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For the 2014 calendar year, or tax year beginning

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 private foundations)

2014, and ending

► 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.

OMB No. 1545-0047 2014

Open to Public Inspection

D Employer identification number C Name of organization MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION Check if applicable 64-0592428 Address change Doing business as Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Name change Initial return BOX 720399 (601) 857-0512 City or town, state or province, country, and ZiP or foreign postal code Final return/terminated 39272-0399 G Gross receipts \$ 286,742. Amended return JACKSON MS XNo H(a) Is this a group return for subordinates? F Name and address of principal officer Application pending Yes H(b) Are all subordinates included? If 'No,' attach a list (see instructions) No DOUG BARKER P O BOX 300 FLORA MS 39041 Tax-exempt status 501(c)(3) X 501(c) ((insert no) 4947(a)(1) or 527 Website: ► H(c) Group exemption number www.mwpcoa.org Other > M State of legal domicile Form of organization X Corporation Trust Association 1970 MS Part I Summarv Briefly describe the organization's mission or most significant activities. TESTING MS WATER AND POLLUTION CONTROL OPERATORS Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a)...... 3 Activities & Number of independent voting members of the governing body (Part VI, line 1b) à Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . . 5 6 Total unrelated business revenue from Part VIII, column (C), line 12. 7a Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h)..... 50,850. 56,575. Revenue Program service revenue (Part VIII, line 2g) 241,565 230,156. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 16 11 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) ୬. ⋅ ⋅ ⋅ ⋅ 12 292,431 286.742 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 Benefits paid to or for members (Part IX, column (A), line 4) 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 69,233 72,206. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). . . . 245,895 248,597. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 315,128 320,803. 19 Revenue less expenses. Subtract line 18 from line 12 -22,697. -34.061.End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16) . 208,348 181,178 21 Total liabilities (Part X, line 26) 27,994 34,887. Net assets or fund balances. Subtract line 21 from line 20 180,354 146,291 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here TREASURER DOUG BARKER Type or print name and title Print/Type preparer's name Date Preparer's signature X of JINNIE T BOYD 05/07/15 P00743360 Paid **Preparer** JINNIE T. BOY Firm's name **Use Only** Firm's address 2540 MIDWAY KOXD Firm's EIN ▶ 26-0112295 CLINTON 39056 Phone no (601) 922-3173

Form 990 (2014) Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Х 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election 4 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, Х ĸ Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes, 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 services? If 'Yes,' complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, Х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule 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 Х 11 b 11 c 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 11 d 11 e Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X...... Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Х Х 13 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Χ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Х 16 17 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 19 Х 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20

Form 990 (2014) MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION 64-0592428 Page 4 Partive Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II Х Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, 22 Х 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 Х 23 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 Х 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24h c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c 24d 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b 26 Х 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 Х 27 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 Х 28a b A family member of a current or former officer, director, trustee, or key employee? If Yes,' complete Х 28b Х 28c Х 29 Х 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х 32 Χ 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, Х 34 Χ 35a Х 35b 36

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Form 990 (2014)

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

	Check if Schedule O contains a response or note to any line in this Part V		• • •	<u>. L</u>
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
Ł	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
•	: Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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			
	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	-x	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 :	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	o 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		
	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
ı	olf 'Yes,' enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
(If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		_
6 8	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
ı	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).			
i	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
ı	of Yes, did the organization notify the donor of the value of the goods or services provided?	7 b		
	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			
,	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
!	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		Х
١	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		Х
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		Х
	Section 501(c)(7) organizations. Enter:			ĺ
	a Initiation fees and capital contributions included on Part VIII, line 12			ĺ
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			ĺ
	Section 501(c)(12) organizations. Enter			ĺ
	a Gross income from members or shareholders			ĺ
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	a 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			ĺ
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			ł
	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			ł
	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		Х
	b If 'Yes' has it filed a Form 720 to report these payments? If 'No.' provide an explanation in Schedule O	14 b		<u> </u>

Par	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	v, an n	d for	
	Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			. X
500	tion A. Governing Body and Management	<u> </u>	<u>· · · ·</u>	<u>:_ ^ </u>
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 1 b			
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	3		
4	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more			
	members of the governing body?	7 a	Х	
ı	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7 b	v	
	stockholders, or persons other than the governing body?	7.0	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	L
ı	b 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 Reven	ue C	ode.)
			Yes	No
10 8	a Did the organization have local chapters, branches, or affiliates?	10 a	X	
	b 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	Х	
11:	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
1	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12:	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
!	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		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		Х
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		<u></u> -	1
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15a		Х
١	b Other officers or key employees of the organization	15 b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
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?	16 a		
1	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16 b		
Sec	ction C. Disclosure			
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 (Section 501(c)(3)s only) a for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available the public during the tax year	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_	LINDA GOLLADAY 1313 RANGER RD, JACKSON, MS 39154 (6))1)	<u>857-</u>	0512

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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 or note to any line in this Part VII

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

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

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

Check this box if neither the organization nor any relate	ed organı	zatioi	n co			ted a	ny c	current officer, dire	ctor, or trustee.	
(A) Name and Title	(B) Average hours	1	(C) osition (do not check more an one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the constant of the compensation from the compensation of the compensati	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Insututional 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) MARION MARSAC PRESIDENT	8.00			Х				0.	0.	0.
(2) GERALD SWEETING PRESIDENT-ELECT	4.00			х				0.	0.	0.
(3) DOUG BARKER TREASURER	4.00			Х				0.	0.	0.
(4) LINDA GOLLADAYADMINISTRATOR	40.00					х		60,280.	0.	0.
<u></u>										
(6)										
	-									
	_									
	-							-		
<u>(10)</u>	-	<u> </u>								
(11)	-				.					
(12)	-									
(13)										
(14)	-	1								
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(B)			(0	•							
(A) Name and title		Position age (do not check more than box, unless person is bo			s both	an	(D) Reportable	(E) Reportable	(F) Estimated			
	per week (list any	<u> </u>	r -			or/truste		compensation from the organization	compensation from related organizations	com	int of oth pensation	
	hours	Individual trustee or director	nstitutional trustee	Officer	Key employee	and in the state of the state o	m	(W-2/1099-MISC)	(W-2/1099-MISC)	orga	om the anization i related	ì
	related organiza	dual ector	5	"	팋	yee	7				nization	
	- tions below	trust	ੜ		yee	nper						
	dotted line)	8	g			Highest compensated employee						
	<u> </u>					d						
<u>(15)</u>	┨											
(16)												
(17)												
	-		-	<u> </u>	 	ļ						
(18)												
(19)												
(20)							<u> </u>					
	1											
(21)												
(22)												
(23)	 											
(24)		1	\vdash		\vdash	-	\vdash			 		
	 											
(25)												
1 b Sub-total			٠.	٠.	٠.	•	>	60,280.	0.			0.
c Total from continuation sheets to Part VII, Section	n A											
d Total (add lines 1b and 1c)							<u> </u>	60,280.	0.			0.
2 Total number of individuals (including but not limited	to those	listed	d ab	ove)	who	rece	eive	d more than \$100,	000 of reportable co	mpensa	tion	
from the organization											Yes	No
3 Did the organization list any former officer, director,	or tm 10to	n kas		nla.		a. b.	- h	ot componented on	anlovos		162	NO
on line 1a? If 'Yes,' complete Schedule J for such ind										. 3		Х
4 For any individual listed on line 1a, is the sum of repo	ortable co	ompe	ensa	tion	and	other	r coi	mpensation from				
the organization and related organizations greater th										. 4		X
5 Did any person listed on line 1a receive or accrue co										` 		 '`
for services rendered to the organization? If 'Yes,' co										. 5		Х
Section B. Independent Contractors	d indone				-t	- that		awad mara than C	100 000 of			
 Complete this table for your five highest compensate compensation from the organization. Report compen 	sation fo	r the	cale	enda	r ye	ar en	ding	with or within the	organization's tax ye	ar.		
(A)	(A)						(В		(C) .		
Name and business address						Description of	or services	Compe	ensatio	n ———		
2 Total number of independent contractors (including to \$100,000 of compensation from the organization	out not lir	nited	to ti	hose	liste	ed ab	ove) who received mo	re than			
φτου,σου οι compensation from the organization				_								

Part VIII Statement of Revenue

64-0592428

		Check if Schedule O co	ntains a r	espo	nse or note to any lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
its ts	1 a	Federated campaigns		1 a					
ran un		Membership dues	-	1 b	56,575.				
2 5		Fundraising events		1 c	30,373.				
fts.		Related organizations		1 d					
<u>ia</u>		-							
as in	e	Government grants (contribution	15)	1 e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grain similar amounts not included about	nts, and ove	1 f) -
	g	Noncash contributions included	ın lines 1a-	1f \$					
a So	h	Total. Add lines 1a-1f				56,575.			
<u>=</u>					Business Code	00/0/01		· · · · · · · · · · · · · · · · · · ·	
ᅙ	2 a	EDUCATIONAL COU	BSES		900099	102,990.	102,990.	0.	0.
E E	b				900099	23,643.	23,643.	0.	0.
e									
Ž		TESTING FEES			900099	10,605.	10,605.	0.	0.
<u>س</u>		LOG BOOKS, MANUZ			900099	8,243.	8,243.	0.	0.
Program Service Revenue		LATE FEES & MISCE			900099	2,837.	2,837.	0.	0.
8		All other program service				81,838.	81,838.	0.	0.
₫	g	Total. Add lines 2a-2f				230,156.			
	3	Investment income (includ	ling divide	ends,	interest and				
		other similar amounts)			•	11.	11.	0.	
	4	Income from investment of tax-exempt b			ond proceeds 🗧				
	5	Royalties							
		Г	(ı) Re	al	(II) Personal				
	6 a	Gross rents							
	1	Less: rental expenses							
		Rental income or (loss)			 				
									- ····
	Q	Net rental income or (loss)	•					=	
	7 a	a Gross amount from sales of (i) Securities			(ii) Other				
		assets other than inventory							
	b	Less cost or other basis							
		and sales expenses							
	C	Gain or (loss)			1				
	d	l Net gaın or (loss)							
Φ	R a	Gross income from fundra	usina ava	nte					
		(not including \$	iisiiig cvc	1113				•	ĺ
Ş		of contributions reported o	n line 1c).					
æ		See Part IV, line 18		_	a				
2	ь	Less. direct expenses			b				
Other Reven		: Net income or (loss) from							
O	İ	, ,		•					
		Gross income from gaming See Part IV, line 19			a				
		Less: direct expenses			b				
		: Net income or (loss) from	-		es ▶				
		Gross sales of inventory, I and allowances			a				
	b	Less. cost of goods sold .			b				
		Net income or (loss) from			ory		<u> </u>		
		Miscellaneous Revenue			Business Code	-	-		
	11 a								
	Ŀ								
	֡֟֟ ֡	(
	"	,		-		 .	· · · · ·		
	_	All other revenue							
		Total. Add lines 11a-11d .							
	117	Total revenue. See instru	ictions .			206 712	220 167		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must c	complete all columns. All other organizations must complete column (A)	
Check if Schedule O contains a re	response or note to any line in this Part IX	

Do n 6b, 7	ot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
-	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members Compensation of current officers, directors,				
5	trustees, and key employees	51,280.			
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 salanes and wages	12,000.		ļ	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
	Other employee benefits	3,900.			
10	Payroll taxes	5,026.			
11	Fees for services (non-employees)				
_	Management				
	Legal	150.			
•	Accounting	3,710.			
	Professional fundraising services See Part IV, line 17				<u> </u>
	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		<u>-</u>		
13	Office expenses	23,854.			-
14	Information technology	23,634.		_	
15	Royalties				
16	Occupancy	9,000.			***
17	Travel	13,260.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	87,649.	*		
20	Interest			ļ	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			-	
23 24	Other expenses. Itemize expenses not	1,484.		+	
	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 O)				
а	SCHOLARSHIPS	2,000.			L
b	TRAINING_EXPENSES	72,847.			
c	DISTRICT_REBATES & REFUNDS	12,025.			
d	MANUALS & TESTS	18,130.			
	All other expenses	4,488.			
25	Total functional expenses Add lines 1 through 24e	320,803.			ļ
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)				

Balance Sheet

Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 190,048. 163,238. 2 3 18,300 17,940. 4 Loans and other receivables from current and former officers, directors, 5 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 7 Assets 8 9 10 a 10 b 10 c 11 12 12 13 13 14 14 15 15 16 16 208,348 181,178 17 17 18 18 19 19 25,475 32,795 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities 21 Loans and other payables to current and former officers, directors, trustees. 22 22 Secured mortgages and notes payable to unrelated third parties 23 24 24 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. . . . 25 2,519 2,092. Total liabilities. Add lines 17 through 25............ 27.994 26 34,887. Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐and complete Fund Balances lines 27 through 29, and lines 33 and 34. 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ► X and complete lines 30 through 34. þ 30 Net Assets 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 180,354 146,291 33 180,354 33 146,291. 34 34

BAA

208,348

Form	990 (2014) MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION 64-0592428		Pa	ge 12
Par	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			<u>. Ш</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	28	36 , 7	42.
2	Total expenses (must equal Part IX, column (A), line 25)	32	<u>8 , 0 s</u>	03.
3	Revenue less expenses. Subtract line 2 from line 1	<u> </u>	34,0	61.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	18	30,3	54.
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
_	column (B))	14	46,2	<u>.93.</u>
Par	t XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII			. X
			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	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
t	Were the organization's financial statements audited by an independent accountant?	2 b		Х
	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			
				<u>-</u>
•	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c	Х	L
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3 8	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3 a		Х
Ł	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b		
BAA		Form	990 (2014)

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

2014

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. ► Information about Schedule C (Form 990 or 990-EZ) and it 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) (see instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

• 5	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III.			
Name	of organization			Employer identifica	ition number
MIS	SSISSIPPI WATER & P	OLLUTION CONTROL OPERATORS	ASSOCIATION	64-059242	
Par	t I-A Complete if the o	rganization is exempt under section	on 501(c) or is a s	section 527 organi	zation.
1	Provide a description of the or	ganization's direct and indirect political campa	ign activities in Part I\	<i>I</i> .	•
2	Political expenditures			> \$	
3		<u> </u>			
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 section	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 y	/ear?		· · · Yes No
4 a	a Was a correction made?				Yes No
	If 'Yes,' describe in Part IV		- <u>-</u>		
Par		rganization is exempt under section			
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function activ	vities ► \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	nizations for section 52	27 exempt ▶ \$	
3	Total exempt function expendine 17b	tures. Add lines 1 and 2 Enter here and on F	orm 1120-POL,		
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	Enter the names, addresses a organization made payments amount of political contribution	and employer identification number (EIN) of all For each organization listed, enter the amour as received that were promptly and directly de action committee (PAC). If additional space is	section 527 political of the paid from the filing of livered to a separate of	organizations to which the organization's funds Also political organization, suc	e filing 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) 2014

Schedule C (Form 990 or 990-EZ) 2014 MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION 64-0592428 Page 2 Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, Check address, EIN, expenses, and share of excess lobbying expenditures). if the filing organization checked box A and 'limited control' provisions apply. Check ► (b) Affiliated (a) Filing organization's totals Limits on Lobbying Expenditures group totals (The term 'expenditures' means amounts paid or incurred.) 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) . c Total lobbying expenditures (add lines 1a and 1b) e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in The lobbying nontaxable amount is: If the amount on line 1e, column (a) or (b) is Not over \$500,000 20% of the amount on line 1e Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 \$1,000,000 Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period** Calendar year (or fiscal (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) Total year beginning in) 2 a Lobbying non-taxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable amount . . .

expenditures | Schedule C (Form 990 or 990-EZ) 2014

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

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

		(a	<u>"</u>	(D)				
	each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description he lobbying activity.	Yes	No		Amou	ınt		
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:							
	a Volunteers?							
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?							
	c Media advertisements?							
	d Mailings to members, legislators, or the public?							
	e Publications, or published or broadcast statements?							
	f Grants to other organizations for lobbying purposes?							
	g Direct contact with legislators, their staffs, government officials, or a legislative body?							
	h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?							
	i Other activities?							
	j Total Add lines 1c through 1ı							
2	a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?							
	b If 'Yes,' enter the amount of any tax incurred under section 4912							
	c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		, 1					
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?							
Pa	art III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or					
	section 501(c)(6).							
					'	Yes	No	
1	,,,,,				1	Х		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	Х		
	Did the organization agree to carry over lobbying and political expenditures from the prior year?				3		Χ	
Pa	(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	(c)(5) Part	, or s III-A,	section line 3	1 50 [.] , is	1(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).							
	a Current year		2 a					
	b Carryover from last year		2 b					
	c Total		2 c					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4					

Part IV Supplemental Information

Provide 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), Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

5 Taxable amount of lobbying and political expenditures (see instructions)

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 2014

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public n990. Inspection
Employer identification number

	MISSISSIPPI WATER & POLLUTION CONTROL OPERAT	ors Associ	ATION 64-0592428
Par	Organizations Maintaining Donor Advised Funds or O Complete if the organization answered 'Yes' to Form 990,	ther Similar F Part IV, line 6	Funds or Accounts.
	(a) Donor advised	d funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the as are the organization's property, subject to the organization's exclusive legal co	sets held in dono	or advised funds
6	Did the organization inform all grantees, donors, and donor advisors in writing for charitable purposes and not for the benefit of the donor or donor advisor, o impermissible private benefit?	that grant funds or for any other pu	can be used only urpose conferring
Par	Conservation Easements. Complete if the organization answered 'Yes' to Form 990,	Part IV, line 7	7.
1	Purpose(s) of conservation easements held by the organization (check all that	apply).	
	Preservation of land for public use (e.g , recreation or education)	Preservatio	n of a historically important land area
	Protection of natural habitat	Preservatio	on of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation last day of the tax year	contribution in th	e form of a conservation easement on the
			Held at the End of the Tax Year
á	Total number of conservation easements		2a
ŀ	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic structure included in		
•	Number of conservation easements included in (c) acquired after 8/17/06, and structure listed in the National Register	not on a historic	2d
3	Number of conservation easements modified, transferred, released, extinguish tax year ►	hed, or terminated	d by the organization during the
4	Number of states where property subject to conservation easement is located	•	
5	Does the organization have a written policy regarding the periodic monitoring, and enforcement of the conservation easements it holds?		
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing cor		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conserve \$	ation easements	during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requand section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation easements in include, if applicable, the text of the footnote to the organization's financial sta conservation easements.	its revenue and e tements that des	expense statement, and balance sheet, and cribes the organization's accounting for
Pai	Organizations Maintaining Collections of Art, Historic Complete if the organization answered 'Yes' to Form 990,	al Treasures, Part IV, line 8	, or Other Similar Assets. 3.
1 6	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to re art, historical treasures, or other similar assets held for public exhibition, educ in Part XIII, the text of the footnote to its financial statements that describes th	ation, or research	e statement and balance sheet works of n in furtherance of public service, provide,
ı	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report historical treasures, or other similar assets held for public exhibition, education following amounts relating to these items	n, or research in f	furtherance of public service, provide the
	(i) Revenue included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or other amounts required to be reported under SFAS 116 (ASC 958) relating to these		financial gain, provide the following
	a Revenue included in Form 990, Part VIII, line 1		· · · · · · · · · · · · · · · · · · ·
	b Assets included in Form 990, Part X	<u></u> <u></u>	▶ \$

Part III Organizations Maintaining Colle	ections of Art, Hist	orical Treasures, or	Other Similar Ass	ets (co	ntinu	<u>ed)</u>
Using the organization's acquisition, accession, a items (check all that apply):	and other records, check	any of the following that ar	e a significant use of its	collectio	on	
a Public exhibition	d Loan	or exchange programs				
b Scholarly research	e Othe	r				
c Preservation for future generations	_					
Provide a description of the organization's collect Part XIII						
5 During the year, did the organization solicit or rec to be sold to raise funds rather than to be mainta	ined as part of the orgai	nization's collection?	<u>. [</u>	Yes	\[No
Part IV Escrow and Custodial Arrangen line 9, or reported an amount on F	orm 990, Part X, lir	the organization answ ne 21.	ered tes to roini	990, P	art iv	, ———
1 a Is the organization an agent, trustee, custodian, on Form 990, Part X?			ts not included	Yes		No
b If 'Yes,' explain the arrangement in Part XIII and	complete the following t	abie		Amount		
c Beginning balance				Amount		
d Additions during the year						
e Distributions during the year						
f Ending balance				-		
2a Did the organization include an amount on Form				Yes		No
b If 'Yes,' explain the arrangement in Part XIII Che					[
Part V Endowment Funds. Complete if	the organization an	swered 'Yes' to Form !	990. Part IV. line 10).		
(a) Current			(d) Three years back	I	our years	back
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses				<u> </u>		
g End of year balance						
2 Provide the estimated percentage of the current	year end balance (line 1	lg, column (a)) held as:				
a Board designated or quasi-endowment ▶	96					
b Permanent endowment ►	5					
c Temporarily restricted endowment ►	ું					
The percentages in lines 2a, 2b, and 2c should of	equal 100%.					
3 a Are there endowment funds not in the possession organization by:	on of the organization that	at are held and administered	d for the	Γ	Yes	No
(i) unrelated organizations				3a(i)		
(ii) related organizations				3a(ii)		
b If 'Yes' to 3a(II), are the related organizations list	ted as required on Sche	dule R?		3b		
4 Describe in Part XIII the intended uses of the org	ganization's endowment	funds.				
Part VI Land, Buildings, and Equipment Complete if the organization answ		990, Part IV, line 11a.	See Form 990, Pa	rt X, lir	ne 10.	
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	_	Book va	
1 a Land	 					
b Buildings						
c Leasehold improvements						
d Equipment						
e Other						
Total. Add lines 1a through 1e. (Column (d) must equ	al Form 990, Part X, col	umn (B), line 10c.)				
BAA				ule D (Fo	orm 99	0) 2014

Schedule D (Form 990) 2014 MISSISSIPPI WATER & POLI	LUTION CONTROL OPERATOR	RS ASSOCIATION	64-0592428	Page
Part VII Investments — Other Securities. Complete if the organization answered		art IV, line 11b. Se	e Form 990, Part X, line	12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value	uation Cost or end-of-year market va	alue
(1) Financial derivatives				
(2) Closely-held equity interests		·		
(3) Other	-			
(A) (B)				
(B)				
(C)				
(D)	-	_		
(E)				
(F) (G)	-			
(H)				
(I)	-			
Total (Column (b) must equal Form 990, Part X, column (B) line 12)	-		-	
Part VIII Investments - Program Related. Complete if the organization answered				
		Part IV, line 11c. Se	e Form 990, Part X, line	<u>13. </u>
(a) Description of investment type	(b) Book value	(c) Method of valuat	tion Cost or end-of-year mark	et value
(1)				
(2)		<u> </u>		
(3)				
(4)				
(5)		<u>-</u>	<u>.</u>	
(6)				
(7) (8)				
(9)		-		
(10)			···	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13).	•			
Part IX Other Assets.			5 000 D 17/1	45
Complete if the organization answered	<u>1 'Yes' to Form 990, P</u> De <u>scription</u>	art IV, line 11d. Se	e Form 990, Part X, line (b) Book	
(1)	Description	·	(b) Book	Value
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(10)		· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, column (B)) line 15)			·· ·
Part X Other Liabilities.	,,			•
Complete if the organization answered 'Yes' to	Form 990, Part IV, line 11	le or 11f. See Form 990), Part X, line 25	
(a) Description of liability	(b) Book value			
(1) Federal income taxes				
(2) PAYROLL TAXES PAYABLE	2,09	92.		
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
(11)				
Total (Column (b) must equal Form 990, Part X, column (B) line 25). 2. Liability for uncertain tax positions in Part XIII, provide the text of the form				

•		
Schedule D (Form 990) 2014 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 (losses) 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	2e	
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 per	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	2e	
3 Subtract line 2e from line 1	3	
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.)		

Part XIII Supplemental Information.

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part XI, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

BAA

Schedule D (Form 990) 2014

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 2014

Department of the Treasury Internal Revenue Service

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization		Employer Identification number
MISSISSIPPI WATER	& POLLUTION CONTROL OPERATORS ASSOCIATION	64-0592428
	EXECUTIVE COMMITTEE REVIEWS THE FORM 990; AUDIT	COMMITTEE REVIEWS
Pt VI, Line 11b	REVIEWS ALL FINANCIAL RECORDS EACH YEAR.	
	BY-LAWS REQUIRE EACH DISTRICT ASSOC. CONSTITUTION	ON & BY-LAWS TO BE
Pt VI, Line 10b	COMPATIBLE WITH THE STATE ASSOC. CONSTITUTION &	BY-LAWS.
Pt VI, Line 19	DOCUMENTS MADE AVAILABLE UPON REQUEST	
Pt XII, Line 1	MODIFIED CASH METHOD USED FOR ACCOUNTING (METHO)	D HAS NOT CHANGED).
Pt VI, Line 6	EACH OPERATOR IS A MEMBER OF THE ASSOCIATION.	
	THE OPERATOR MEMBERS ELECT REPRESENTATIVES ON THE	HE GOVERNING BOARD FROM
Pt VI, Line 7a	EACH DISTRICT.	
Pt VI, Line 7b	DECISIONS OF THE GOVERNING BOARD ARE APPROVED A	T THE ANNUAL MEETING.
	PRIOR TO ELECTION OF A MEMBER OF THE BOARD OF GO	OVERNORS, ANY POTENTIAL
Pt VI, Line 12c	FOR CONFLICT OF INTEREST IS INVESTIGATED.	
Pt XII, Line 2c	AUDIT COMMITTEE REVIEWS ALL COMPILED FINANCIAL	STATEMENTS EACH YEAR.

Supporting Statement of:

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

Description	Amount
LINDA GOLLADAY ADMINISTRATOR 1099 MISC	9,000.
LINDA GOLLADAY ADMINISTRATOR W-2	51,280.
Total	60,280.