluation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)		<del>_</del>	<del></del>	
(6)				<del></del>
(8)				·
(9)	<u> </u>			
(10)		· <del> </del> · · · · · · · · · · · · · · · · · · ·		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►  Part IX Other Assets. See Form 990, Part X, line	15			
	Description			(b) Book value
	Docomption			(b) Book value
<u>(1)</u> (2)		<del></del>		
(3)		<del></del>		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 15.)		<b>&gt;</b>	
Part X Other Liabilities. See Form 990, Part X,	line 25.		•	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes			•	
(2) Capital lease obligation		25,646.		
(3)				
(4)				
(5)		<u> </u>		
(6)				
(7)				
(8)				
(9)				
(10)				
(11)		05 646		
Total. (Column (b) must equal Form 990, Part X, col (B) lin		25,646.		
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the te				·
liability for uncertain tax positions under FIN 48 (ASC	740) Check here if the	text of the footnote has	been provided in Pa	art XIII X

		(Form 990) 2012 Air & Waste Management Asso	cia	tion_	25-	6048614	Page 4
Par	t XI	Reconciliation of Revenue per Audited Financial Statemer	nts W	ith Revenue per R	eturi	n	
1	Totalı	revenue, gains, and other support per audited financial statements			1	3,428,	711.
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net ur	nrealized gains on investments	2a	98,859.	1		
b	Donat	red services and use of facilities	2b		]		
C	Recov	veries of prior year grants	2c				
ď	Other	(Describe in Part XIII.)	2d				
e	Add III	nes 2a through 2d		•	2e	98,	859.
3	Subtra	act line 2e from line 1	_		3	98, 3,329,	852.
4	Amou	nts included on Form 990, Part VIII, line 12, but not on line 1:	•				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other	(Describe in Part XIII.)	4b		1		
c	Add III	nes <b>4a</b> and <b>4b</b>			4c		0.
5	Totalı	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		•	5	3,329,	852.
Pai		Reconciliation of Expenses per Audited Financial Stateme	nts V	Vith Expenses per			
1		expenses and losses per audited financial statements			1	3,466,	712.
2		nts included on line 1 but not on Form 990, Part IX, line 25:					
а		red services and use of facilities	2a				
ь	Prior v	/ear adjustments	2b		1		
c	-	losses	2c		1 1		
d		(Describe in Part XIII.)	2d		1		
		nes 2a through 2d		<del></del>	2e		0.
3		act line 2e from line 1			3	3,466,	712.
4		nts included on Form 990, Part IX, line 25, but not on line 1		-	•	3, 400,	712.
а		tment expenses not included on Form 990, Part VIII, line 7b	امدا		1		
		(Describe in Part XIII )	4a 4b		1		
		nes 4a and 4b	40		* /		0.
5		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		•	4c	3,466,	
		Supplemental Information			5	3,400,	/14•
		L			<del></del>	<del></del>	
		ns part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,				2b; Part V, line	4, Part
^, IIIII D⇒7	e z; rai rt 37	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p 7, line 4: Quasi-endowment funds are use	orovide	any additional informat	ion		
- 41	- V	, time 4: Quasi endowment lunus are use	u I	or graduate		·	
eal	a [a	rships.					
501	1014	1811108.					
						<del></del>	
Dar	rt Y	, Line 2: The Association has been clas	aif	ied by the T	ъc	24 2	
- 41	L A	, line 2: the Association has been clas	SIL	red by the r	CA	as a	
tar		empt nonprofit organization under Secti	~~	E01/a\/2\ of	- L	. Tnt.	
caz	· Cv	empt nonprofit organization under secti	.011	201(6)(3) 01	LII	e Intern	laı
Rat	וומסי	e Code. Although certain activities may	, ha	doomod	1	th	
ive .	venu	e code: Arthough certain activities may	_be	deemed unite	Ιαι	ed to tr	ie
λασ	anci	ation's exempt purpose and subject to t	275	not onomati	<b>~</b> ~	1000	
1205	3001	actor a evembe barbase and subject to f	ax,	met operati	ng	TORR	
יבי	r <b>r</b> 37_	forwards are available to offset any in	~~m	e Magardina	1	3	
cai	_ <u>_ y</u> _	torwards are available to oriset dry in	nro o	e. According			
					Sche	dule D (Form 9	90) 2012

Schedule D (Form 990) 2012 Air & Waste Management Association 25-6048614 Page 5
Part XIII   Supplemental Information (continued)
provision for federal income tax is not required for the year ended
December 31, 2012; additionally, at December 31, 2012 there was
approximately \$8,240,000 in operating loss carry-forwards which will
expire in various amounts through 2028.
In accordance with generally accepted accounting principles relative to
uncertainty in income tax purposes, the Association recognizes the income
tax benefit (or liability as applicable) from an uncertain tax position
when it is more likely than not that, based on technical merits, the
position will be sustained upon examination, including resolutions of any
related appeals or litigation process. Management has determined that
there are no uncertain tax positions that qualify for either recognition
or disclosure in the financial statements.
The years of 2009 and forward are open for purposes of potential audit by
taxing authorities.

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

**Open to Public** 

**Employer identification number** 

Inspection

25-6048614

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

Air & Waste Management Association

OMB No 1545-0047

**2** (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant (c) IRC section if applicable General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Part II Part

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2012)

Page 2

25-6048614

Schedule I (Form 990) (2012)

Air & Waste Management Association

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Scholarships awarded for graduate study in the environmental field	6	20,955.	•0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the information	ר required in Part I, I	ine 2, Part III, colum	ר), and any other additional וחל,	ormation.
Schedule I, Part I, Line 2: Schola	Scholarships a	are made pa	yable dire	payable directly to the	
college or university. Educational	l institutions	utions are	advised that the	hat the funds	
are to be used for tuition and profe	fessional	l development	ent in acc	in accordance with	
university/college policies.					

## **SCHEDULE 0** (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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 Open to Public Inspection

Name of the organization

Air & Waste Management Association

**Employer identification number** 25-6048614

Form 990, Part I, Line 1, Description of Organization Mission:
of air pollution control and waste management, promote a sense of
environmental responsibility, and serve its membership and the public.
Form 990, Part III, Line 4d, Other Program Services:
Councils - The organization supports four Councils which include
Education, Sections & Chapters, Technical, and Young Professionals
Advisory. Each Council conducts business to support the vision and
mission of the organization through education, publications,
networking, volunteer development, local membership and programming,
and information exchange.
Scholarship Awards - Scholarships awarded to graduate students.
Recipients can be U.S. or non-U.S. members or non-members. All
scholarships are paid to the university/college.
Expenses \$ 293,483. including grants of \$ 20,955. Revenue \$ 0.
Form 990, Part VI, Section A, line 6: Our organization consists of over
5,800 members.
Form 990, Part VI, Section A, line 7a: Directors & officers may be either
appointed by the board (up to 3) or voted into office by the membership.
Form 990, Part VI, Section A, line 7b: Membership must approve the
acceptance of the annual audited financial statements.

Mark Rood - 205 N MATTHEWS AVE, URBANA, IL 61801

Howard Saxion - 601 36TH AVE NE, NORMAN, OK 73026

Daniel Weiss - 1000 EAST MAIN STREET, PLAINFIELD, IN 46168

232212
01-04-13
Schedul

Name of the organization  Air & Waste Management Association	Employer identification number 25-6048614
Patricia Brush - 1926 SHADOW FOREST DRIVE, KATY, TX 77494	
Diane Freeman - 651 COLBY DRIVE, WATERLOO, ONTARIO, CANAD	A
Pamela Heckel - 488 COMPTON ROAD, WYOMING, OH 45215	
Harry Klodowski - 6400 BROOKTREE COURT SUITE 250, WEXFORD	, PA 15090
Raghavan Ramanan - 6555 BERRYWOOD DRIVE, DOWNERS GROVE, I	L 60516
Naresh Kumar - 3420 HILLVIEW AVENUE SUITE 8, PALO ALTO, C	A 94304
Jennifer Tullier - 17170 PERKINS ROAD, BATON ROUGE, LA 70	810
Brent Nixon - 9830 COLONNADE BLVD, SAN ANTONIO, TX 78230	
Merlyn Hough - 1010 Main Street, Springfield, OR 97477	
Michael Miller - 3420 Hillview Avenue , Palo Alto, CA 94	304
Sara Head - 1220 Avenida Acaso, Camarillo, CA 93012	
Jeanne C Ng - Flat 30H, Tower 2, Smithfield Court, HONG K	ONG
Laki Tisopulos - 21865 E. Copley Drive, Diamond Bar, CA 9	1765
Brad Waldron - One Caesars Palace Drive, Las Vegas, NV 89	109
Form 990, Part XII, Line 2c: The organization has not cha	nged its
oversight or selection process related to the audit durin	g the year.

# Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you	are filing for an Automatic 3-Month Extension, complete	only Part	t I and check this box			ightharpoons
	are filing for an Additional (Not Automatic) 3-Month Ext					
	complete Part II unless you have already been granted a					
	nic filing (e-file). You can electronically file Form 8868 if yo					
	t to file Form 990-T), or an additional (not automatic) 3-mon					
	to file any of the forms listed in Part I or Part II with the exc					
	al Benefit Contracts, which must be sent to the IRS in pape	er format (s	see instructions) For more details of	on the electro	onic filing of	this form,
	w irs.gov/efile and click on e-file for Charities & Nonprofits					
Part	<del>""</del>				,	
4 corpo	oration required to file Form 990-T and requesting an autom	natic 6-mor	nth extension - check this box and	complete		. —
antlo						
	r corporations (including 1120-C filers), partnerships. REM ncome tax retuins	ICs, and tr	usts must use Form 7004 to reque	st an extensi	on of time	
			I MI CLE III SAMARA SHARANA	l <del></del>	1 4 - 5 4	(CINI) as
Type o	r Name of exempt organization or other filer, see instru-	ctions.		Employer	dentification	number (EIN) or
orint	Adam C Management Age			1	25-604	10611
File by th	Air & Waste Management Asso			Coolel con	urity numbe	
no í buig are qa,e				Social Sect	anty numbe	(3314)
erum Se				1		
instructio	Pittsburgh, PA 15222-1435	neigh addi	ress, see instructions			
	PICCSDUIGH, PA IJZZZ 1433					
Entor t	ne Return code for the return that this application is for (file	a eenarai	te application for each teturn)			0 1
Litter	the return code for the return that this application is for the	a soparar	te application for each return)			
Applic	ation	Return	Application			Return
Is For	ation	Code	Is For			Code
	990 or Form 990 EZ	01	Form 990-T (corporation)	·····		07
	990 BL	02	Form 1041-A			08
	4720 (individual)	03	Form 4720			09
	990-PF	04	Form 5227		<del></del>	10
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	20 , (300 10 , (27 ) 1 , (27 ) 1 , (27 )		Form 8870			12
	990-T (trust other than above)	1 06	·*		·	
	990-T (trust other than above)  W.G. Braun	06				
Form 9	W.G. Braun		oulevard - Pittsb	urgh, l	PA 152	22-1435
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Form 9	W.G. Braun books are in the care of $\blacktriangleright$ 420 Fort Duque ephone No $\blacktriangleright$ 412-232-3444	sne B	FAX No 🕨	urgh, l	PA 152	22-1435
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Form 8868 (Rev. 1-2013)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ext	ension, c	omplete only Part II and check this	box .		▶ X
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Form 990-T (trust other than above)	06	Form 8870			12
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		ach a list with the names and EINs o	f all membe	ers the exte	ension is for.
<del></del>	Noven	ber 15, 2013.			
5 For calendar year $2012$ , or other tax year beginning	·	, and endir	<u> </u>		
6 If the tax year entered in line 5 is for less than 12 months,	check rea	son: Initial return	Final id	eturn	
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7 State in detail why you need the extension	<del></del>			<del></del>	
Additional time is needed to	prepa	re a complete and	accur	<u>ate re</u>	eturn.
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8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax less any			_
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tax payments made. Include any prior year overpayment a	illowed as	a credit and any amount paid			
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c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using					
EFTPS (Electronic Federal Tax Payment System) See instructions			8c	\$	0.
Signature and Verifica	ition mu	ust be completed for Part II	only.		
Under penalties of perjury, I declare that I have examined this form, inclu	iding accor	npanying schedules and statements, and	to the best c	f my knowle	edge and belief,
it is true, correct, and complete, and that I am authorized to prepare this	torm.			n	12 (-
Signature - Kruy ). Smill Title >	<u> </u>	A	Date	> 8-1	<i>/</i> 3 <i>-</i> /3

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