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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047 2013

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public
 Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A	For t	he 2013 calen	dar year, or ta	k year begir	nning		, 20	13, an	d endir	ıg		1	,	
В	Check	ıf applicable	C Name of organ	nization MISS	ISSIPPI WATE	ER & POLLUTI	ON CONTROL	OPERA	TORS AS	SOCIATION	D Employ	er Identi	fication Number	
	\square	ddress change	Doing Busines	s As							64-0	0592	428	
	Пм	ame change	Number and st	treet (or P.O bo	x ıf mail is not de	livered to street	address)		Room/	suite	E Telepho	ne numb	ег	
	Пт	stial return	P. O. BOX	< 720399)				1		(60)	1) 8:	57-0512	
	Пτ	erminated			country, and ZIP	or foreign posta	Il code							
	Π _A	mended return	JACKSON				м	ıs 3	9272-	-0399	G Gross n	ecempts S	\$ 292,433	1.
	Н	pplication pending	F Name and add	tress of principal	officer				22.2		group return			11
	<u> </u>	,	DOUG BARK	ER P O B	OX 300	FLORA		MS 3	9041	H(b) Are all	subordinates attach a list. (:	included?		
$\overline{}$	Tax	exempt status		X 501(c) (insert no)	4947(a)(1		527	lf 'No,' :	attach a list. (see instru	uctions)	
<u> </u>			w.mwpcoa.		<u> </u>		1.717(0)(1	7 -	102.	H(c) Group	exemption nu	mher ►		
K		n of organization	X Corporation	Trust	Association	Other >		I Voor	of formati				gal domicile MS	
	rt I	Summar		I IIust]	ASSOCIATION	I Culei		E 166	OI IOI III au	197	<u> </u>	itale of le	gardomicile M.	·
Г	1		y oe the organizat	tion's missio	n or most sig	inificant activ	rities	TDA TAI	TNC TE	CTINC MC L	IATED AND	חוו ו וויי	ION CONTROL O	DEDVAUOG
	•	Drieny accord	oc the organizat	10113 11113310	ii oi iilost sig	innoant activ	ilics	TVATIN	THG' IF	21 TMG 112 1	HIEK WIND	LOPPO!	TOW CONTROL O	LEVATOR2
Governance									 -		-	- -		
ia.														. – – – –
Ş.	2	Check this bo	x ► if the	organization	n discontinue	d its operation	ons or disp	osed o	f more t	– – – – han 25% c	of its net as	 sets.		
	3		ting members o									3		1,558
•ಕ ഗ	4	Number of inc	dependent votin	g members	of the govern	ning body (P	art VI, line	1b)				4		0
Activities	5		of individuals e									5		4
흦	6		of volunteers (e									6		0
ĕ			d business rev			• •						7a		0.
	þ	Net unrelated	business taxab	ole income fr	om Form 990	0-1, line 34						7b		
		04-16-41	dt- (D-	41/00 C 4	L.\						rior Year		Current \	
e	8		and grants (Pa		•						66,4),850.
Revenue	9 10	-	ice revenue (Pa come (Part VIII		•						286,0		241	<u>,565.</u>
ě	11		e (Part VIII, colu									31.		16.
_	12		e (Fait VIII, coit e — add lines 8				-				352,5	20	202	121
	13	-	milar amounts i								332,3	20.	292	2,431.
	14		to or for member	•		•								
	15	•		•	• •	•					67. 7	150		
es	ı		er compensation		-		(A), lines a	- (U) ·		•	67,3	52.	69	, 233.
Expenses			fundraising fees (Part IX, column (A), line 11e)											
<u>.</u>	Ь		sing expenses (l					Д						
	17		es (Part IX, col					$\{ \cdot \cdot \cdot \}$		·	250,2	13.	245	<u>,895.</u>
								317,5	65.	315	,128.			
	19	Revenue less	expenses. Sub	tract line 18	from ine 12	17'	· · · · \ <u>ē</u>	<u>É</u>		-	34,9	63.	-22	2,697.
te o						SOFAL	IIT	1		Beginni	ng of Currei	nt Year	End of Y	ear
Net Assett Fund Balan	20	``	Part X, line 16)		$\cdot \cdot \cdot \cdot \bigcirc$		<u>, U.L.</u>	ليد		·	229,0			3,348.
1 5 5	21	Total liabilities	s (Part X, line 2	6)		• • • • • •				·	25,9	97.	27	<u>7,994.</u>
	22	Net assets or	fund balances.	Subtract lin	e 21 from line	e 20	· · · · · ·	· · · ·		.	203,0)51.	180	354.
Pa	irt II	Signatu	re Block											
Und	er penal	Ities of perjury, I dec	clare that I have examer (other than officer	mined this return	, including accor	npanying schedu	iles and statem	ents, an	d to the be	st of my know	ledge and be	lief, it is tr	rue, correct, and	
	ACIC. D	eciaration or prepar	er (other train trincer) is trased oil at	unionización or wi	nicii preparei na	s any knownsut				F-7			
		Sanah	re of officer	BON	rez_							<u>/ ゲ/</u>	14	
Sig		Signatu	ire of onicer							Da	ate -			
He	re		G BARKER										. <u> </u>	
			r print name and title	•									OTIL	
		1 "	reparer's name		Preparers sig	inanure	11.	V I	ate		Check	Χļτ	PTIN	
Pa			E T BOYD		LIN	some	1182,	<u> </u>	14/30	/14	self-employe	ed	P00743360)
	epar				YD, CPA						1			
Us	e Or	1ly Firm's addre	ess 2540	MIDWAY	røap	_					Firm's EIN	26-	-0112295	
			CLINT		1/			056			Phone no	(601	1) 922-31	73
Ma	the I	IRS discuss thi	s return with the	e preparer s	hown above?	? (see instru	ctions)						. X Yes	No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2013) MISS	SISSIPPI WATER	& POLLUTION CONTROL	OPERATORS ASSOCIA	TION	64-0592428	Page 2
Par	t III Statemei	nt of Progra	m Service Accomp	lishments			
	Check if Sc	hedule O contai	ns a response or note to	any line in this Part I	II	<u> </u>	<u></u> []
1	Briefly describe the	organization's	mission:				
	TRAINING, T	ESTING MS	WATER AND POLL		- 		
2	_		significant program serv				
					• • • • • • • • • • • • • • • • • • • •	· · · · · Yes	X No
3	If 'Yes,' describe the		es on Schedule O. ding, or make significant o	hanges in how it co	nducte any program serv	ices? Yes	X No
•	If 'Yes,' describe th			andinges in now it con	iduois, any program serv		<u> </u>
4	Describe the organ	ization's progra	m service accomplishmer	nts for each of its thr	ee largest program servic	es, as measured by expens	es.
	Section 501(c)(3) a	ind 501(c)(4) on	ganizations and section 4 enue, if any, for each pro	947(a)(1) trusts are i	required to report the amo	ount of grants and allocation	s to
4 a	(Code:) (Expenses	\$	including grants of	\$) (Revenue \$)
			WATER OPERATOR		-		
					- 	TORS AND TESTING	AND
	COURSES FOR	RECERTIF	ICATION OF CURR	ENT OPERATOR	S_WERE_PROVIDED	FOR MEMBERS.	
4 b	(Code:	_) (Expenses	\$	including grants of	\$) (Revenue \$)
							·
							·
	· (Codo:	\	<u> </u>	including agests of	<u> </u>) (Revenue \$	
40	(Code:	_) (Expenses	Y	including grants of	¥) (Ivevenue 3	
							
							·
							·
4 d	Other program ser	vices. (Describe				•	
	(Expenses \$	 	including grants	of \$) (Revenue	\$)
4 0	Total program ser	rvice expenses	; >				

64-0592428

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,' complete 1 х 2 Х Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 3 Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III. Х 5 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, 6 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part III Х 8 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 Х 9 10 Х If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total 11 b Х c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total 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 Х Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11 e 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 . . Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete 12a Х Schedule D, Parts XI, and XII. Х 12 b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If Yes,' complete Schedule E. . . . 13 14a Did the organization maintain an office, employees, or agents outside of the United States?..... 14a Х b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b 15 Х Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' Х complete Schedule G, Part III. . 19 20 Х 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H

20 b

Form 990 (2013) MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If Yes, complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		×
ŧ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
2 5 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
t	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		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		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If Yes, 'complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		_x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	olf 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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If Yes, complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
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	х	

BAA

Form 990 (2013)

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response or note to any line in this Part V			. [
	7	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	- 1		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	х	
2 a 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			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
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.			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 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 as charitable contributions?	6 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a 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?	7 a		х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
Form 8282?	7с		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		Х
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		х
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business			х
holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			Х
a Did the organization make any taxable distributions under section 4966?	9 a		X
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:	i		
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	4.		
a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b If Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		L

Par	t VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	, and า	l for	
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
t	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5 e	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		 ^
7.	Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more	- □-	X	
/ a	members of the governing body?	7 a	х	
	- · ·	<u> </u>		
t	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8 a	Х	
t	Each committee with authority to act on behalf of the governing body?	8 b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Je C	ode	
	The second of th		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10 a	X	<u> </u>
	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?	10 b		
11 :	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	X	\vdash
		II a		<u> </u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	4- 1		т —
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	├
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	<u> </u>	х
C	: Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	х	
13	Did the organization have a written whistleblower policy?	13		X
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?			
2	The organization's CEO, Executive Director, or top management official	15a		x
ŧ	Other officers of key employees of the organization	15 b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)	\neg		\vdash
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		×
t	of 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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		<u> </u>
Sec	tion C. Disclosure	.00		——
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for pu	– – – ıblic	
	inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year	e to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	u.		
•			357-	0512
ВАА				2013)

•		
Form 990 (2013) MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION	64-0592428	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Contractors	Compensated Employe	es, and
Check if Schedule O contains a response or note to any line in this Part VII	<u></u> .	<u></u> 🔲
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensate	ed Employees	
 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending vorganization's tax year. List all of the organization's current officers, directors, trustees (whether individuals or organizations), rec 		
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 employees. 	e.'	
 List the organization's five current highest compensated employees (other than an officer, director, truster who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$10 organization and any related organizations. 		
 List all of the organization's former officers, key employees, and highest compensated employees who re of reportable compensation from the organization and any related organizations. 	eceived more than \$100,000	
 List all of the organization's former directors or trustees that received, in the capacity as a former directorganization, more than \$10,000 of reportable compensation from the organization and any related organization. 		
List persons in the following order individual trustees or directors, institutional trustees, officers, key employees employees; and former such persons.	s; highest compensated	
Check this box if neither the organization nor any related organization compensated any current officer, dire	ector, or trustee.	

		(C)								
(A) Name and Title	(B) Average hours per week (list	one bo offic	x. uni	ess pe d a dir	erson	more that is both trustee	an)	(D) Reportable compension from the organization	(E) Reportable compensation from colleged extractions are selected as a selected extraction of the se	(F) Estimated amount of other compensation
	any hours for related organiza- trons below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
_(1)_DAVID_FAUST	_8.00									
PRESIDENT				Х			L_	0.	0.	0.
(2) MARION BOODRO MARSAC PRESIDENT-ELECT	_4.00			х				0.	0.	0.
	_4.00			х				0.	0.	0.
(4) LINDA GOLLADAY ADMINISTRATOR	40.00					Х		60,292.	0.	0.
(5)						Λ		00,232.		
(6)					_			:		
			·							
(8)										
(9)										
(10)										
(11)										
(12)									-	
(13)										
(14)										

64-0592428

Part VII Section A. Officers, Directors, Trus	(B)	\Cy	<u> </u>	(C		c 3,	anı	i riighest con	ipensated Linp	Oyee:	• (conuncea)
(A) Name and title	Average hours per week	box, unless person is both an officer and a director/trustee)					an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from metaled organizations	(F) Estimated amount of other compensation	
	(list any hours for related organiza - tions below dotted line)	individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	-ormer	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fn orga and	om the nization I related inizations
15)											-
16)											
17)											
18)											
19)											
20)	 										-
21)											
22)	 										
23)											-
24)											
25)											
1 b Sub-total							•	60,292.	0.		0
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							-	60, 202			
2 Total number of individuals (including but not limited from the organization							eive	60,292. d more than \$100,0	0. 000 of reportable con	npensal	on 0
											Yes No
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such inc	or trustee lividual	e, key	em	ploy	ee,	or hig	ghes	st compensated en	nployee	. 3	x
4 For any individual listed on line 1a, is the sum of repretented organization and related organizations greater the control of the control o	ortable co an \$150,	ompe 000?	nsat <i>If "</i> Y	tion 'es'	and com	othei plete	r coi Sch	mpensation from hedule J for			-
 such individual										. 5	_ X
ection B. Independent Contractors										-, -	
 Complete this table for your five highest compensate compensation from the organization. Report compen 	d indepe sation fo	nden r the	t cor cale	ntrac enda	ctors r yea	that ar en	reci ding	eived more than \$1 I with or within the	100,000 of organization's tax ye	ar.	
(A) Name and business address				(B) Description o)	(C) Compensation					
					_						
2 Total number of independent contractors (including b	out not lin	nited	to #	1050	liete	de he	ove) who received mo	re than		
\$100,000 of compensation from the organization	>	cu	.U	.036	11316	.u av	J46	, who received life	io dian		

Part VIII Statement of Revenue (A) Total revenue (B) (C) (D) Related or Unrelated Revenue exempt business excluded from tax function revenue under sections revenue 512-514 1 a Federated campaigns CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS b Membership dues 1 b 50,850 c Fundraising events 1 c 1 d d Related organizations e Government grants (contributions) . . f All other contributions, gifts, grants, and similar amounts not included above . . g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 50,850 PROGRAM SERVICE REVENUE **Business Code** 2a EDUCATIONAL COURSES _ N/A 97,890 97,890 b EXHIBIT FEES N/A 24,468 24,468 n n C TESTING FEES N/A 10,995 10,995 0 d LOG BOOKS, MANUALS N/A 8,253. 0 0. 8,253 LATE FEES & MISCELLANEOUS N/A 4,759 4,759 0 0. f All other program service revenue . . . 95,200 95,200 0 0. 241,565 Investment income (including dividends, interest and 16 16 n Income from investment of tax-exempt bond proceeds . . . Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) . . d Net rental income or (loss) (i) Securities (n) Other 7 a Gross amount from sales of assets other than inventory. **b** Less. cost or other basis and sales expenses . . . c Gain or (loss) 8 a Gross income from fundraising events OTHER REVENUE (not including . . \$ of contributions reported on line 1c). See Part IV, line 18. **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. **b** Less: direct expenses c Net income or (loss) from gaming activities ▶ 10 a Gross sales of inventory, less returns **b** Less; cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a d All other revenue e Total. Add lines 11a-11d 292 241,581 0 0

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).	
Check if Schedule O contains a response or note to any line in this Part IX	Т

Do r	oot include amounts reported on lines rb, 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				
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, trustees, and key employees	51,292.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages	10,596.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).			_	
9	Other employee benefits	2,400.			
10	Payroll taxes	4,945.			
11	Fees for services (non-employees):				
	Management				
	Legal		·		
	Accounting	3,150.			
	Lobbying				
	Professional fundraising services See Part IV, line 17				
-	Investment management fees				
_	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
	Advertising and promotion				
13	Office expenses	20,050.			
14	Information technology		 -	-	
15	Royalties	0.000			
16 17	Travel	9,000.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	16,308.			
	Conferences, conventions, and meetings	91,275.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			ļ	
23 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	1,484.			
	expenses on Schedule O.)			<u> </u>	
	SCHOLARSHIPS	2,000.			
	TRAINING_EXPENSES	61,741.			
C	DISTRICT_REBATES & REFUNDS _	13,133.			
	MANUALS & TESTS	17,520.		-	
	All other expenses	10,234.		·	
25	Total functional expenses. Add lines 1 through 24e	315,128.		-	
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				
	Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2013) MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	<u></u>		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	210,748.	1	190,048.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	18,300.	3	18,300.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other 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). Complete Part II of Schedule L		6	
AS	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
T	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10 b		10 c	
	11	Investments — publicly traded securities		11	
	12	Investments — other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11	-	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	229,048.	16	208,348.
	17	Accounts payable and accrued expenses		17	2001510.
	18	Grants payable	-	18	
	19	Deferred revenue	22,915.	19	25,475.
L	20	Tax-exempt bond liabilities		20	
I A	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
4811-1-18	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
į	23	Secured mortgages and notes payable to unrelated third parties		23	
S	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,082.	25	2,519.
	26	Total liabilities. Add lines 17 through 25	25,997.	26	27,994.
⊣az		Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete	-		· -
-		lines 27 through 29, and lines 33 and 34.			
S	27	Unrestricted net assets		27	
≪ ⊗⊞⊢⊗	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
O R		Organizations that do not follow SFAS 117 (ASC 958), check here ► X and complete lines 30 through 34.			
F 320	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund	, , , , , , , , , , , , , , , , , , , ,	31	
BALANCES	32	Retained earnings, endowment, accumulated income, or other funds	203,051.	32	180,354.
Ñ	33	Total net assets or fund balances	203,051.	33	180,354.
Ĕ	34	Total liabilities and net assets/fund balances	229,048.	34	208,348.
DA					F 000 (0042)

BAA

Form **990** (2013)

Form 990 (2013) MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION	54-05	592428	_	Pa	ge 12
Part XI Reconciliation of Net Assets					
Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			<u> </u>	. П
1 Total revenue (must equal Part VIII, column (A), line 12)	L	1	2	92,4	31.
2 Total expenses (must equal Part IX, column (A), line 25)	· · [2	3	15,1	28.
3 Revenue less expenses. Subtract line 2 from line 1	· · [3		22,6	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	· · [4		03,0	
5 Net unrealized gains (losses) on investments	Г	5			
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			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
Part XII Financial Statements and Reporting	٠٠٠٠	10	18	<u>80,3</u>	54.
					_
Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			<u> </u>	
				Yes	No
1 Accounting method used to prepare the Form 990: Cash Accrual X Other					
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a	x	
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a				
X Separate basis Consolidated basis Both consolidated and separate basis					
b Were the organization's financial statements audited by an independent accountant?			2 b		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:					
Separate basis Consolidated basis Both consolidated and separate basis				ļ	
				-	Ì
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,		2 c	х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	ngle 		3 a		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require					
or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>		3 b		
BAA			Form	990 (2	2013)

TEEA0112 07/08/13

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

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

• 5	Section 501(c)(4), (5), or (6) org	anizations: Complete Part III.			
Name	of organization			Employer identifica	tion number
MIS	SSISSIPPI WATER & P	OLLUTION CONTROL OPERATORS	ASSOCIATION	64-0592428	8
Par	t I-A Complete if the o	rganization is exempt under section	on 501(c) or is a s	section 527 organiz	zation.
1	Provide a description of the or	ganization's direct and indirect political campa	aign activities in Part N	<i>I</i> .	
2					
3					
Par	t I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any excis	e tax incurred by the organization under secti	on 4955		
2	Enter the amount of any excis	e tax incurred by organization managers unde	er section 4955		
3	If the organization incurred a s	section 4955 tax, did it file Form 4720 for this	year?		· · · Yes No
4 a	Was a correction made?				Yes No
<u>t</u>	If 'Yes,' describe in Part IV.				
Par	t I-C Complete if the o	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3).	
1		ended by the filing organization for section 52			
2		organization's funds contributed to other orga			
3		itures. Add lines 1 and 2. Enter here and on F			
4	Did the filing organization file I	Form 1120-POL for this year?			· · · Yes No
5	organization made payments. amount of political contribution	and employer identification number (EIN) of al For each organization listed, enter the amous is received that were promptly and directly de anomattee (PAC). If additional space is	nt paid from the filing o	rganization's funds. Also political organization, suc	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2013

C. b. J. b. 0 (Farry 000 to 000 F7) 200	10				Dogo 9
Schedule C (Form 990 or 990-EZ) 20 Part II-A Complete if section 501(the organizatio	n is exempt under se			
		gs to an affiliated group (and	d list in Part IV each a	ffiliated group member's na	ime,
	= :	share of excess lobbying ex		5 ,	•
_		ed box A and 'limited contro			
	Limits on Lobby	ing Expenditures ans amounts paid or incur		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditur	res to influence publi	c opinion (grass roots lobby	ing)		
		islative body (direct lobbying	•-		
c Total lobbying expenditur	_	• • • • • • • • • • • • • • • • • • • •	~ ,		
d Other exempt purpose ex					
e Total exempt purpose ex	*				1
f Lobbying nontaxable ame	ount. Enter the amou		n		
If the amount on line 1e, colu		The lobbying nontaxable			
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	s over \$500,000.		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the excess	s over \$1,000,000		<u> </u>
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	mount (enter 25% of	line 1f)		. [
h Subtract line 1g from line	1a. If zero or less, e	enter -0			
i Subtract line 1f from line	1c. If zero or less, e	nter -0			
j If there is an amount othe section 4911 tax for this		r line 1h or line 1i, dıd the oı			· · · · · · Yes No
(Som	e organizations tha	4-Year Averaging Period l at made a section 501(h) e as below. See the instruct	lection do not have t	o complete all of the five	
	Lobt	oying Expenditures During	4-Year Averaging P	eriod	
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					

f Grassroots lobbying expenditures BAA

e Grassroots ceiling amount (150% of line 2d, column (e))

Schedule C (Form 990 or 990-EZ) 2013

Par	(election under section 501(h)).			III 37			
Ear a	or each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description		(a)			(b)	
		Yes	No		Amo	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
а	Volunteers?	[
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
	: Media advertisements?						
d	Mailings to members, legislators, or the public?						
	Publications, or published or broadcast statements?						
	Grants to other organizations for lobbying purposes?						
	Direct contact with legislators, their staffs, government officials, or a legislative body?						
	n Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-					_
	Other activities?						
	Total. Add lines 1c through 1						
-	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	ļ '	İ				
	of Yes,' enter the amount of any tax incurred under section 4912	<u> </u>					
	If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			-			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	'					
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	/o\/E\					
I ai	section 501(c)(4), section 501 section 501(c)(4), section 501	(C)(O)	, ог				
	30011011 00 1(0)(0).					Yes	No
4	Were substantially all (90% or more) dues received nondeductible by members?			Г	1	X	140
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	_ <u>^</u>	
_	Did the organization make only in-house lobbying experimitaes of \$2,000 or less?			-	3		- V
						347-1	X
<u> </u>	Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	Part i	i, or s II-A,	line 3	, is	ri(c)	
1	Dues, assessments and similar amounts from members		1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
а	Current year		2a				
	Carryover from last year		2 b				
	: Total		2 c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<i>.</i>	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditures (see instructions)		5				
Par							
Provi	ide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list); PII-B, line 1. Also, complete this part for any additional information.	art II-A	, line 2	2; and			

Schedule C (F	Form 990 or 990-EZ) 2013 MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION 64-0592428	Page 4
Part IV	Supplemental Information (continued)	
		.
	~	
 -		

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

				1			
	SSISSIPPI WATER & POLLUTION CO				64-059242	<u>8</u>	
Par	Organizations Maintaining Dono Complete if the organization answer	or Aavisea Funas or Ot ered 'Yes' to Form 990 !	ner Similar Funds Part IV line 6	or Acco	ounts.		
		(a) Donor advised		(b) Fu	nds and other a		
1	Total number at end of year	(a) Donor advised	idikas	(5) (5	ndo dila ottici i	100001113	
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 are the organization's property, subject to the org				_Ye s	. Г	No
6	Did the organization inform all grantees, donors, for charitable purposes and not for the benefit of	the donor or donor advisor, or	for any other purpose of	onferring		_	
	impermissible private benefit?				· · · · Yes	<u>; </u>	No
<u>Rai</u>	Conservation Easements. Complete if the organization answer	ered 'Yes' to Form 990,	Part IV, line 7.				
1	Purpose(s) of conservation easements held by the	ne organization (check all that	apply).				
	Preservation of land for public use (e.g., recr	reation or education)	Preservation of an	historically	important land	area	
	Protection of natural habitat		Preservation of a co	ertified his	toric structure		
	Preservation of open space						
2	Complete lines 2a through 2d if the organization	held a qualified conservation of	contribution in the form o	of a conser	vation easeme	nt on the	
	last day of the tax year.		Г	:- " H¢	-1-1 -4 4b - F1	-64b - T	V
	a Total number of conservation easements		-	<u> </u>	eld at the End	or the 1a	ах теаг
	Total number of conservation easements		L.	2 a 2 b			
	 Number of conservation easements on a certified 			2 c			
			`´	-20			
	Number of conservation easements included in (structure listed in the National Register			2 d			
3	Number of conservation easements modified, tra tax year ▶	ınsferred, released, extinguish	ed, or terminated by the	organizati	on during the		
4	Number of states where property subject to cons	ervation easement is located	<u> </u>				
5	Does the organization have a written policy regard and enforcement of the conservation easements		• •		Tyes	, [No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing con-	servation easements du	ring the ye	ear		
7	Amount of expenses incurred in monitoring, inspi	ecting, and enforcing conserva	ation easements during t	the year			
8	Does each conservation easement reported on la and section 170(h)(4)(B)(ii)?			(h)(4)(B)(i)	TYes	. Г	No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote to the	s conservation easements in in easements in in easements in in	ts revenue and expense ements that describes th	statemeni ne organiza	t, and balance : ation's accounti	sheet, and ing for	nd
Pai	conservation easements. † III Organizations Maintaining Colle	ctions of Art, Historica	I Treasures, or Ot	her Sim	ilar Assets.	,	
	Complete if the organization answer	ered 'Yes' to Form 990,	Part IV, line 8.				
1 :	a If the organization elected, as permitted under SI art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its financial	eld for public exhibition, educa	tion, or research in furth	nent and b erance of	alance sheet w public service,	orks of provide,	
1	b If the organization elected, as permitted under SI historical treasures, or other similar assets held f following amounts relating to these items:	or public exhibition, education	, or research in furtherar	nce of pub	lic service, prov	of art,	
	(i) Revenues included in Form 990, Part VIII, lir						
	(ii) Assets included in Form 990, Part X						
	If the organization received or held works of art, amounts required to be reported under SFAS 11	6 (ASC 958) relating to these	tems:			ng	
	a Revenues included in Form 990, Part VIII, line 1				·		
1	Assets included in Form 990, Part X				► S		

			PERATORS ASSOCIATION				Page 2
Part III Organizations Maintair	ning Collection	ns of Art, Hist	orical Treasures, o	r Other Similar As	sets (c	ontınu	ed)
3 Using the organization's acquisition, items (check all that apply):	accession, and oth	ner records, check	any of the following that	are a significant use of i	ts collecti	ion	
a Public exhibition		d Loan	or exchange programs				
b Scholarly research		e Other					
c Preservation for future generation	ons						
4 Provide a description of the organiza Part XIII.	ation's collections a	nd explain how the	ey further the organization	on's exempt purpose in			
5 During the year, did the organization to be sold to raise funds rather than	to be maintained a	s part of the organ	ization's collection?				No
Part IV Escrow and Custodial line 9, or reported an am				wered 'Yes' to Forn	า 990, F	Part IV	,
1 a Is the organization an agent, trustee on Form 990, Part X?					Yes		No
b If 'Yes,' explain the arrangement in F	Part XIII and comple	ete the following ta	able				
					Amount	t	
c Beginning balance				1c			
d Additions during the year				1d			
e Distributions during the year	. <i></i>			1e			
f Ending balance	. 			1f			
2 a Did the organization include an amo	unt on Form 990, F	Part X, line 21?			Yes		No
b If 'Yes,' explain the arrangement in F	Part XIII. Check her	e if the explantion	has been provided in Pa	art XIII	<u></u> .	ا []
Part V Endowment Funds. Co	mplete if the or	canization ans	wered 'Yes' to Forn	n 990. Part IV. line	10.		
	(a) Current year	(b) Prior yea		<u> </u>	T	our years	hack
1 a Beginning of year balance	(a) carron jour	(5))00	(6) 1110 30010 000	(a) Three years back	1	our jeurs	- Duck
b Contributions						_	_
c Net investment earnings, gains, and losses	-		-				
d Grants or scholarships					-	-	
Other expenditures for facilities and programs			-				
f Administrative expenses							
g End of year balance		-			 		
2 Provide the estimated percentage of	the current year e	nd halance (line 1	u column (a)) held as:	<u> </u>			
a Board designated or guas⊢endowm	-	%	g, oolanii (a)) nola ao.				
b Permanent endowment ►							
c Temporarily restricted endowment		8					
The percentages in lines 2a, 2b, and							
3 a Are there endowment funds not in the organization by	•	•				Yes	No
(i) unrelated organizations					- 3a(i)		ļ
(ii) related organizations							L
b If 'Yes' to 3a(ii), are the related orga					. 3b		<u> </u>
4 Describe in Part XIII the intended us	es of the organizat	ion's endowment t	funds.				_
Part VI Land, Buildings, and E	quipment.						
Complete if the organiza	ation answered	'Yes' to Form !	990, Part IV, line 11	a. See Form 990, P	art X, li	ne 10.	
Description of property		st or other basis investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	lue
1a Land			, ,		1		
b Buildings					1		
c Leasehold improvements					\vdash	_	
4 Equipment	—		 	 	+		

Schedule D (Form 990) 2013

64-0592428

Part VII	Investments -	- Other Securities.	os' to Form 000 D	art IV, line 11b. See Form 990,	Port V. line 12
(a) Des		gory (including name of security)	(b) Book value	(c) Method of valuation Cost or end	
	•				, , , , , , , , , , , , , , , , , , , ,
		s			
3) Other			-		
(A)					
B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H) 					
(I) 					
Total. (Colur	mn (b) must equal Form 9	90, Part X, column (B) line 12) .► - Program Related.			
Part VIII	Complete if the	e organization answered "	res' to Form 990. P	art IV, line 11c. See Form 990,	Part X. line 13.
	(a) Description of		(b) Book value	(c) Method of valuation: Cost or end	
(1)					· · · · · · · · · · · · · · · · · · ·
(2)					
(3)					
(4)					
(5)			_		
(6)					
(7)					
(8)					
(9)					
(10)					
	Other Assets.	90, Part X, column (B) line 13) . ▶			.
Part IX	Complete if the	e organization answered `	res' to Form 990. P	art IV, line 11d. See Form 990,	Part X. line 15.
	· · · · · · · · · · · · · · · · · · ·		scription		(b) Book value
(1)					
(2)		· · · ·			
(3)					
(4) (5)		-			
(6)					
(7)					
(8)					
(9)					
(10)	·				
			ine 15.)	<u> </u>	<u> </u>
Part X	☐ Other Liabilitie Complete if the ore	es.	orm 000 Dort IV line 11	o or 116 Coo Form 000 Dod V line 26	-
		yanızadon answered Tes 10 Fo otion of liability	(b) Book value	e or 11f. See Form 990, Part X, line 25)
(1) Fede	eral income taxes	CLOT OF HADRING	(b) book value		
	ROLL TAXES P	PAYABLE	2,51	9.	
(3)					
(4)					
(5)					
(6)				_	
(7)				_	
(8) (9)				\dashv	
(10)				\dashv	
(11)				\dashv	
	mn (b) must equal Form 0	990, Part X, column (B) line 25)	► 2,51	-	
				ত । ncial statements that reports the organization's I	iability for uncertain
		Check here if the text of the footnote t			
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Schedule D (Form 990) 2013 MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION	64-0592428	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 ө	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1		
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional information.	-
		
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Schedule D (Form 990) 2013	MISSISSIPPI WATER	& POLLUTION CONTROL OPERATORS	ASSOCIATION	64-0592428	Page 5
Part XIII Supplementa	I Information (co	ntinued)			
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					. – – – –
			- -		_

SCHEDULE O (Form 990 or 990-EZ)

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 2013

Open to Public Inspection

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Department of the Treasury Internal Revenue Service Employer identification number Name of the organization 64-0592428 MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION Pt_VI,_Line_11b EXECUTIVE COMMITTEE REVIEWS THE FORM 990; AUDIT COMMITTE REVIEWS ALL FINANCIAL RECORDS EACH YEAR. Pt VI, Line 10b BY-LAWS REQUIRE EACH DISTRICT ASSOC. CONSTITUTION & BY LAWS TO BE COMPATIBLE WITH THE STATE ASSOC. CONSTITUTION & BY-LAWS

Supporting Statement of:

Form 990 p 7/Col D Comp W-2 Org (SW)-4

Description	Amount
LINDA GOLLADAY, ADMINISTRATOR, W-2 LINDA GOLLADAY, ADMINISTRATOR, 1099 MISC	51,292. 9,000.
Total	60,292.

Supporting Statement of:

Form 990 p 10/Line 13 col (A)

Description	Amount
OFFICE EXPENSE	9,084.
POSTAGE	2,036.
PRINTING	8,764.
BANK FEES	166.
Total	20,050.

Supporting Statement of:

Form 990 p 10/Line 19 col (A)

Description	Amount
OPERATOR OF THE YEAR	4,511.
BOARD OF GOVERNORS	6,139.
DINNERS, BANQUETS, REFRESHMENTS	27,813.
FACILITIES USE	30,140.
MEETING EXPENSES	22,672.

Supporting Statement of:

Form 990 p 10/Line 24 col (A)-3

Description	Amount
MEMBERSHIP REBATE	11,693.
REFUNDS	1,440.

Total 13,133.

Supporting Statement of:

Form 990 p 10/Line 24 col (A)-4

Description	Amount
MSDH MANUALS & TESTS	8,400.
MDEQ MANUALS & TESTS	9,120.
Total	17,520.