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Form **990**

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)

▶ 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

2015

Open to Public Inspection

A F	or th	e 2015 ca	lendar year, or tax y		01-01-2015 , and end	ing 12-31-201	5				
		applicable change	C Name of organization AMERICAN WATER W						-	identification number	
_	ame ch	-						13-5	6602	277	
	itial rei	_	Doing business as								
, III. Fir		cum			I is not delivered to street ad	dress) Room/sui	te	E Teleph	none n	number	
ret	turn/te	erminated	6666 WEST QUINCY	AVENUE				(303	794	4-7711	
		d return	City or town, state of DENVER, CO 80235	r province, countr	y, and ZIP or foreign postal c	ode		G Gross	recein	ots \$ 32,346,807	
Γ Ap	plication	on pending						G 01033	тесетр	7.5 \$ 32,340,007	
			F Name and ad DAVID LAFRAN		ıpal officer			s this a group			
			6666 WEST QU	INCY AVENU	E			ubordinates? re all subord		「Yes √No es 「Yes 「No	
			DENVER,CO 8	0235				ncluded?			
I Ta	ax-exe	empt status	▼ 501(c)(3)	501(c) () -1 (ıns	ert no)	□ 527		r "No," attacı Group exemp		st (see instructions)	
J W	/ebsi	te:► AW	WA ORG				(-)	stoup exemp	CIOII I	number F	
K For	rm of o	organization	Corporation Trus	et C Association	Other b		I Vear	of formation 1	881	M State of legal domicile II	
	art I		mary	st i Association	Other F		L Teal	or formation 1	001	14 State of legal dofficile 10	
			-	on's mission o	or most significant activ	ıtıes					
					OTECT PUBLIC HEALT		IDE SAF	E AND SUFF	ICIE	ENT WATER FOR ALL	
፠	.										
Ě	-										
Ĕ											
Governance	2	Check th	is box 🛏 if the org	anızatıon disc	ontinued its operations	or disposed of	f more tha	in 25% of its	net	assets	
ా *ర	3	Number	of voting members o	f the governing	g body (Part VI, line 1a)				3	59	
Activities &	4	Number	of independent votin	g members of	the governing body (Par	t VI, line 1b)			4	59	
Ē	5	Total nur	mber of individuals e	mployed in ca	lendar year 2015 (Part	V, line 2a) .			5	172	
ទុ					essary)				6	5,000	
					t VIII, column (C), line				7a	2,593,279	
	b	Net unrela	ited business taxabl	le income from	Form 990-T, line 34				7b	, ' 	
		Contri	butions and grants ((Dart VIII line	\ 1 b \			Prior Year	300	Current Year 786,699	
9	8 Contributions and grants (Part VIII, line 9 Program service revenue (Part VIII, line			•			126,399 25,804,968 20				
Ravenue	10				A), lines 3, 4, and 7d)				4,968 26,425,534 5,804 288,848		
å	11							3,741			
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, c	olumn (A), line	29,928	.267	31,437,77			
	1	12)		L / D T	Vl /A \ l 4 . 5					·	
	13				X, column (A), lines 1–3 , column (A), line 4)			1,945	051		
	15				benefits (Part IX, colur						
\$	13	5-10)		,	benefits (Fare 127, colur	(, , , , , , , , , , , , , , , , ,		13,328	3,057 15,158,470		
Expenses	16a				olumn (A), line 11e) .				0	(
ਡੋ	Ь		ındraısıng expenses (Part								
	17				nes 11a-11d, 11f-24e)			12,909		+	
	18				equal Part IX, column (28,182			
- m	19	keven	ue iess expenses 5	upulactiine 1	8 from line 12	· · · ·		1,745	-		
Net Assets or Fund Balances							Beginni	ng of Current			
Ass. Bak	20							36,526			
end Grad	21						•	18,122			
				es Subtract li	ne 21 from line 20 .			18,404	,∠14	19,740,29	
Unde my k	er per (nowl	nalties of i	belief, it is true, corr		nined this return, includi lete Declaration of prep					ents, and to the best of nformation of which	
		****						2016-07-07			
Sigi	n	Signa	ature of officer					Date			
Her			N MANN CFO								
			or print name and title	na I	Dranarade signature	In	ato I	<u> – </u>	PTII	N	
Pai	Ч		'rınt/Type preparer's nam (AREN GRIES	ic	Preparer's signature KAREN GRIES		ate	Check if self-employed	1 500	N 0078514	
		or F	irm's name ► CUFTOI		_P	I		Firm's EIN 📂 4	1 11-074	46749	
	par e Or		ım's address ► 370 INT	ERLOCKEN BLVD	SUITE 500			Phone no (30	3) 466	6-8822	
US	e Ul	ııy	BROOMF	FIELD, CO 80021							

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

. ✓ Yes ☐ No

Par	t III	Statement of	Program Se	rvice Accomp	lishments			
				esponse or note to	any line in this	Part III		
1	Brief	ly describe the orga	anızatıon's mıss	ion				
THR	DUGH	TES THE WATER (COLLECTIVE LEA ENT POLICIES						FICIENT WATER FOR ALL EMENT, AND
2		he organization und rior Form 990 or 99				year which were	not listed on	⊤Yes ▼No
	If"Ye	es," describe these	new services or	n Schedule O				
3	servi	he organization cea ces?			t changes in how	it conducts, any	program	⊤Yes ▼No
	If "Y €	es," describe these	changes on Sch	nedule O				
4	exper	ribe the organizationses Section 501(otal expenses, and	c)(3) and 501(c)(4) organizations	are required to r			s, as measured by locations to others,
4a	(Cod	e) (Expenses \$	8,025,048	ıncludıng grants of	\$ 1,909,	054) (Revenue \$	12,067,077)
		BER SECTION SERVICES SUPPORT TO MEMBERS						ID TO PROVIDE INFORMATION
4b	(Cod) (Expenses \$	5,616,855	including grants of	•) (Revenue \$	6,233,495)
		ICATIONS AND SUBSCR ISTRY	IPTIONS INCLUDES	S PUBLICATION AND S	ALE OF BOOKS, MAN	UALS, HANDBOOKS, I	REPORTS, ETC FOR	USE BY THE PUBLIC AND WATER
4 c	(Cod) (Expenses \$	5,801,770	including grants of) (Revenue \$	9,232,883)
	ASSIS							RATIONS ARE DISCUSSED TO NG APPROXIMATELY 14,750
	See	Addıtıonal Data						
4d	Oth	er program services	s (Describe in S	chedule O)				
	(Exp	oenses \$	4,017,185	ıncludıng grants o	f \$	77,489)(Reve	nue \$	1,538,844)
4e	Tota	al program service e	expenses 🕨	23,460,858				

	1990 (2015)			Page
Par	t IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 📆	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I \Box	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 🛂	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{7}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20h		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section $501(c)(3)$, $501(c)(4)$, and $501(c)(29)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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 "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	200		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28a		No
c	Part IV	28b		No
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	The diganization receive more than \$25,000 in non-cash contributions? If res, complete schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

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Pai	t V Statements Regarding Other IRS Filings and Tax Complianc Check if Schedule O contains a response or note to any line in this		V			_	
	Check if Schedule o contains a response of note to any line in this	rait	<u> </u>		Yes	No	
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	127				
ь	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0				
c	Did the organization comply with backup withholding rules for reportable payments t gaming (gambling) winnings to prize winners?	o ven	dors and reportable	1c			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	172				
b	If at least one is reported on line 2a, did the organization file all required federal employer. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	oloym	ent tax returns?	2b	Yes		
За	Did the organization have unrelated business gross income of \$1,000 or more durin			3a	Yes		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanati		3b	Yes			
	At any time during the calendar year, did the organization have an interest in, or a si over, a financial account in a foreign country (such as a bank account, securities ac account)?	gnatu	re or other authority	4a	Yes		
Ь	b If "Yes," enter the name of the foreign country ►CA See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νo	
b	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νo	
С	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?						
6a	6a 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?						
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?						
7	Organizations that may receive deductible contributions under section 170(c).						
	Did the organization receive a payment in excess of \$75 made partly as a contribution services provided to the payor?			7a		No	
	If "Yes," did the organization notify the donor of the value of the goods or services p			7b			
	Did the organization sell, exchange, or otherwise dispose of tangible personal proper file Form 8282?	•	which it was required to	7c		No	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a p	ersor	nal benefit contract?	7e		No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal transfer of the organization.	onal b	enefit contract?	7f		No	
g	If the organization received a contribution of qualified intellectual property, did the orequired?	_	zation file Form 8899 as	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles Form 1098-C?		the organization file a	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess bu	sınes	s holdings at any time				
	during the year?	•		8			
9a	Did the sponsoring organization make any taxable distributions under section 4966	?.		9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or rela	ated p	erson?	9b			
10	Section 501(c)(7) organizations. Enter		1				
	Initiation fees and capital contributions included on Part VIII, line 12	10a					
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter						
а	Gross income from members or shareholders	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b					
12-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	مناضل (of Form 10412	12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	12b		124			
13	year Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state ${}^{\circ}\mathbf{N}$ additional information the organization must report on Schedule O	lote. S	See the instructions for	13a			
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	13b					
С	Enter the amount of reserves on hand	13c					
14a	Did the organization receive any payments for indoor tanning services during the tax	year	⁷	14a		No	
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explana	ation ii	Schedule O	14h			

15)				Page 6
lescribe the circumstances, processes, or changes in Schedule O.	See ii	nstructions.		w,
. Governing Body and Management				
			Yes	No
e number of voting members of the governing body at the end of the tax	1a	59		
are material differences in voting rights among members of the governing If the governing body delegated broad authority to an executive committee ar committee, explain in Schedule O				
	For each "Yes" response to lines 2 through 7b below, and for a "No lescribe the circumstances, processes, or changes in Schedule O. heck if Schedule O contains a response or note to any line in this Part VI a. Governing Body and Management e number of voting members of the governing body at the end of the tax are material differences in voting rights among members of the governing if the governing body delegated broad authority to an executive committee	For each "Yes" response to lines 2 through 7b below, and for a "No" response the circumstances, processes, or changes in Schedule O. See in heck if Schedule O contains a response or note to any line in this Part VI	Sovernance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 18 describe the circumstances, processes, or changes in Schedule O. See instructions. The heck if Schedule O contains a response or note to any line in this Part VI	A Sovernance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below it is cribe the circumstances, processes, or changes in Schedule O. See instructions. It is check if Schedule O contains a response or note to any line in this Part VI

	or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	59				
2	Did any officer, director, trustee, or key employee have a family relationship or a bustother officer, director, trustee, or key employee?			2	Yes		
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?						
5	Did the organization become aware during the year of a significant diversion of the o	rganız	atıon's assets? .	5		Νo	
6	Did the organization have members or stockholders?						
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?						
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?						
8	Did the organization contemporaneously document the meetings held or written activear by the following	ons ui	ndertaken during the				
а	The governing body?			8a	Yes		
b	b Each committee with authority to act on behalf of the governing body?						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O						
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the Internal F	Reven	ue Cod	e.)	
					Yes	No	
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes		
b	If "Yes," did the organization have written policies and procedures governing the ac affiliates, and branches to ensure their operations are consistent with the organizati			10b	Yes		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
11a		ts gov • •	erning body before filing		Yes		
					Yes		
b	the form?	orm 9	90		Yes Yes		
b 12a	the form?	• • • • • • • • • • • • • • • • • • •	90	11a			
b 12a b	the form?	orm 9 Iy inte	rests that could give	11a 12a 12b	Yes		
b 12a b	the form?	orm 9 Iy inte the p	rests that could give	11a 12a 12b	Yes Yes		
b 12a b	the form?	Form 9 Iy inte the p	rests that could give olicy? If "Yes," describe	11a 12a 12b	Yes Yes	No	
b 12a b c 13	the form?	Form 9 Iy inte the p ithe p ithe p	rests that could give olicy? If "Yes," describe olicy olicy? If "describe	11a 12a 12b 12c 13	Yes Yes	No	
b 12a b c 13 14	the form?	Form S Iy inte the p the p ithe p ithe p	erests that could give of the	11a 12a 12b 12c 13	Yes Yes	No	
b 12a b c 13 14 15	the form?	Form S Iy inte the p	rests that could give	11a 12a 12b 12c 13	Yes Yes Yes Yes	No	
b 12a b c 13 14 15	the form?	Form S Iy inte the p	rests that could give	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No	
b 12a b c 13 14 15	the form?	Form 9 Ity inter Ithe p Ithe p Ithe armedeli	erests that could give colory? If "Yes," describe colory? If "Yes," describe colory? colors and decision?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No	
b 12a b c 13 14 15 a b	the form?	Form 9 Ity inte Ithe p Ithe p Ithe p Ithe arms deli	rests that could give crests that could give clicy? If "Yes," describe	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes		

Section	C	Disc	locure

List the States with which a copy of this Form 990 is required to be filed▶

 ${\sf AK}\,,{\sf AR}\,,{\sf CA}\,,{\sf CT}\,,{\sf FL}\,,{\sf IL}\,,{\sf ME}\,,{\sf MA}\,,{\sf MI}\,,{\sf MN}\,,{\sf NH}\,,{\sf NJ}\,,{\sf NM}$,NC,ND,OH,OK,OR,PA,WA,WI

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Vipon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records ►THE ORGANIZATION 6666 WEST QUINCY AVENUE DENVER, CO 80235 (303) 794-7711

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion (han d in is l	one b both	ox, an c	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)			2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations				
See Additional Data Table										
										Form 990 (2015)

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	Posi more t perso and a	tion (han d n is	ne b both	ox, i	unless fficer	,	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)		organization and related organizations
See Additional Data Table										
						_				
1b Sub-Total					•	•				
d Total (add lines 1b and 1c) .	s to Part VII, S			<u>.</u>	<u>.</u>			1,622,252	0	298,781
2 Total number of individuals (in \$100,000 of reportable compe						abov	e) wł	no received more th	an	

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo

	Yes	No
3		No
4	Yes	
5		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
INNERWORKINGS INC	PRINTING SERVICES	740,009
7503 SOLUTION CENTER CHICAGO, IL 60677		
FREEMAN	CONVENTION MANAGEMENT	718,053
PO BOX 650036 DALLAS, TX 75265		
QUADGRAPHICS INC	PRINTING SERVICES	503,217
PO BOX 644840 PITTSBURGH, PA 15264		
DAVIS GRAHAM & STUBBS	LEGAL SERVICES	371,677
1550 SEVENTEENTH ST SUITE 500 DENVER, CO 80202		
BREO SOLUTIONS LLC	CONSULTING SERVICES	316,451
PO BOX 174445 DENVER, CO 80217		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \blacktriangleright 26

Part V		Statement o						
		Check if Sched	ule O contains a respor	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s	1a	Federated cam	paigns 1a					
ints	ь	Membership du	ies 1b					
ons, Gifts, Grants Similar Amounts	С	Fundraising ev						
ts, A	_	_						
Giffts, iilar A	d	Related organiz						
ns,	е	Government grant	s (contributions) 1e	369,938				
itio er S	f	All other contribute similar amounts no	ons, gifts, grants, and 1f ot included above	416,761				
tributic Other	g		ons included in lines					
Contributions, and Other Sirr	١.	1a-1f \$	- 4 - 46		786,699			
Cr	h	Total. Add line:	s 1a-1f	▶	780,099			
e n				Business Code				
Werl	2a	MEMBERSHIP DUE		900099	12,067,077	12,067,077		
<u> 8</u>	ь	CONFERENCES & S	SEMINARS	561499	8,705,846	8,705,846		
MCe	С	ADVERTISING & SU		511120	4,025,728	1,432,449	2,593,279	
Program Serwce Revenue	d	SPONSORSHIP REV	_	511120	776,657	776,657		
E S	e	EDUCATIONAL PRO		900099	527,037	527,037		
illo	f	All other progra	am service revenue		323,189	323,189		
ΔŤ	g	Total. Add line:	s 2 a – 2 f		26,425,534			
	3		ome (including dividen		288,848			288,84
	4		ar amounts) stment of tax-exempt bond	-	255/5 15			200,011
	5		· · · · · · · · ·		878,591			878,59
		i i	(ı) Real	(II) Personal				
	6a	Gross rents	,	,				
	b	Less rental						
	ן י	expenses						
	С	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	7-	Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other						
		than inventory						
	ь	Less cost or						
		other basis and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (los	ss)					
ine Ine	8a	Gross income fevents (not inc						
ĕ		\$						
Other Revenue		of contributions See Part IV, lir	s reported on line 1c)					
<u>.</u>		,	а					
5	ь	Less direct ex	penses b					
	С		loss) from fundraising) ا	events 🛌				
	9a		from gaming activities					
		200 i aic 1 V , III	a					
	ь	Less direct ex	penses b					
	С	Net income or	(loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
		recuiiis diid diid	a a	3,116,803				
	b	Less cost of g	oods sold b	909,036				
	С		(loss) from sales of inv	· · · · · · · · · · · · · · · · · · ·	2,207,767	2,207,767		
		Miscellaneou	s Revenue	Business Code				
	11a	TRAVEL REVE	NUE	900099	411,334			411,33
	b	CAREER CENT	ER	900099	344,623	344,623		
	С	CONSULTING	INCOME	900099	48,113	48,113		
	d		ue		46,262	46,262		
	е	Total. Add lines	s 11a-11d	· · · •	850,332			
	12	Total revenue.	See Instructions .		31,437,771	26,479,020	2,593,279	1,578,773

		Statement of Functional Expenses				
Section	n 501	1(c)(3) and 501(c)(4) organizations must complete all columns	All other organiz	ations must com	plete column (A)	
	-	Check if Schedule O contains a response or note to any line in th	ıs Part IX			<u> </u>
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1		its and other assistance to domestic organizations and estic governments See Part IV, line 21	1,622,252	1,622,252		
2		its and other assistance to domestic	77,489	77,489		
3	gove	its and other assistance to foreign organizations, foreign rnments, and foreign individuals See Part IV, lines 15 16	286,802	286,802		
4		efits paid to or for members	200,002	200,002		
5	Com	pensation of current officers, directors, trustees, and employees	1,117,729	444,091	673,638	
6	Com (as d	pensation not included above, to disqualified persons defined under section 4958(f)(1)) and persons tribed in section 4958(c)(3)(B)	1,111,125	111,001	073,030	
7	Othe	er salaries and wages	9,908,224	6,345,056	2,909,994	653,174
8		sion plan accruals and contributions (include section 401(k) 403(b) employer contributions)	2,030,226	1,279,326	621,769	129,131
9	Othe	er employee benefits	1,319,536	838,363	397,292	83,881
10	Payr	oll taxes	782,755	486,788	248,154	47,813
11	Fees	for services (non-employees)				
а	Mana	agement				
b	Lega	1	277,491	250,223	17,311	9,957
c	Acco	ounting	107,098	96,574	6,681	3,843
d	Lobb	ying				
e	Profe	essional fundraising services See Part IV, line 17				
f		stment management fees				
g		er (If line 11g amount exceeds 10% of line 25, column (A) unt, list line 11g expenses on Schedule O)	2,422,870	2,184,785	151,147	86,938
12	Adve	ertising and promotion	1,502,124	1,029,980	32,117	440,027
13		e expenses	1,995,467	1,804,369	21,707	169,391
14	Infor	mation technology				
15		alties				
16		upancy	1,651,124	1,569,880	312	80,932
17		el	1,235,523	1,042,767	181,399	11,357
18		nents of travel or entertainment expenses for any federal, e, or local public officials				
19	Conf	erences, conventions, and meetings	2,707,010	2,695,491	6,086	5,433
20	Inter	rest				
21	Payn	nents to affiliates				
22	Depr	reciation, depletion, and amortization	791,461	698,397	334	92,730
23	Insu	rance	300,073	269,801	115	30,157
24	mısc 10%	er expenses Itemize expenses not covered above (List cellaneous expenses in line 24e If line 24e amount exceeds of line 25, column (A) amount, list line 24e expenses on edule O)				
а	REC	RUITING/TRAINING	247,079	216,535	2,768	27,776
b	COM	1PLIMENTARY PUBLICATI	194,888	110,558		84,330
c	UBI	TAXES	136,000		136,000	
d	CON	ITINGENCIES/RESERVES	8,997		8,997	
е	Allo	ther expenses	528,548	111,331	382,206	35,011
25	Tota	I functional expenses. Add lines 1 through 24e	31,250,766	23,460,858	5,798,027	1,991,881
26	repo educ	t costs.Complete this line only if the organization rted in column (B) joint costs from a combined ational campaign and fundraising solicitation ck here				

Form 990 (2015) Page 11 Part X **Balance Sheet** (A) (B) Beginning of year End of year 1,012,017 785,957 1 1 5.644.695 2 2 6.752.219 Savings and temporary cash investments 3 897.091 4 4 1.019.509 5 Loans and other receivables from current and former officers, directors, trustees. key employees, and highest compensated employees Complete Part II of 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 7 7 820,022 8 914,421 8 997.880 656.763 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 20,233,471 Complete Part VI of Schedule D 10a b 10b 13,010,770 7,190,333 10c 7,222,701 Less accumulated depreciation 2,307,621 11 299.598 11 17,569,000 19,269,000 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . 14 14 15 88.050 15 96.755 16 Total assets. Add lines 1 through 15 (must equal line 34) 36,526,709 16 37,016,923 2,416,316 17 **17** 2,189,773 18 18 9.797.955 10.229.533 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . 23 24 24 Unsecured notes and loans payable to unrelated third parties 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 5,908,224 4,857,327 25 18,122,495 26 17,276,633 26 **Total liabilities.**Add lines 17 through 25 . . . Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete Balance lines 27 through 29, and lines 33 and 34. 16.599.583 27 17,929,875 27 435,400 28 28 412,834 Fund 1,369,231 1,397,581 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶

and complete lines 30 through 34. ö 30 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 ž 33 Total net assets or fund balances 18,404,214 33 19,740,290 36,526,709 Total liabilities and net assets/fund balances 34 37.016.923

Pai	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			· . ৷
1	Total revenue (must equal Part VIII, column (A), line 12)	1		31,4	137,77
2	Total expenses (must equal Part IX, column (A), line 25)	2			250,766
3	Revenue less expenses Subtract line 2 from line 1	3			187,00
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4			104,214
5	Net unrealized gains (losses) on investments	5		,	-9,694
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		1 -	158,76
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		·	740,290
Par	t XII Financial Statements and Reporting				/
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔽
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revi a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign of the audit, review, or compilation of its financial statements and selection of an independent accountant		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Additional Data

Software ID:

Software Version:

EIN: 13-5660277

Name: AMERICAN WATER WORKS ASSOCIATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 4,017,185 including grants of \$ 77,489) (Revenue \$ 1,538,844)

COMMITTEES INCLUDES DEVELOPMENT AND IMPLEMENTATION OF INFORMATION PROJECTS, MEDIA RELATIONS,

INQUIRIES, AND THE NATIONAL DRINKING WATER WEEK CAMPAIGN

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde		ntracto	rs					I	l	1 1
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more the perso and a	ion (d han o n is b	ne bo	ox,ι an o	ınless fficer	;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
GENE C KOONTZ	1 00									
PRESIDENT		Х		Х				0	0	0
JEANNE M BENNETT-BAILEY	1 00	×		Х				0	0	0
PRESIDENT ELECT	1.00									
JOHN DONAHUE	1 00	x		х				0	0	0
IMMEDIATE PAST PRESIDENT	1 00									
TREASURER		х		Х				0	0	0
MARTHA W SEGAL	1 00	×		x				0	0	0
VICE PRESIDENT	1.00								-	
WARNER PALERMO	1 00	x		х				0	0	0
VICE PRESIDENT	1 00									
BRENDA LENNOX VICE PRESIDENT		х		х				0	0	0
BRIAN STEGLITZ	1 00									
VICE PRESIDENT		х		х				0	0	0
JON EATON	1 00									
VICE PRESIDENT		х		Х				0	0	0
STEVE DENNIS	1 00									
VICE PRESIDENT		X		Х				0	0	0
JAMES C NELSON	1 00	,						0		
BOARD MEMBER		X						0	0	0
THOMAS S WOLFBOARD MEMBER	1 00	х						0	0	0
BRANDY KELSO	1 00	х						0	0	0
BOARD MEMBER	1 00									
JAMES HANNAM		х						0	0	0
BOARD MEMBER STEVE CONRAD	1 00									
BOARD MEMBER		х						0	0	0
PHIL HOLDERNESS	1 00									
BOARD MEMBER		Х						0	0	0
JOHN C MOORE	1 00	l ,							_	
BOARD MEMBER		X						0	0	0
DAN LESNIESKI	1 00	х						0	0	0
BOARD MEMBER JACQUELINE W TORBERT	1 00									
BOARD MEMBER		Х						0	0	0
PETER JOHNS BOARD MEMBER	1 00	x						0	0	0
KEN OTA	1 00									
BOARD MEMBER		Х						0	0	0
TERRY MCGHEEBOARD MEMBER	1 00	x						0	0	0
DUANE GILLES	1 00	х						0	0	0
BOARD MEMBER SCOTT BAYMAN	1 00		-							
SCOTT PAXMAN BOARD MEMBER		х						0	0	0
JON MARTENS	1 00	X						0	0	0
BOARD MEMBER										

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde		ntracto						I	I	1 1
(A) Name and Title	(B) Average hours per week (list any hours	Posit more the perso	ion (d nan o n is b	ne bo	ox,ι an o	ınless fficer	;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
MIKE ORTH	1 00	<u> </u>								
BOARD MEMBER		X						0	0	0
ALAN C CRANFORD	1 00	х						0	0	0
BOARD MEMBER		_ ^						ŭ		
PATRICIO R KALIFE DEL VALLE	1 00	×						0	0	0
BOARD MEMBER	1.00									
BOARD MEMBER	1 00	х						0	0	0
LOGAN MCINNIS	1 00	×						0	0	0
BOARD MEMBER								Ů		
JOHN S OLSSON	1 00	×						0	0	0
BOARD MEMBER	1 00									
MARK TOMPECK		×						0	0	0
BOARD MEMBER F ADAM YANULIS	1 00									
BOARD MEMBER		×						0	0	0
CONNIE K SCHREPPEL	1 00									
BOARD MEMBER		Х						0	0	0
BRIAN TRIPP BOARD MEMBER	1 00	х						0	0	0
TIMOTHY PAUSTIAN	1 00	х						0	0	0
BOARD MEMBER								Ů	0	0
CLIFF SHRIVE BOARD MEMBER	1 00	х						0	0	0
RAY MILLER BOARD MEMBER	1 00	х						0	0	0
JEFFREY HINES PE BOARD MEMBER	1 00	х						0	0	0
JEAN-FRANCOIS BERARD	1 00									
BOARD MEMBER		X						0	0	0
KEVIN BERGSCHNEIDER BOARD MEMBER	1 00	х						0	0	0
GARY VISSER	1 00	х						0	0	0
BOARD MEMBER MITCH KANNENBERG	1 00									
BOARD MEMBER		Х						0	0	0
CLAYTON EDWARDS BOARD MEMBER	1 00	х						0	0	0
DAVID SCHOLLER BOARD MEMBER	1 00	х						0	0	0
BEATE WRIGHT	1 00	х						0	0	0
MATT STANLEY	1 00									
BOARD MEMBER		X						0	0	0
DAN LIMACHER BOARD MEMBER	1 00	x						0	0	0
NANCY QUIRK BOARD MEMBER	1 00	х						0	0	0
UMA S VEMPATI	1 00									
BOARD MEMBER		Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde		ntracto						I	I	ı ı
(A) Name and Tıtle	(B) Average hours per week (list any hours	Posit more the perso	tion (d han o n is b	ne bo	ox,ι an o	ınless fficer	i.	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
SALLY MILLS-WRIGHT	1 00	х						0	0	0
BOARD MEMBER	1 00									
PETE SAMSON		x						0	0	0
BOARD MEMBER	1 00									
DR EMILIO M COLON		x						0	0	0
BOARD MEMBER	1 00									
BOARD MEMBER		х						0	0	0
MELISSA ESSEX ELLIOTT	1 00	\ _\						0	0	0
BOARD MEMBER		X						l o	U	<u> </u>
DAVID WILKES	1 00	x						0	0	0
BOARD MEMBER		_ ^						Ů	0	
DR JAMES P MALLEY	1 00	×						0	0	0
BOARD MEMBER								Ů		
AUREL M ARNDT	1 00	×						0	0	0
BOARD MEMBER								Ů		
DENISE KRUGER BOARD MEMBER	1 00	x						0	0	0
JAMES A CHAFFEE PE	1 00									
BOARD MEMBER		X						0	0	0
EDMUND MOLYNEUX P ENG	1 00	,						0		0
BOARD MEMBER		X						U	0	0
PHILIP L BRUN JR BOARD MEMBER	1 00	х						0	0	0
SANDY A SMITH BOARD MEMBER	1 00	х						0	0	0
MICHAEL D SIMPSON	1 00									
BOARD MEMBER		X						0	0	0
TIMOTHY S WILSON	1 00							_	_	_
BOARD MEMBER		×						0	0	0
THOMAS F SCHREMPP BOARD MEMBER	1 00	х						0	0	0
MICHAEL J O'CONNELL PE	1 00							_		
BOARD MEMBER		X						0	0	0
STEPHEN R SHOAF	1 00	x						0	0	0
BOARD MEMBER								Ŭ		
LARRY THELENBOARD MEMBER	1 00	x						0	0	0
THOMAS J MOULTON	1 00	x						0	0	0
BOARD MEMBER	1.00									
LELA PERKINS BOARD MEMBER	1 00	x						0	0	0
KRISTIN BISGARD	1 00	х						0	0	0
BOARD MEMBER	1 00									
H ALI MAHAN BOARD MEMBER		х						0	0	0
JONATHAN CARPENTER PE BOARD MEMBER	1 00	х						0	0	0
TONY AVERBECK	1 00									
BOARD MEMBER		X						0	0	0
	1		1			1		I		<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F) Position (do not check Reportable Name and Title Average Reportable Estimated amount hours per more than one box, unless compensation compensation of other person is both an officer week (list from the from related compensation anv hours and a director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Former Highest compensated employee Individual trustee or director organizations Institutional Trustee related below organizations emplo;ee dotted line) 1 00 SEAN D OSBORNE PE Х 0 0 BOARD MEMBER 1 00 CHRISTOPHER S JARRETT Х 0 0 BOARD MEMBER 1 00 KANWAL OBEROI 0 0 Χ 0 **BOARD MEMBER** 40 00 DAVID LAFRANCE Х 0 306,174 47,518 CHIEF EXECUTIVE OFFICER 40 00 PAULA MACILWAINE Х 226,075 0 45,429 **DEPUTY CEO** 40 00 THOMAS CURTIS Χ 171,893 0 15,633 DEPUTY CEO 40 00 GEORGE TRACY MEHAN Χ 78,420 0 14,479 EXECUTIVE DIRECTOR 40 00 KEVIN MANN Х 172,769 0 39,338 CHIEF FINANCIAL OFFICER 40 00 SUSAN FRANCESCHI Х 149,965 0 24,377 CHIEF MEMBERSHIP OFFICER 40 00 **KEVIN TURNTINE** Х 141,273 0 38,527 CHIEF INFORMATION OFFICER 40 00 JAMES ALAN ROBERSON Х 137,399 0 20,074 **DIRECTOR - FEDERAL RELATIONS** 40 00 NANCY MORTVEDT Χ 117,698 0 33,657 **DIRECTOR - SALES** 40 00 JANE JOHNSON Χ 120,586 0 19,749 **DIRECTOR - SALES**

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493193008836

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2015

Open to Public Inspection

AMERI	CAN W	ATER WORKS ASSOCIATION					10.5660077			
Pa	rt I	Passan for Bubli	c Charity S	Status (All organiza	tions must so	mploto this r	13-5660277	anc .		
		zation is not a private for					•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1	rigain.	A church, convention								
2	<u>'</u>	A school described in	-			-				
3	<u>'</u>	A hospital or a cooper								
4	<u>'</u>	A medical research or) Entartha		
-	'	hospital's name, city,	-	erated in Conjunction v	vicii a nospitai u	lescribed iii se		J. Linter the		
5	Γ			nefit of a college or un	iversity owned	or operated by	a governmental unit o	lescribed in section		
	_	170(b)(1)(A)(iv). (C								
6	<u> </u>	A federal, state, or loc	-	-						
7	ı	An organization that n		· ·		om a governme	ental unit or from the g	eneral public		
8	\vdash	described in section 1 A community trust des			•	+ 11)				
9	<u> </u>						ihiitions memhershin	fees and dross		
-	'	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support								
				unrelated business tax			1 tax) from businesse	s acquired by the		
10	_			eesection 509(a)(2).			F00(-)(4)			
10	<u> </u>	An organization organ	•	·	•	•				
11	ı	An organization organ one or more publicly s								
		the box in lines 11a th								
а	Γ	Type I. A supporting o	= .		•		•			
		supported organization				ty of the direct	ors or trustees of the	supporting		
ь	\vdash	organization You mus Type II. A supporting				with its sunno	rted organization(s) h	y having control or		
	,	management of the su								
	_	must complete Part IV	•		•					
C	ı	Type III functionally i						grated with, its		
d	г	supported organization Type III non-function						anization(s) that is		
•	'	not functionally integr								
	_	(see instructions) Yo								
е	ļ	Check this box if the c					s a Type I, Type II, T	ype III functionally		
f	Ente	integrated, or Type III r the number of support								
g		Provide the following i	-							
					,					
		(i)	(ii)EIN	(iii)	(iv)		(v)	(vi)		
Nam	ne of s	supported organization		Type of	Is the orga		A mount of	A mount of other		
				organization	listed in your		monetary support	support (see		
				(described on lines 1-9 above (see	docume	ent?	(see instructions)	instructions)		
				instructions))						
					Yes	No				

Pa	Support Schedule for (Complete only if you Part III. If the organize	checked the bo	x on line 5, 7,	or 8 of Part I o	or if the organiz	ation failed to d	jualify under
Se	ection A. Public Support	•	•		, <u>, , , , , , , , , , , , , , , , , , </u>		
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
•	fiscal year beginning in) F Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	(4,72022	(-)	(9,2323	(=,===	(0)2020	(i)
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 ection B. Total Support						
	Calendar year						
(or	fiscal year beginning in)	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 2015	(f) ⊤otal
7	A mounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is check this box and stop here	<u> </u>	<u> </u>				
14	ection C. Computation of Pul Public support percentage for 2019			11 column (f))		14	
15	Public support percentage for 201			: 11, Column (1))		14	
	33 1/3% support test—2015.If the	-	•	v on line 12 and	lino 14 is 22 1/20	15	this box
	and stop here. The organization qui 33 1/3% support test—2014. If the box and stop here. The organizatio	alıfıes as a publıc organızatıon dıd	ly supported organic not check a box	anızatıon on lıne 13 or 16a			► □
17a	10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me	— 2015. If the organization meets the fa	anization did not o	check a box on lir tances test, chec	ck this box and st	op here. Explain	orted ▶□
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza supported organization	nızatıon meets th	e "facts-and-circ	umstances" test	c, check this box a	nd stop here.	
18	Private foundation. If the organizations	ion did not check	a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and see	- '

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support							
	Calendar year	(a)2011	(b) 2012	(c) 2013	(d) 2014	(e) 201	15	(f) T otal
(or 1	iscal year beginning in) F Gifts, grants, contributions, and			. ,				
•	membership fees received (Do	144.040	04 503	02.004	126 200	-	706 600	1 222 520
	not include any "unusual	144,949	81,592	83,891	126,399		786,699	1,223,530
	grants ")							
2	Gross receipts from admissions,							
	merchandise sold or services							
	performed, or facilities furnished in any activity that is related to	27,408,666	27,086,635	27,583,506	28,336,783	29,2	241,857	139,657,447
	the organization's tax-exempt							
	purpose							
3	Gross receipts from activities							
	that are not an unrelated trade	549,989	415,321	408,953	598,989	4	411,334	2,384,586
	or business under section 513	349,909	413,321	400,933	390,909		111,554	2,304,300
4	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its behalf							
5	The value of services or							_
,	facilities furnished by a							
	governmental unit to the							
	organization without charge							
6	Total. Add lines 1 through 5	28,103,604	27,583,548	28,076,350	29,062,171	30,4	439,890	143,265,563
7a	Amounts included on lines 1, 2,							
	and 3 received from disqualified							0
	persons A mounts included on lines 2 and							
D	3 received from other than							
	disqualified persons that exceed							
	the greater of \$5,000 or 1% of							0
	the amount on line 13 for the							
	year							
	Add lines 7a and 7b							0
8	Public support. (Subtract line 7c from line 6)							143,265,563
	·							
Se	ction B. Total Support							
Se	ction B. Total Support Calendar year		422242	() 2 2 4 2	(Dage)	()	T	
	Calendar year Calendar year Siscal year beginning in)	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 201	1 5	(f) Total
	Calendar year	(a)2011 28,103,604	(b) 2012 27,583,548	(c)2013 28,076,350	(d) 2014 29,062,171		1 5 439,890	(f) T otal
(or f	Calendar year iscal year beginning in) 🟲							
(or f	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received	28,103,604	27,583,548	28,076,350	29,062,171	30,4	439,890	143,265,563
(or f	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents,					30,4		
(or f	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	28,103,604	27,583,548	28,076,350	29,062,171	30,4	439,890	143,265,563
(or f 9 10a	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	28,103,604	27,583,548	28,076,350	29,062,171	30,4	439,890	143,265,563
(or f	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	28,103,604 1,106,362	27,583,548 1,035,652	28,076,350 1,013,697	29,062,171 1,035,995	30,4 1,:	439,890 167,439	143,265,563 5,359,145
(or f 9 10a	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	28,103,604	27,583,548	28,076,350	29,062,171	30,4 1,:	439,890	143,265,563
(or f 9 10a	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511	28,103,604 1,106,362 578,007	27,583,548 1,035,652 458,389	28,076,350 1,013,697 331,483	29,062,171 1,035,995 385,304	1,:	439,890 167,439 300,480	143,265,563 5,359,145 2,053,663
(or f 9 10a	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	28,103,604 1,106,362	27,583,548 1,035,652	28,076,350 1,013,697	29,062,171 1,035,995	1,:	439,890 167,439	143,265,563 5,359,145
(or f 9 10a b	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	28,103,604 1,106,362 578,007	27,583,548 1,035,652 458,389	28,076,350 1,013,697 331,483	29,062,171 1,035,995 385,304	1,:	439,890 167,439 300,480	143,265,563 5,359,145 2,053,663
(or f 9 10a b	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included	28,103,604 1,106,362 578,007	27,583,548 1,035,652 458,389	28,076,350 1,013,697 331,483	29,062,171 1,035,995 385,304	1,:	439,890 167,439 300,480	143,265,563 5,359,145 2,053,663
(or f 9 10a b	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	28,103,604 1,106,362 578,007	27,583,548 1,035,652 458,389	28,076,350 1,013,697 331,483	29,062,171 1,035,995 385,304	1,:	439,890 167,439 300,480	143,265,563 5,359,145 2,053,663
(or f 9 10a b	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	28,103,604 1,106,362 578,007	27,583,548 1,035,652 458,389	28,076,350 1,013,697 331,483	29,062,171 1,035,995 385,304	1,:	439,890 167,439 300,480	143,265,563 5,359,145 2,053,663
(or f 9 L0a b	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	28,103,604 1,106,362 578,007 1,684,369	27,583,548 1,035,652 458,389 1,494,041	28,076,350 1,013,697 331,483 1,345,180	29,062,171 1,035,995 385,304 1,421,299	30,4 1,:	439,890 167,439 300,480 467,919	143,265,563 5,359,145 2,053,663 7,412,808
(or f 9 10a b	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	28,103,604 1,106,362 578,007	27,583,548 1,035,652 458,389	28,076,350 1,013,697 331,483	29,062,171 1,035,995 385,304	30,4 1,:	439,890 167,439 300,480	143,265,563 5,359,145 2,053,663
(or f 9 10a b c 11	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	28,103,604 1,106,362 578,007 1,684,369	27,583,548 1,035,652 458,389 1,494,041	28,076,350 1,013,697 331,483 1,345,180	29,062,171 1,035,995 385,304 1,421,299	30,4 1,:	439,890 167,439 300,480 467,919	143,265,563 5,359,145 2,053,663 7,412,808
(or f 9 10a b c 11	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9,	28,103,604 1,106,362 578,007 1,684,369	27,583,548 1,035,652 458,389 1,494,041	28,076,350 1,013,697 331,483 1,345,180	29,062,171 1,035,995 385,304 1,421,299	30,4 1,:	439,890 167,439 300,480 467,919	143,265,563 5,359,145 2,053,663 7,412,808
(or f 9 100a b c 111 12	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183	30,4 1,: 1,4 32,:	439,890 167,439 300,480 467,919 438,998 346,807	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937
(or f 9 L0a b	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183	30,4 1,: 1,4 32,:	439,890 167,439 300,480 467,919 438,998 346,807	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937
(or f 9 10a b c 111 12 13 14	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010 for the organizati	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601 on's first, second	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183	30,4 1,: 1,4 32,:	439,890 167,439 300,480 467,919 438,998 346,807	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937 8) organization,
(or f 9 10a b c 11 12	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010 for the organization	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601 on's first, second	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336 , third, fourth, or	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183	30,4 1,: 1,4 32,:	439,890 167,439 300,480 467,919 438,998 346,807	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937 8) organization,
(or f 9 10a b c 111 12 13 14	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010 for the organizati blic Support P 5 (line 8, column	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601 on's first, second Percentage (f) divided by line	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336 , third, fourth, or	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183	30,4 1,5 1,4 32,5 section 5	439,890 167,439 300,480 467,919 438,998 346,807	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937 8) organization,
(or f 9 10a b c 111 12 13 14 See 15 16	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pu Public support percentage for 201	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010 for the organizati blic Support P 5 (line 8, column)14 Schedule A, F	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601 on's first, second Percentage (f) divided by line Part III, line 15	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336 , third, fourth, or 1	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183	30,4 1,5 1,4 32,5 1 section 5	439,890 167,439 300,480 467,919 438,998 346,807	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937 3) organization,
(or f 9 10a b c 111 12 13 14 See 15 16	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pu Public support percentage from 201	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010 for the organization of the organization of the second of the se	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601 on's first, second Percentage (f) divided by line Part III, line 15 Dime Percenta	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336 , third, fourth, or 1	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183 fifth tax year as a	30,4 1,5 1,4 32,5 1 section 5	439,890 167,439 300,480 467,919 438,998 346,807	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937 3) organization,
(or f 9 100a b c 11 12 13 14 See 15 16 See	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pulpublic support percentage from 20 section D. Computation of Inventor in the proper in the support in the support of Inventor in the public support percentage from 20 section D. Computation of Inventor in the propert percentage from 20 section D. Computation of Inventor in the properties of the properti	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010 for the organizati blic Support P 5 (line 8, column) 14 Schedule A, F vestment Incorr 2015 (line 10 c, co	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601 on's first, second Percentage (f) divided by line Part III, line 15 Dime Percenta	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336 , third, fourth, or t	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183 fifth tax year as a	30,4 1,3 1,4 32,3 1 section 5 15 16	439,890 167,439 300,480 467,919 438,998 346,807	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937 8) organization, 93 850 % 95 000 % 4 860 %
(or f 9 100 110 110 110 110 110 110 110 110 1	Calendar year Fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pu Public support percentage for 201 Public support percentage from 20 ction D. Computation of Inv Investment income percentage for	28,103,604 1,106,362 578,007 1,684,369 443,037 30,231,010 for the organization of the organization of the organization of the second of	27,583,548 1,035,652 458,389 1,494,041 366,012 29,443,601 on's first, second Percentage (f) divided by line Part III, line 15 ome Percenta column (f) divided A, Part III, line 3	28,076,350 1,013,697 331,483 1,345,180 344,806 29,766,336 , third, fourth, or t	29,062,171 1,035,995 385,304 1,421,299 375,713 30,859,183 fifth tax year as a	30,4 1,1 32,7 1 section 5 15 16	439,890 167,439 300,480 467,919 438,998 346,807 01(c)(3	143,265,563 5,359,145 2,053,663 7,412,808 1,968,566 152,646,937 8) organization, 93 850 % 95 000 % 4 860 % 3 780 %

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked

Section A. All Supporting Organizations			
I, complete Sections A and D, and complete	te Part V)		
11b of Part I, complete Sections A and C	If you checked 11c of Part I, com	iplete Sections A , D , and E If y	ou checked 11d of Par

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		ı
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4 a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		ı
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised	4b		
c	by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4 c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		ı
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
C	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		l
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		_

Pai	Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b	The organization is the parent of each of its supported organizations Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
Ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ŀ	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
i	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	rganızatıon (see

Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp			
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval re	quired)		
6 Other distributions (describe in Part VI) See instru	uctions		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
 Carryover from 2010 not applied (see instructions) 			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (If amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
c Excess from 2013			
d From 2014			
e From 2015			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference		Explanation
	SCHEDULE A, SECTION B, LINES 2,	IN PRIOR YEARS THERE WERE SOME AMOUNTS THAT WERE INCLUDED IN LINE 2 THAT
	7B, 10B & 12	SHOULD HAVE BEEN INCLUDED ON LINE 10B AND REPORTED ON LINE 12 THESE LINES
		HAVE BEEN REVISED IN THE CURRENT YEAR THERE WERE ALSO SOME AMOUNTS THAT
		WERE ERRONEOUSLY REPORTED ON LINE 7B THIS LINE HAS BEEN REVISED IN THE
		CURRENT YEAR NONE OF THESE REVISIONS HAD A MATERIAL IMPACT ON THE SUPPORT
		PERCENTAGE

Schedule A (Form 990 or 990-EZ) 2015

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Political Campaign and Lobbying Activities

DLN: 93493193008836

Inspection

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ►Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes" on 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" on 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

ine 35c (Pro	1(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete ration answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions), then 1(c)(4), (5), or (6) organizations Complete Part III	
Name of the		nployer identification number
AMERICAN WA	TER WORKS ASSOCIATION	3-5660277
Part I-A	complete if the organization is exempt under section 501(c) or is a sec	
	a description of the organization's direct and indirect political campaign activities in Part IV	-
2		
olitical expe	nditures	
•		
_		\$
3		
olunteer hou	rs	
Part I-B	omplete if the organization is exempt under section 501(c)(3).	
1 Enter th	e amount of any excise tax incurred by the organization under section 4955	\$
2 Enter th	e amount of any excise tax incurred by organization managers under section 4955	\$
3 If the or	ganization incurred a section 4955 tax, did it file Form 4720 for this year?	┌ Yes
_		
4a		
4a Vas a correct	on made?	
Vas a correct		
Vas a correct Yes	o ' describe in Part IV	
Vas a correct Yes	0	ection 501(c)(3).
Vas a correct Yes N b If "Yes, Part I-C	o ' describe in Part IV	
Yes No If "Yes, Part I-C (1 Enter the	o describe in Part IV complete if the organization is exempt under section 501(c), except se	
Yes No If "Yes, Part I-C C 1 Enter the	o describe in Part IV complete if the organization is exempt under section 501(c), except see amount directly expended by the filing organization for section 527 exempt function active unt of the filing organization's funds contributed to other organizations for section 527	
Yes N b If "Yes, Part I-C (1 Enter the amoxempt function	o describe in Part IV complete if the organization is exempt under section 501(c), except see amount directly expended by the filing organization for section 527 exempt function active unt of the filing organization's funds contributed to other organizations for section 527	
Yes N b If "Yes, Part I-C (1 Enter the	o describe in Part IV complete if the organization is exempt under section 501(c), except see amount directly expended by the filing organization for section 527 exempt function active unt of the filing organization's funds contributed to other organizations for section 527	
Yes Yes, b If "Yes, Part I-C (1 Enter th 2 Inter the amoxempt functi	describe in Part IV complete if the organization is exempt under section 501(c), except sees amount directly expended by the filing organization for section 527 exempt function active unt of the filing organization's funds contributed to other organizations for section 527 on activities	s
Yes Yes, b If "Yes, Part I-C (1 Enter th 2 Inter the amoxempt functi	o describe in Part IV complete if the organization is exempt under section 501(c), except see amount directly expended by the filing organization for section 527 exempt function active unt of the filing organization's funds contributed to other organizations for section 527	s
Yes N b If "Yes, Part I-C (1 Enter the amo xempt functi	describe in Part IV complete if the organization is exempt under section 501(c), except sees amount directly expended by the filing organization for section 527 exempt function active unt of the filing organization's funds contributed to other organizations for section 527 on activities	s
Yes N b If "Yes, Part I-C (1 Enter the amo xempt functi 3 Total ex	describe in Part IV complete if the organization is exempt under section 501(c), except sees amount directly expended by the filing organization for section 527 exempt function active unt of the filing organization's funds contributed to other organizations for section 527 on activities	s
Yes N b If "Yes, Part I-C (1 Enter the amo xempt functi 3 Total ex	describe in Part IV complete if the organization is exempt under section 501(c), except see amount directly expended by the filing organization for section 527 exempt function active unt of the filing organization's funds contributed to other organizations for section 527 on activities empt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 171	s

(a) Name	(b) A ddress	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
or Paperwork Reduction Act Notice, se	l se the instructions for Form 990 or 990)-EZ.	Cat No 50084S Schedule C (F	orm 990 or 990-EZ) 2015

Schedule C (Fo	orm 990 or 990-EZ) 2015	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)).	

A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

В	Check	▶ □	if the filing organization checked box A and "limited control" provisions apply		
			Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	1 , , -	(b) Affiliated group totals

Total lobbying expenditures to influence public opinion (grass roots

1a lobbying)

- $oldsymbol{b}$ Total lobbying expenditures to influence a legislative body (direct lobbying)
- Total lobbying expenditures (add lines 1a and 1b)
- $oldsymbol{d}$ O ther exempt purpose expenditures
- Total exempt purpose expenditures (add lines 1c and 1d) ${f e}$

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

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 i reporting section 4911 tax for this year?

Yes 🗆

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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
ь 	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
_c	Total lobbying expenditures	118,447	129,666	122,945	185,108	556,166
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures	16,254	24,258	, ,	,	<u>·</u>
	Schedule C (Form 990 or 990-EZ) 2015					

24,406 160,702

185,108

31,065,658

31,250,766

1,000,000

250,000

	Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	(a)	(b)
or each "Yes" r ctivity.	esponse on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	No	Amount
legislatio	ne year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or referendum, the use of	Yes	
a olunteers?		1 1	ı
	I		
b Paid staf	J ff or management (include compensation in expenses reported on lines 1c through 1i)?		
c ledia advertis	ements?		
	<u> </u>		
d lailings to me	mbers, legislators, or the public?		
I			
e Publicati	ions, or published or broadcast statements?		
f Grants to	o other organizations for lobbying purposes?		
g Direct co			1
h Rallies, o	demonstrations, seminars, conventions, speeches, lectures, or any similar means?		
i ther activitie	s?		
I			
j otal Add line	s 1c through 1:		
	activities in line 1 cause the organization to be not described in section 501(c)(3)?		4
	enter the amount of any tax incurred under section 4912 enter the amount of any tax incurred by organization managers under section 4912		L
•	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?		
Part III-A	Complete if the organization is exempt under section 501(c)(4), section	501(c)(5)	or section
dicili A	501(c)(6).		Yes No
1 Were sub	ostantially all (90% or more) dues received nondeductible by members?		1
2 Did the o	organization make only in-house lobbying expenditures of \$2,000 or less?		2
3 Did the o	organization agree to carry over lobbying and political expenditures from the prior year?		3
Part III-B	Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$ and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."		
1 ues, assessn	nents and similar amounts from members		
1			
	162(e) nondeductible lobbying and political expenditures (do not include amounts of political s for which the section 527(f) tax was paid).		
a urrent year			
2a			
ь			
arryover from	last year		
C C			
otal .			
2c 3 Aggregat	te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		
oes the organ	ization agree to carryover to the reasonable estimate of nondeductible lobbying and diture next year?		
4 Taxable	amount of lobbying and political expenditures (see instructions)	5	
Part IV	Supplemental Information		
Provide the d	escriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr	oup list), Part	II-A, lines 1 and
	ctions), and Part II-B, line 1 Also, complete this part for any additional information eurn Reference Explanation		
	·		90 or 990EZ) 2015

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DLN: 93493193008836

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," on Form 990,

Supplemental Financial Statements

Part IV, line 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.

Inspection

	me of the organization ERICAN WATER WORKS ASSOCIATION		Emp	loyer identification number
	WILL MOUSE WOOD WAS CONTINUED IN		13-5	5660277
Pa	rt I Organizations Maintaining Donor		nilar Funds	
	Complete if the organization answere			
	Tabal assaultanak and afosana	(a) Donor advised funds	(b)	Funds and other accounts
L	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor a funds are the organization's property, subject to t			sed Yes No
ı	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the			
)at	conferring impermissible private benefit? rt II	te if the organization answered	"Ves" on Forr	<u> </u>
	Purpose(s) of conservation easements held by th Preservation of land for public use (e g , recre	e organization (check all that apply) ation or education)	on of an histori	cally important land area
	Protection of natural habitat	Preservati	on of a certified	d historic structure
	Preservation of open space			
	Complete lines 2a through 2d if the organization easement on the last day of the tax year	neld a qualified conservation contribu	ition in the form	n of a conservation
	easement on the last day of the tax year			Held at the End of the Year
3	Total number of conservation easements		2a	Tield at the Elia of the Teal
,	Total acreage restricted by conservation easeme	nts	2b	
:	Number of conservation easements on a certified	historic structure included in (a)	2c	
i	Number of conservation easements included in (o historic structure listed in the National Register) acquired after 8/17/06, and not on	a 2d	
	Number of conservation easements modified, trai	nsferred, released, extinguished, or te	erminated by th	e organization during the
	tax year -			
	Number of states where property subject to cons	arvation eacement is located by		
	Does the organization have a written policy regar	ding the periodic monitoring, inspecti	on, handling of	□ Yes □ No
	violations, and enforcement of the conservation e Staff and volunteer hours devoted to monitoring,		d enforcing con	,
	year •			
	^	-h hdl £l-h		- .
	Amount of expenses incurred in monitoring, insperience \$	ecting, nandling of violations, and enfo	orcing conserva	ation easements during the year
	Does each conservation easement reported on lii	ne 2(d) above satisfy the requirement	ts of section 17	⁷ 0(h)(4)
	(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text		•	se statement, and
	the organization's accounting for conservation ea	sements		
ar	Complete if the organization answers			ner Similar Assets.
a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footi	AS 116 (ASC 958), not to report in assets held for public exhibition, edu	its revenue sta ication, or rese	arch in furtherance of public
b	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its rassets held for public exhibition, edu	evenue statem	ent and balance sheet
(i) Revenue included on Form 990, Part VIII, line 1		▶ \$	
	i) Assets included in Form 990, Part X			
′,	Assets included in Form 990, Part X If the organization received or held works of art, he following amounts required to be reported under S		ssets for finan	
3	Revenue included on Form 990, Part VIII, line 1	110 (ASC 550) relating to thes	e recitio	▶ \$
b	Assets included in Form 990, Part X			▶ \$
	A 33EL3 IIICIUUEU III FUIII 77U, PAIL X			F P

Pari	31111	Organizations Maintaining (continued)	Collections of A	Art, His	toric	al Tre	easures,	or Ot	her Similar	Ass	ets	
3		the organization's acquisition, acc tion items (check all that apply)	ession, and other red	cords, ch	_					use of	fits	
а	┌ P	ublic exhibition		d	Г	Loan or	rexchange	progra	ms			
b	┌ s	cholarly research		е	Γ	Other						
С	ΓP	reservation for future generations										
4	Provid Part X	de a description of the organization (III	's collections and ex	plaın hov	v they	further	the organiz	atıon's	exempt purpos	se in		
5		g the year, did the organization sol s to be sold to raise funds rather th								es	┌ No	
Par	t IV	Escrow and Custodial Arra Complete if the organization Part X, line 21.		n Form 9	990, F	Part IV	', line 9, o	r repo	orted an amo	unt o	n Forr	n 990,
1a		e organization an agent, trustee, cu led on Form 990, Part X?	stodian or other intei	rmediary	for co	ntrıbutı	ons or othe	rasse	ts not	es	┌ No	
b	If"	Yes," explain the arrangement in P	art XIII and complet	te the fol	lowing	table			А	moun	ıt	
С	Вес	ginning balance						1c				
d	Add	ditions during the year						1d				
e	Dis	tributions during the year						1e				
f		ding balance						1f				
2a		ie organization include an amount o	on Form 990. Part X.	line 21.1	for esc	row or	custodial a	ccount	: liability? 「Y	es	┌ No	
		S .		,					•			
b	If"Ye	s," explain the arrangement in Part	t XIII Check here if	the expla	anatior	has b	een provide	d ın Pa	rt XIII			Γ
Pa	rt V	Endowment Funds. Comple	ete if the organizat	tion ans	wered	l "Yes	" to Form	990, F	Part IV, line 1	0.		
			(a)Current year	(b) Prio	r year	b (c) Two years b	ack (d	I) Three years back	((e) Four ye	ars back
1a	Begin	ning of year balance	1,854,631		1,853,9	13	1,847	,139	1,815,27	2		1,775,610
b	Contr	ributions · · · · · · ·	55,612		41,8	12	40	,453	36,39	0		37,803
С	Net ır losse	nvestment earnings, gains, and s	27,661		26,5	85	28	,321	38,87	7		45,736
d	Grant •	s or scholarships	77,489		67,4	47	62	,000	43,40	0		43,877
e	and p	r expenditures for facilities rograms • • • • • • •										
f	A dmii	nistrative expenses			2	:32						
g	End o	f year balance · · · · ·	1,860,415		1,854,6	31	1,853	,913	1,847,13	9		1,815,272
2	Provid	de the estimated percentage of the	current year end bal	ance (lın	e 1g, d	olumn	(a)) held as	5				
а	Board	designated or quasi-endowment 🕨	2 690 %									
b	Perma	anent endowment ► 75 120 %										
c		orarily restricted endowment Fercentages on lines 2a, 2b, and 2c	22 190 % should equal 100%									
За	A re th	nere endowment funds not in the po ization by		nızatıon t	hat ar	e held a	and adminis	stered	for the		Yes	No
		related organizations							Γ	3a(i)		No
	(ii) re	lated organizations							[3a(ii)		No
b		s" on 3a(II), are the related organiz								3b		
4		ribe in Part XIII the intended uses		endowm	ent fur	ds						
Par	t VI	Land, Buildings, and Equip		Fa. www. 00	00 D-		luna 11n (`00 Fo	000 Dawt	V 1.	no 10	
		Complete if the organization Description of property	answered res to	FORTH 9:	90, Pa (a)		(b)		Accumulate			k value
		h			st or oth (investr	er basıs	Cost or oth	er basıs	(c)depreciation	n		
	Land				/ mvc2tl	icitt)	<u> </u>	252,423		-+		252,423
		gs		•				615,917		612		5,776,305
		old improvements		· -			<u> </u>	470,605	<u> </u>	_		172,598
		nent						894,526	 	_		1,021,375
				. ⊤			1	221,320	7,075			_,=_1,5,5

7,222,701

Part VII Investments—Other Secu See Form 990, Part X, line 1	irities. Complete if t	he organizatio	on answered 'Yes'	on Form 990, Part IV, line	e 11b.
(a) Description of security	or category	(1)Book value	(c)Method of valuation	
(including name of se (1)Financial derivatives	curity)			Cost or end-of-year marke	t value
(2)Closely-held equity interests (3)O ther					
(A) CDS WITH MATURITY GREATER THAN	1 YEAR		19,269,000	F	
Total. (Column (b) must equal Form 990, Part X, col	(B) line 12)	*	19,269,000		
Part VIII Investments—Program I	Related.	Form QQA Dar	t IV line 11c -		
Complete if the organization (a) Description of invo			Book value	Form 990, Part X, line 13 (c) Method of valuation	
		`		Cost or end-of-year market	
Total. (Column (b) must equal Form 990, Part X, col (Þ			
Part IX Other Assets. Complete if th	e organization answered (a) Description	'Yes' on Form 9	990, Part IV, line 11	(b) Book value	15
Total. (Column (b) must equal Form 990, Part X					
Part X Other Liabilities. Complete See Form 990, Part X, line 2		inswered 'Yes	' on Form 990, Pa	rt IV, line 11e or 11f.	
1. (a) Description of liability		ook value			
Federal income taxes					
PENSION LIABILITY		4,857,327			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 🕨	4,857,327			
2. Liability for uncertain tax positions. In Par		•	the organization's	financial statements that rone	

31,250,766

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per F	Return
1	Total revenue, gains, and other support per audited financial statements	1	32,337,113
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a -9,694		
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	899,342
3	Subtract line 2e from line 1	3	31,437,771
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) 4b		
С	Add lines 4a and 4b	4c	О
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	31,437,771
Par	Reconciliation of Expenses per Audited Financial Statements With Expense	s pe	Return.
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		T
1	Total expenses and losses per audited financial statements	1	32,159,802
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	909,036
3	Subtract line 2e from line 1	3	31,250,766
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	0

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 additional information

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

Return Reference	Explanation
PART V, LINE 4	THE ORGANIZATION HAS DONOR RESTRICTED ENDOWMENT FUNDS ESTABLISHED FOR THE PURPOSES OF PROVIDING INCOME TO AWARDS AND SCHOLARSHIPS THE ASSOCIATION RECEIVES CONTRIBUTIONS IN SUPPORT OF THE FOLLOWING AWARDS (1) ABEL WOLMAN FELLOWSHIP - FELLOWSHIPS HONOR THE MEMORY OF ABEL WOLMAN BY PROVIDING SUPPORT TO PROMISING DOCTORAL STUDENTS IN THE US, CANADA AND MEXICO PURSUING ADVANCED TRAINING AND RESEARCH IN THE FIELD OF WATER SUPPLY AND TREATMENT (2) LARSON AQUATIC RESEARCH SUPPORT - SCHOLARSHIPS HONOR THE MEMORY OF DR THURSTON LARSON BY PROVIDING SUPPORT FOR DOCTORAL AND MASTERS STUDENTS INTERESTED IN CAREERS IN THE FIELDS OF CORROSION CONTROL, TREATMENT AND DISTRIBUTION OF DOMESTIC AND INDUSTRIAL WATER SUPPLIES, AQUATIC CHEMISTRY, AND/OR ENVIRONMENTAL CHEMISTRY
PART X, LINE 2	THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) IT HAS BEEN DETERMINED THAT THE ASSOCIATION IS NOT A PRIVATE FOUNDATION AS DEFINED IN SECTION 509(A) OF THE IRC THE ASSOCIATION ENGAGES IN CERTAIN ACTIVITIES THAT PRODUCE UNRELATED BUSINESS INCOME AS DEFINED BY FEDERAL INCOME TAX REGULATIONS THE ASSOCIATION IS NO LONGER SUBJECT TO FEDERAL OR STATE INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR RETURNS PRIOR TO 2012
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD NET AGAINST REVENUE 909,036
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD NET AGAINST REVENUE 909,036
-	

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

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As Filed Data -

DLN: 93493193008836

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

	e of the organization				Employer identi	fication number
AΜE	RICAN WATER WORKS ASSOCI	ATION			13-5660277	
Pa	rt I General Information Complete if the organ				14b.	
1	For grantmakers. Does the of and other assistance, the grants or a used to award the grants or a	ntees' eligibili	ty for the grar	nts or assistance, and	the selection criteria	✓ Yes
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitori	ng the use of its grant	s and other
3	Activites per Region (The follow	ung Part I, line 3	3 table can be d	uplicated if additional spa	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	See Add'l Data			,		
(2)						
(3)						
(4)						
(5)						
b	Sub-total Total from continuation sheets to Part I	0	0			623,365 0
C	: Totals (add lines 3a and 3b)	0	0			623,365

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

6

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

Part III can be	<u>duplicated if addit</u>	cional space is no	eded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)					,		
(2)		+			1		1
(3)		1	·		'		
(4)		+			+		1
(5)		+ +			†		
(6)		+			†		1
(7)		+			†		1
(8)		+ +			<u> </u>		
(9)		+ + +					1
(10)		+ +	·		<u> </u>		
(11)		+ + +			1		
(12)		+ + +					
(13)		+ +	·		<u>'</u>		'
(14)		†			1		
(15)		+ + +			1		
(16)		1			1		
(17)					1		
(18)					1		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	굣	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	⊽	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	굣	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u> ~</u>	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	⊽	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	√	No

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 Page **5**

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	MEMBER SECTION ALLOTMENTS THE ASSOCIATION'S BOARD OF DIRECTORS APPROVES ANNUAL ALLOTMENTS EACH YEAR PAYABLE TO ITS MEMBER SECTIONS THIS ALLOTMENT PROVIDES OPERATIONAL SUPPORT TO THE MEMBER SECTIONS FOR THE CALENDAR YEAR

Additional Data

Software ID: Software Version:

EIN: 13-5660277

Name: AMERICAN WATER WORKS ASSOCIATION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	GRANTS	OPERATING SUPPORT	286,802
SOUTH ASIA	0	0	PROGRAM SERVICES	CONSULTING AND CONFERENCES/TRAVEL	175,167
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	CONFERENCE/TRAVEL	34,429

Form 990 Schedule F	<u> Part I - Activi</u>	<u>ties Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	CONFERENCE/TRAVEL	20,445
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	CONFERENCE/TRAVEL	34,148
SOUTH AMERICA	0	0	PROGRAM SERVICES	CONFERENCE/TRAVEL	39,540

Form 990 Schedule F	Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region							
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	0	0	PROGRAM SERVICES	CONFERENCE/TRAVEL	32,834							

Form 990 Schedi	Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
			OPERATING SUPPORT	29,664	CHECK						
			OPERATING SUPPORT	33,632	CHECK						
			OPERATING SUPPORT	15,000	WIRE						
\			OPERATING SUPPORT	129,922	CHECK						

rorm 990 Scheav	ie r Part II	- Grants or Entitle	is outside the on	itea States	_	_		
(a) Name of organization	I (C) Region I (c		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
			OPERATING SUPPORT	18,208	CHECK			
			OPERATING SUPPORT	60,376	CHECK			
4								,

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

(Form 990)

Department of the

DLN: 93493193008836 OMB No 1545-0047

Open to Public

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

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

reasury nternal Revenue Service	► Informati	on about Schedule 1 (F	orm 990) and its instru	ctions is at <u>www.irs.go</u> u	<u>//TOFM990</u> .		Inspection
ame of the organization MERICAN WATER WO	DVC ACCOCIATION					Employer identification	on number
MERICAN WATER WO	TRKS ASSOCIATION					13-5660277	
Part I General:	Information on Grants a	nd Assistance					
the selection crite	tion maintain records to substar ria used to award the grants or a V the organization's procedures	ıssıstance?				tance, and	▽ Yes
	Other Assistance to Domestic O			plete if the organization	answered "Yes" on F	orm 990, Part IV, line 21	., for any recipient
(a) Name and addres organization or government		(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data ⁻	Table						

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) AWARDS (WOLMAN)	3	65,489			
(2) SCHOLARSHIP (LARSON)	2	12,000			
Part IV Supplemental Informat	ion. Provide the infor	mation required in Pa	art I, line 2, Part III,	column (b), and any other	additional information.

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

Schedule I (Form 990) 2015

Additional Data

Software ID:

Software Version:

EIN: 13-5660277

Name: AMERICAN WATER WORKS ASSOCIATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WATER FOR PEOPLE 100 E TENNESSEE AVE DENVER, CO 80209	84-1166148	501(C)(3)	28,350				OPERATING SUPPORT
AMERICAN WATER WORKS ASSOCIATION ALASKA SECTION 22457 HILLTOP CIRCLE CHUGIAK,AK 99567	92-0104130	501(C)(3)	15,000				OPERATING SUPPORT
AMERICAN WATER WORKS ASSOCIATION ALABAMA- MISSISSIPPIP SECTION PO BOX 4651 JACKSON,MS 39296	23-7026150	501(C)(3)	32,231				OPERATING SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION ARIZONA SECTION 5100 W INA RD TUCSON,AZ 85743	23-7026151	501(C)(3)	30,292				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION CALIFORNIA-NEVADA SECTION 10435 ASHFORD ST RANCHO CUCAMONGA,CA 91730	94-6114828	501(C)(3)	215,164				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION CHESAPEAKE SECTION 11510 GREENSPRING AVE LUTHERVILLE, MD 21093	52-1182688	501(C)(3)	26,761				OPERATING SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	n (g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION CONNECTICUT SECTION 90 S SARGENT DR NEW HAVEN, CT 06511	06-6100180	501(C)(3)	20,055				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION FLORIDA SECTION 1300 9TH ST ST CLOUD,FL 34769	23-7027079	501(C)(3)	80,667				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION GEORGIA SECTION 199 PRESERVATION DR JACKSON,GA 30233	58-1815129	501(C)(3)	40,038				OPERATING SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	n (g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION HAWAII SECTION PO BOX 22614 HONOLULU,HI 96823	99-0165772	501(C)(3)	15,000				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION ILLINOIS SECTION 545 S RANDALL RD ST CHARLES, IL 60174	23-7026152	501(C)(3)	59,824				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION INDIANA SECTION 5265 E 82ND ST INDIANAPOLIS,IN 46250	23-7026153	501(C)(3)	39,535				OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN WATER WORKS ASSOCIATION INTERMOUNTAIN SECTION 8215 S 1300 W WEST JORDAN,UT 84088	23-7026154	501(C)(3)	20,523				OPERATING SUPPORT		
AMERICAN WATER WORKS ASSOCIATION IOWA SECTION 2201 GEORGE FLAGG PKWY DES MOINES,IA 50321	23-7026138	501(C)(3)	18,727				OPERATING SUPPORT		
AMERICAN WATER WORKS ASSOCIATION KANSAS SECTION PO BOX 3046 SALINA,KS 67402	23-7026155	501(C)(3)	15,000				OPERATING SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AMERICAN WATER WORKS ASSOCIATION KENTUCKY- TENNESSEE SECTION 3801 SPRINGHURST BLVD LOUISVILLE,KY 40241	23-7026156	501(C)(3)	52,070				OPERATING SUPPORT		
AMERICAN WATER WORKS ASSOCIATION MICHIGAN SECTION PO BOX 30516 LANSING,MI 48909	38-6073280	501(C)(3)	45,775				OPERATING SUPPORT		
AMERICAN WATER WORKS ASSOCIATION MINNESOTA SECTION 11373 HILLCREST DR GRANT,MN 55110	23-7026161	501(C)(3)	30,360				OPERATING SUPPORT		

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION MISSOURI SECTION 1201 NE BUTTONWOOD AVE LEES SUMMIT, MO 64086	23-7026157	501(C)(3)	25,018				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION MONTANA SECTION PO BOX 582 SEELEY LAKE,MT 59868	23-7026158	501(C)(3)	15,000				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION NEBRASKA SECTION 300 S 49TH ST NORFOLK,NE 68701	23-7026159	501(C)(3)	15,000				OPERATING SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	n (g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION NEW ENGLAND SECTION 125 HOPPING BROOK RD HOLLISTON, MA 01746	04-1666330	501(C)(3)	55,908				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION NEW JERSEY SECTION 38 E RIDGEWOOD AVE RIDGEWOOD,NJ 07450	22-6049378	501(C)(3)	39,504				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION NEW YORK SECTION 614 7TH NORTH ST LIVERPOOL,NY 13088	11-6026214	501(C)(3)	61,630				OPERATING SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION NORTH CAROLINA SECTION 3725 NATIONAL DR STE 217 RALEIGH, NC 27612	56-6045934	501(C)(3)	43,912				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION NORTH DAKOTA SECTION 918 E DIVIDE AVE BISMARK,ND 58501	44-0420756	501(C)(3)	15,000				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION OHIO SECTION 4747 SPRING GROVE AVE CINCINNATI,OH 45232	23-7026162	501(C)(3)	66,827				OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION PACIFIC NORTHWEST SECTION PO BOX 872467 VANCOUVER, WA 98687	23-7026163	501(C)(3)	84,128				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION PENNSYLVANIA SECTION 1309 BRIDGE ST NEW CUMBERLAND, PA 17070	23-7026164	501(C)(3)	60,722				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION PUERTO RICO SECTION PO BOX 9648 CAGUAS, PR 00726	66-0343550	501(C)(3)	15,000				OPERATING SUPPORT			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1 3 5	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION ROCKY MOUNTAIN SECTION 6666 WEST QUINCY AVE DENVER, CO 80235	23-7026165	501(C)(3)	63,363				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION SOUTH CAROLINA SECTION 121 EXECUTIVE CENTER DR COLUMBIA,SC 29210	23-7052846	501(C)(3)	26,231				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION SOUTH DAKOTA SECTION 23343 479TH AVE EGAN,SD 57024	23-7026166	501(C)(3)	15,000				OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION SOUTHWEST SECTION 30 HIDDEN HILLS LAKE ARNAUDVILLE, LA 70512	23-7026167	501(C)(3)	35,764				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION TEXAS SECTION PO BOX 80510 AUSTIN,TX 78708	75-1388778	501(C)(3)	104,134				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION VIRGINIA SECTION PO BOX 11992 LYNCHBURG, VA 24506	23-7026168	501(C)(3)	50,849				OPERATING SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
AMERICAN WATER WORKS ASSOCIATION WEST VIRGINIA SECTION PO BOX 5109 CHARLESTON, WV 25361	31-0988950	501(C)(3)	15,000				OPERATING SUPPORT			
AMERICAN WATER WORKS ASSOCIATION WISCONSIN SECTION PO BOX 635 OAK CREEK, WI 53154	23-7026169	501(C)(3)	27,890				OPERATING SUPPORT			

DLN: 93493193008836

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

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

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

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

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization AMERICAN WATER WORKS ASSOCIATION

Employer identification number

13-5660277

Pai	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
5	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	If "Yes," on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 DAVID LAFRANCE CHIEF EXECUTIVE OFFICER	(i)	256,484	25,000	24,690	23,850	23,668	353,692	0
	(ii)	0	0	0	0	0	0	0
2 PAULA MACILWAINE DEPUTY CEO	(i)	209,785	15,000	1,290	21,063	24,366	271,504	0
	(ii)	0	0	0	0	0	0	0
3 THOMAS CURTIS DEPUTY CEO	(i)	145,703	25,000	1,190	15,483	150	187,526	0
	(ii)	0	0	0	0	0	0	0
4 KEVIN MANN CHIEF FINANCIAL OFFICER	(i)	160,162	12,000	607	16,171	23,167	212,107	0
	(ii)	0	0	0	0	0	0	0
5 SUSAN FRANCESCHI CHIEF MEMBERSHIP OFFICER	(i)	141,301	8,000	664	13,846	10,531	174,342	0
	(ii)	0	0	0	0	0	0	0
6 KEVIN TURNTINE CHIEF INFORMATION	(i)	115,353	8,000	17,920	13,488	25,039	179,800	0
OFFICER	(ii)	0	0	0	0	0	0	0
7 JAMES ALAN ROBERSON DIRECTOR - FEDERAL	(i)	132,729	3,500	1,170	12,843	7,231	157,473	0
RELATIONS	(ii)	0	0	0	0	0	0	0
8 NANCY MORTVEDT DIRECTOR - SALES	(i)	114,985	2,500	213	11,186	22,471	151,355	0
	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2015

Part III	Supplemental	Information
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Provide the information, explanation, o	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Return Reference	Explanation
	PERFORMANCE BONUSES WERE PAID TO THE HIGHEST COMPENSATED EMPLOYEES THE COMPENSATION COMMITTEE DETERMINED THE AMOUNT OF THE EXECUTIVE BONUSES

Schedule J (Form 990) 2015

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As Filed Data -

DLN: 93493193008836

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

2015

Open to Public Inspection

Name of the organization AMERICAN WATER WORKS ASSOCIATION Employer identification number

13-5660277

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE PRESIDENT, PRESIDENT-ELECT, IMMEDIATE PAST-PRESIDENT, TREASURER, SIX VICE-PRESIDENTS, COUNCIL CHAIRS, THE CHAIR OF THE WATER RESEARCH FOUNDATION BOARD OF TRUSTEES, THE EXECUTIVE DIRECTOR SERVING AS SECRETARY IN A NONVOTING CREATERY. AND SUCH OTHER NONVOTING MEMBERS AS THE BOARD SHALL DIRECT BETWEEN MEETINGS OF THE BOARD OF DIRECTORS, THE EXECUTIVE COMMITTEE SHALL EXERCISE THE FULL POWERS OF THE BOARD IN MATTERS WHICH IN THE JUDGMENT OF THE EXECUTIVE COMMITTEE MUST BE ACTED UPON BEFORE THE NEXT REGULAR MEETING OF THE BOARD, EXCEPT THAT THE EXECUTIVE COMMITTEE SHALL NOT ACT FOR THE BOARD IN RESPECT TO EXPULSION OF MEMBERS OF TAKE ANY ACTION THAT WILL RESULT IN A CHANGE IN THE NUMBER OF DIRECTORS, NOR SHALL THE EXECUTIVE COMMITTEE HAVE THE AUTHORITY OF THE BOARD OF DIRECTORS IN REFERENCE TO THE FOLLOWING, WITHIN THE MEANING OF THE ILLINOIS GENERAL NOT FOR PROFIT CORPORATION ACT (1) AMENDING, ALTERING, OR REFEALING THESE BYLAWS, (2) ELECTING, APPOINTING OR REMOVING ANY MEMBER OF THE EXCUTIVE COMMITTEE, ANY OTHER BOARD COMMITTEE, OR ANY DIRECTOR OR OFFICER OF THE ASSOCIATION, (3) AMENDING THE ARTICLES OF INCORPORATION, (4) ADOPTING A PLAN OF MERGER OR ADOPTING A PLAN OF MERGER OR ADOPTING A PLAN OF OR SECRETARY DISSOLUTION OF THE ASSOCIATION OR THE EXECUTIVE COMMITTEE, OR (9) MODIFYING, DISAPPROVING OR WITHHOLDING A RECOMMENDATION OR REPEALED BY THE EXECUTIVE COMMITTEE, OR (9) MODIFYING, DISAPPROVING OR WITHHOLDING A RECOMMENDATION OR REPEALED BY THE EXECUTIVE COMMITTEE. OR THE POSITION WITH EXECUTIVE COMMITTEE FOR SUBMISSION TO THE BOARD OF DIRECTORS, OR WHICH REQUIRES BOARD ACTION, WITHOUT REPORTING SUCH ACTION BY THE COMMITTEE TO THE BOARD OF DIRECTORS, OR WHICH REQUIRES BOARD ACTION, WITHOUT REPORTING SUCH ACTION BY THE COMMITTEE TO THE BOARD O

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	JOHN DONAHUE AND DAVID LAFRANCE ARE DIRECTORS OF AWWA'S INACTIVE WHOLLY-OWNED SUBSIDIARY, AWWA ASSOCIATION SERVICES, INC

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ASSOCIATION MEMBERS CONSIST OF 1) INDIVIDUAL MEMBERS AND 2) ORGANIZATION MEMBERS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	SECTION DIRECTORS - EACH SECTION SHALL SELECT ONE DIRECTOR FROM AMONG ITS MEMBERS, IN A MANNER CONSISTENT WITH ITS BY LAWS A SECTION MAY SELECT ONE OR MORE ADDITIONAL DIRECTORS WHEN ITS MEMBERSHIP EXCEEDS LEVELS OF MEMBERSHIP ESTABLISHED BY THE BOARD FROM TIME TO TIME DIRECTORS-AT-LARGE - THE BOARD OF DIRECTORS SHALL ELECT FROM AMONG ASSOCIATION MEMBERS IN GOOD STANDING ONE DIRECTOR-AT-LARGE EACH YEAR AND ONE SERVICE PROVIDER DIRECTOR-AT-LARGE (AS DEFINED BY THE BOARD OF DIRECTORS) EVERY THREE YEARS AT ITS WINTER MEETING, RESULTING IN FOUR DIRECTORS-AT-LARGE SERVING SIMULTANEOUSLY

Return Reference	Explanation
	THE FORM 990 IS PREPARED BY A THIRD PARTY PREPARER AND IS REVIEWED BY THE AUDIT COMMITEE PRIOR TO FILING BOARD MEMBERS ARE NOTIFIED BY E-MAIL THAT THE FORM 990 IS AVAILABLE FOR REVIEW ONLINE BEFORE BEING FILED WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	OFFICERS AND DIRECTORS ANNUALLY COMPLETE A DISCLOSURE FORM CONFLICTS WITH REGARDS TO CONTRACTS OR TRANSACTIONS ARE DISCLOSED PRIOR TO ANY MEETING WHERE ACTION IS REQUIRED THESE DISCLOSURES ARE REFLECTED IN THE MEETING MINUTES OFFICERS/DIRECTORS WITH CONFLICTS ARE NOT ALLOWED TO PARTICIPATE IN OR DISCUSS THE MATTER AND ARE NOT ALLOWED TO VOTE CONFLICTS ARE DEALT WITH AT THE BOARD AND MANAGEMENT LEVEL

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE CURRENT CHIEF EXECUTIVE OFFICER STARTED IN MAY 2010 A COMPENSATION (SALARY AND BONUS) REVIEW WAS CONDUCTED FOR 2014 BY THE COMPENSATION COMMITTEE FOR THE PAYMENT OF BONUSES FOR THE DEPUTY CEO'S AND CEO, THE REVIEW WAS CONDUCTED IN 2015 BY THE COMPENSATION COMMITTEE AND APPROVED BY THE EXECUTIVE COMMITTEE. IN DETERMINING THE STARTING COMPENSATION FOR THE CEO, THE AWWA PRESIDENT (CHAIR OF COMPENSATION COMMITTEE) WAS PROVIDED (1) EXECUTIVE SALARY INFORMATION INCLUDING SURVEY COMPARABILITY DATA AND (2) EXECUTIVE SALARY INFORMATION FROM THE FORM 990'S OF OTHER ASSOCIATIONS TO USE AS RESOURCES TO DETERMINE STARTING SALARY AND FOR DISCUSSION WITH THE COMPENSATION COMMITTEE. IN DETERMINING THE CEO'S BONUS FOR 2015, THE COMPENSATION COMMITTEE WAS PROVIDED WITH COMPARABLE MARKET DATA AND BENCHMARKING INFORMATION IN ADDITION, THE CEO'S PERFORMANCE WAS REVIEWED BY THE COMPENSATION COMMITTEE IN RELATION TO PREDETERMINED PERFORMANCE GOALS AND OBJECTIVES, PRIOR TO AWARDING THE BONUS THE EXECUTIVE COMMITTEE RATIFIED THE DECISION OF THE COMPENSATION COMMITTEE FOR THE PAYMENT OF BONUSES FOR THE DEPUTY CEO'S, THE REVIEW WAS CONDUCTED IN 2015 BY THE COMPENSATION COMMITTEE.

Return Reference	Explanation
FORM 990, PART VI,	AWWA'S GOVERNING DOCUMENTS, FINANCIAL STATEMENTS, AND CONFLICT OF INTEREST POLICY ARE
SECTION C, LINE 19	AVAILABLE TO THE PUBLIC ON AWWA'S WEBSITE AND UPON REQUEST FOR A VALID BUSINESS PURPOSE

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN MINIMUM PENSION LIABILITY 1,158,765

Return Reference	Explanation
XI, LINE 2C	THE ORGANIZATION'S AUDIT COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THE ORGANIZATION'S OVERSIGHT PROCESS DID NOT CHANGE DURING THE YEAR

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SCHEDULE R

(Form 990)

Department of the Treasury

DLN: 93493193008836

2015

OMB No 1545-0047

Open to Public **Inspection**

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

Internal Revenue Service Name of the organization **Employer identification number** AMERICAN WATER WORKS ASSOCIATION 13-5660277 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I Name, address, and EIN (if applicable) of disregarded entity Legal domicile (state Direct controlling Primary activity Total income End-of-year assets or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (g) Name, address, and EIN of related organization Legal domicile (state Public charity status Section 512(b) Primary activity Exempt Code section Direct controlling or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No

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

(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	aging ner?	(k) Percentage ownership
							Yes	No		Yes	No	
Down TV Identification of Bolated Overships Touchle a	6		T					111/11	F O	.00 [EV Long

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(i Section (b)(contro entr	n 512 13) olled ty?
								Yes	No
AWWA ASSOCIATION (1)SERVICES INC 6666 WEST QUINCY AVENUE DENVER, CO 80235 84-1265561	INACTIVE	СО	N/A	С			100 000 %	Yes	

Part V	ransactions With Related Organizations Complete if the organization answ	ered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
Note. C	omplete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During the	tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations li	sted in Parts II-IV?				
a Receip	of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
b Gıft, gr	nt, or capital contribution to related organization(s)				1b		No
c Gıft, gra	nt, or capital contribution from related organization(s)				1 c		No
d Loans	r loan guarantees to or for related organization(s)				1d		No
e Loans	r loan guarantees by related organization(s)				1e		No
f Divider	ds from related organization(s)				1f		No
g Sale of	assets to related organization(s)				1g		No
h Purcha	se of assets from related organization(s)				1h		No
i Exchan	e of assets with related organization(s)				1i		No
j Lease o	f facilities, equipment, or other assets to related organization(s)				1j		No
k Lease	f facilities, equipment, or other assets from related organization(s)				1k		No
I Perform	ance of services or membership or fundraising solicitations for related organization(s) $. $				1 l		No
m Perform	ance of services or membership or fundraising solicitations by related organization(s) . $$.				1m		No
n Sharing	of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o Sharing	of paid employees with related organization(s)				10		No
p Reimbu	rsement paid to related organization(s) for expenses				1p		No
q Reimbu	rsement paid by related organization(s) for expenses				1q		No
r Othert	ansfer of cash or property to related organization(s)				1r		No
s Othert	ansfer of cash or property from related organization(s)				1s		No
2 If the a	swer to any of the above is "Yes," see the instructions for information on who must complet	e this line, including co	overed relationships	and transaction thresholds			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	unt in	volved	

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions															
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		total end	end-of-year) (h) : of Disproprtiona allocations?		(h) Disproprtionate allocations?		box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No			
												1	Ī		

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2015