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Extended to November 15, 2017

Return of Organization Exempt From Income Tax

Popertment of the Treesury

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.

2016
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

<u>A</u>	For th	e 2016 calendar year, or tax year beginning and endin	g		
В	Check i applica	C Name of organization		D Employer identif	ication number
	Addr Chan Nam	Alr & waste Management Association		25.6	048614
F	chan lnitia				
E	retur Final retur	420 Fort Duquesne Blvd., One Gateway 3rd		E Telephone numbe (412	2) 232-3444
_	term ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,824,139.
	Ame	Fictsburgh, PA 13222-1433		H(a) is this a group r	
L	Appl tion pend	F Name and address of principal officer Sceptiatite Grypcis		for subordinates	s? Yes X No
_		same as C above		H(b) Are all subordinates i	
		empt status: X 501(c)(3)	527	1	list (see instructions)
		te: > www.awma.org		H(c) Group exemption	
	art I	forganization: X Corporation Trust Association Other ► L Summary	Year (of formation: 1952	M State of legal domicile; PA
<u>ت</u>	1	Briefly describe the organization's mission or most significant activities: The miss	i o	n of Air &	Waste
õ		Management Association is to assist in the p			
Activities & Governance	2	Check this box if the organization discontinued its operations or disposed of i			
Ver	3	Number of voting members of the governing body (Part VI, line 1a)		3	17
ĝ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	17
න් ග	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	•• ••	. 5	15
ij	6	Total number of volunteers (estimate if necessary)	•	6	500
ŧ	7 a	Total unrelated business revenue from Part VIII, column (C), tine 12	_	7a	15,979.
ĕ	Ь	Net unrelated business taxable income from Form 990-T, line 34=CEIVED	7	7b	0.
_			J_	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h))	961,715.	976,777.
nge	9	Program service revenue (Part VIII. line 2g)		1,716,516.	1,712,924.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and (d)		63,308.	1,621.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c@nd1ta)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	2,741,539.	2,691,322.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1	33,000.	49,500.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
s	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		803,630.	847,079.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Çpel	ь	Total fundraising expenses (Part IX, column (D), line 25) 42,899.			7 2
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,742,134.	1,742,501.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,578,764.	2,639,080.
	19	Revenue less expenses. Subtract line 18 from line 12	<u>L_</u>	162,775.	52,242.
5			Beg	inning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		1,511,343.	1,604,320.
at Assets	21	Total liabilities (Part X, line 26)		579,639.	571,122.
لتقر	22	Net assets or fund balances. Subtract line 21 from line 20	<u> </u>	931,704.	1,033,198.
	rt II	Signature Block			
	-	ties of perjury, I declare that I have examined this return, including accompanying schedules and st		•	knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	arer t	nas any knowledge.	
		Daphanie M. Klyptis		1/-	13-17
Sigr	ı	Signatore of officer		Date	
Here	•	Stephanie Glyptis, Executive Director		 	
		Type or print name and title	10	***	Drui
		Print/Type preparer's name Preparer's signature		ate Check	PTIN
Paid		JOEL S. KUNKEL, CPA July Known CP	41	1///3//7 self-employ	
Prep		Firm's name Herbein + Company, Inc.		Firm's EIN ▶	23-2415973
Use	Only	Firm's address ▶ 530 Pellis Rd, Ste 7000			4 004 5050
		Greensburg, PA 15601-4585		Phone no. 72	4-834-7053
May	the II	S discuss this return with the preparer shown above? (see instructions)			X Yes No
63200	1 11-1				Form 990 (2016)
	S	ee Schedule O for Organization Mission State:	nen	t Continuat	lon

Form 990 (2016) Air & Waste Management Association

Part IV | Checklist of Required Schedules

			LYes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	l		l
	public office? (f "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	1	1	}
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	1		}
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ì	Ì	į
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part !	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	1	1	1
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u> </u>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		ł	l
	Schedule D, Part III	8	L	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	ł		Ì
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	l		
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	.		1
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	<u> </u>
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.	\$4,°	1. 3.4	,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	[]
	Part VI	11a	X	ļ
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1	•	
	assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			l
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	7.5	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110	X	 -
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses]		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	X	 -
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		4.	
	Schedule D, Parts XI and XII	12a	X	
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			45*
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	32	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
D	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	ا ا		7.7
-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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	ا ۔۔ ا		v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		.	
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		į	v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines)	v
••	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا 🚛 ا	1	v
	complete Schedule G. Part III	19	900	X
		rom	abr (2016)

				Yes	No
		Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	L	X
	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	<u> </u>
٠	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	}	1	1
		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	}		1
		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	L
	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		1	
		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		i	
	_	Schedule J	23		X
	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	}	ſ	
		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		Ì	
		Schedule K. If "No", go to line 25a	24a		X
		Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	1		l
		any tax-exempt bonds?	24c		
		Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		 -
	258	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	1 1		1
		that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			~
	20	Schedule L, Part I	25b		X
•	26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	1		ĺ
		former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? // "Yes,"			x
	7	complete Schedule L, Part II	26		
•	27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1 1		l
		contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			x
	28	of any of these persons? If "Yes," complete Schedule L, Part III	27	186	35
•	20	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):		2. A.	
	а	A second of the	28a	S.id	X
		A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
		An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
	٠	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	1	X
•	9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
		Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
Ì	~		30	- 1	X
	1	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		<u></u>
Ĭ		If "Yes," complete Schedule N, Part I	31	}	X
3		Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	" 	_	
_		Schedule N, Part II	32	1	X
3		Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		1	_==
•		sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33	į	X
3		Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
Ī		Part V, line 1	34	İ	X
3	5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
		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	ì	
3		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	Ì	X
3		Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
_		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	I	X
3		Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	\ 		
٠		Note. All Form 990 filers are required to complete Schedule O	38	x	
_		Assessing a service and residence as activities activities of the control of the		لبتنا	

Form 990 (2016)

Air & Waste Management Association

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				
	•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 13	₹\;-		1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b C			ļ: · ·
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	ortable gaming] ~		4
	(gambling) winnings to prize winners?	••••••	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				Ţ.
	filed for the calendar year ending with or within the year covered by this return	2a 15	3,650	1 3	1 -
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b	X	1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		150	1.5	Τ.
За	Did the assessmentian have completed by since a great transport \$4.000 and \$1.11.		3a	X	1
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule C		3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other au				Γ
	financial account in a foreign country (such as a bank account, securities account, or other financial ac	•	4a	1	X
b	If "Yes," enter the name of the foreign country:	,	学	Y.	4
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc	counts (FBAR).		\$	
5a	Man the appropriate a part to a publicate of the state of		5a	1	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c	1	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?	Ū	6a	1	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributio				
	were not tax deductible?		6ъ	i	1
7	Organizations that may receive deductible contributions under section 170(c).	••••••••	13,		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and servi	ces provided to the payor?	7a	} ~	x
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	required			
	to file Form 8282?	•	7c	[X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	-65	2.35	- 32
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cor	tract?	7e_	<u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract		71		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form		7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	on file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by	y the	1.5°		7.
	sponsoring organization have excess business holdings at any time during the year?		8		X
9	Sponsoring organizations maintaining donor advised funds.		1.2.	1	1
а	Did the sponsoring organization make any taxable distributions under section 4966?	••••	9a	L	X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	*************	9Ь		X
0	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	. E.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		1
1	Section 501(c)(12) organizations. Enter:		羅		9500 1236
a	Gross income from members or shareholders	11a		6	Stell
b	Gross income from other sources (Do not net amounts due or paid to other sources against			700	17
		11b		. 27	瞪到
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	041?	12a	L	
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		S. 5.7.	13.4
3	Section 501(c)(29) qualified nonprofit health insurance issuers.				
æ	Is the organization licensed to issue qualified health plans in more than one state?	,	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		凌	a Tam	3-1
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1	1	
	- · · · · · · · · · · · · · · · · · · ·	13b	12.	5 Y	140
c		13c		· .	/3,
4a	Distriction of the state of the second of the state of th		14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule		14b		
			Form	990	(2016

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 17 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 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? X 7a 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 actions undertaken during the year by the following: 13/2 20 a The governing body? X b Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 10ь 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, If any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 164 b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶PA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-7 (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Another's website X Upon request Other (explain in Schedule O) Own website 19 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:

15222-1435

W.G. Braun - 412-232-3444

420 Fort Duquesne Boulevard, Pittsburgh, PA

orm 990 (2016)	Air	٤	Waste	Management	Aggo
1111 330 (2010)	4 44	Œ	Mapre	Management	ADSU

25-6048614

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 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 (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

· List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)	Ī	17 1144.44		<u>00()</u> C)	ipei	1341	(D)	(E)	(F)
Name and Title	Average	/	Position (do not check more th		tion		Reportable	Reportable	Estimated	
	hours per	box	, unie	ва ре	rson i	boti suri/v	n an	compensation	compensation	amount of
	week (list any	_			1	7,000		from the	from related organizations	other compensation
	hours for	indrudual trustee or director				_	1	organization	(W-2/1099-MISC)	from the
	related	1 2	最		1		1	(W-2/1099-MISC)	(organization
	organizations	ŝ	혈		86	Ē.,				and related
	below	를	nstitutional trustae	ja Seri	Key amployee	Highest compensated employee	Former	(organizations
77.	line)	18	<u> </u>	₹	₹.	宝島	Ē			
(1) Brad Waldron President	20.00	ļ.,)		0.	•
(2) Scott Freeburn	1000	X	-	X		_	┝	0.	U •	0.
President Elect	10.00	x		x				0.	0.	•
(3) Dallas Baker	10.00	₽	-	A.	├	<u> </u>	-	0.	<u> </u>	0.
Immediate Past President	10.00	x		x				0.	0.	0.
(4) Michele Gehring	5.00	1	-	4	-	-			0.	0.
Vice President	3.00	x		x				0.	0.	0.
(5) Kim Marcus	5.00	^	-	4		-	├		<u> </u>	<u> </u>
Vice President	3.00	x		x				0.	0.	0.
(6) Chris Nelson	5.00	<u> </u>	-	4	-		┝╌			<u></u>
Vice President	1-3.00	x		X		l	1	0.	0.	0.
(7) Leah Blinn	5.00	-		-			┝			
Director	- 3000	x					ŀ	0.	0.	0.
(8) Jack Broadbent	5.00				_		Т	-		
Director		x					l	0.	0.	0.
(9) Carol Clinton	5.00									
Director		x						0.	0.1	0.
(10) Chris Frey	5.00									
Director		X						0.	0.	0.
(11) Jayme Graham	5.00									
Director		X						0.	0.	0.
(12) Jordan Haywood	5.00									
Director		X						0.	0.	0.
(13) Sara Head	5.00									
Director		X						0.	0.	0.
(14) Greg Johnson	5.00									
Director		X						0.	0.	0.
(15) Jen Cowman Moore	5.00									
Director		X						0.	0.	0.
(16) Tony Ward	5.00								}	. –
Director		X						0.	0.	0.
(17) Jeffry Muffat	5.00									
Treasurer		X		X		Ш		0.	0.	0.

Air & Waste Management Association

25-6048614

Page 8

		•	Check if Schedule O cont	tains a response	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
ŧ t	4 1	a	Federated campaigns	1a		The sprangers		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$
Grants	3	ь	Membership dues ,		776,690.	1 1 1 2 5 5	[18] [18] [18]		
	7	C	Fundraising events			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
Gifts	4	d		11		146		語。這是理想	
Contributions,		0	Government grants (contribut						
5		f			200 007	land the			
Ę	3		similar amounts not included abo	· · · 	200,087.		The same of the sa		ming to the wind a string
Ę	1	g	Noncash contributions included in lines			076 777	The state of the s		
0 0	-		Total. Add lines 1a-1f	<u> </u>	Business Code	200,177	The state of the s	Maria Level	Digital St.
•	2	9	Continuing educ	ation n	900099	1 370 753	1,370,753.	विविध्यक्त इत्यक्ति हैन्द्री	la list burg the file of a
3	~	b	Publications	р	511120	342,171.	326,192.	15,979.	-
Program Service		c				<u> </u>			
E 2		d							
ğ	1 .	0							
چ) ,	f	All other program service reve	nue					
	<u> </u>	9	Total. Add lines 2a-2f			1,712,924.	مراغيون والمنطوع ويتأت	むなどの動物	they are that the
	3		Investment Income (including				Ì	į	
	1		other similar amounts)			34,440.	ļ	 	34,440.
	4		Income from investment of tax			<u> </u>		ļ	
	5		Royalties	T		13 C 13 K 15 K 1 N 16 B		er aller	دراري هراويون المرادي الأرباء الأراد المرادية
	_			(i) Real	(ii) Personal				第一次
	6 :	_	Gross rents	}	 			第6 字符章	
	1		Less: rental expenses		 				
			Rental income or (loss) Net rental income or (loss)	<u> </u>	'	vil 7 1 S. Alterial	CHEMETERS	and the state of t	CHARACTERS OF
	ı		Gross amount from sales of	(i) Securities	(ii) Other	15.45# \$28.4A.7	8-19-19-1 TONE	2. · 6. 3. 2 3.	化新杂化 新生物
	ĺ ' '	_	assets other than inventory	99,998.	(ii) Culidi				
	١,		Less: cost or other basis		<u> </u>				
			and sales expenses	132,817.					
	,	•	Gain or (loss)	<32,819.					
			Net gain or (loss)		>	<32,819.>			<32,819.>
	8 8	2	Gross income from fundraising	g events (not					阿蒙特。斯林
2	ı		including \$	of	1				
Revenue			contributions reported on line		ì				
			Part IV, line 18		<u> </u>				
Other			Less: direct expenses		L				hereverl
			Net income or (loss) from fund		<u> </u>	Section of the	A STATE OF THE STA	Stock Strip Corr. C.	कार्यक्षान्त्रम् सम्बद्धाः स्थान
	9 8		Gross income from gaming ac		İ				
	Ŀ		Part IV, line 19 Less: direct expenses						
ſ			Net income or (loss) from gam			The second of the second second second	Elkhite, edili iz	12 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Resident State of the State of
}	10 a		Gross sales of inventory, less i	_		े रेल्प्स अवस्थित	Berger Library	Washing or the	2" Fac (2 14)
ł			and allowances				使的學習轉發	14 化十二十二	
j			Less: cost of goods sold						
- 1			Net income or (loss) from sales			1.1.4.4.1.2.2.6.4.1	12. F. P. TEL	a v usvi nungr	24 APR - 1544 531 EB
Ì		_	Miscellaneous Revenue		Business Code	T. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18	Control of the Contro	14 15 mm	AT 15 18 18 18 18 18 18 18 18 18 18 18 18 18
Ì	11 a					12 13			
	b	,							
j	c	;							
}	d	,	All other revenue						
ł	e								\$
	12		Total revenue. See instructions.	<u></u>	<u>,,</u>	2,691,322.	1,696,945.	15,979.	1,621.
632009	9 11-1	1-14	8						Form 990 (2016)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Program service (D) Fundrajsino Do not include amounts reported on lines 6b, Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1948年 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 40,500. 40,500. individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign 9,000. 9,000. individuals. See Part IV, lines 15 and 16 and the state of Benefits paid to or for members 5 Compensation of current officers, directors, 173,268. 86,634. 86,634. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 517,256. 372,944. 132,224. 12,088. Other salaries and wages Pension plan accruals and contributions (include 6,285. 24,552. 17,733. 534. section 401(k) and 403(b) employer contributions) 85,447. 59,705. 23,018. 2.724. Other employee benefits 46,556. 32,124.14,432. 10 Payroll taxes Fees for services (non-employees): 273,368. 188,624 84,744. a Management 1,425. 1,425 b Legal 16,534. 16,534. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees 5,019. 5,019. g Other. (If line 11g amount exceeds 10% of line 25, 144,194 51,511 65,130. 27,553. column (A) amount, list line 11g expenses on Sch O.) 12 Advertising and promotion 334. 334. 81,965. 50,960. 31.005. 13 Office expenses 35,350. 35,350. 14 Information technology 543. 543. 15 Royalties _____ 127,800. 88.182. 39,618. 16 Occupancy 45,303. 118,621. 73,318. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 669,970. 52,766. 617,204 Conferences, conventions, and meetings 19 5,524. 5,524. 20 Payments to affiliates 21 56,632. 39,076. 17,556. Depreciation, depletion, and amortization 27,270. 34,088. 6,818. Insurance 23 Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 93,732. 90,334 Printing and publicatio 3,398. 12,830. ь Miscellaneous 76,081. 63,251 c Professional developmen 1,321. 1,321. d e All other expenses 2,639,080. 1,893,814. 702,367. 42,899. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Chack here if following SOP 98-2 (ASC 958-720)

Pa	rt X	Balance Sheet						
		Check if Schedule O contains a response or not	e to an	y line in this Part >	<u> </u>	<u> </u>		
						(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				220,206.	1	180,998.
	2	Savings and temporary cash investments				,	2	
	3	Pledges and grants receivable, net				Ĺ	3	<u> </u>
	4	Accounts receivable, net		• • • • • • • • • • • • • • • • • • • •		185,631.	4	119,851.
	5	Loans and other receivables from current and fo				1000 1000 1000 1000	4	The state of the s
	l	trustees, key employees, and highest compensa	ted em	ployees. Complet	e	The state of the s	1. Y.	(1995年) (2015)
	1		Part II of Schedule L					
	6	Loans and other receivables from other disqualif		-		The Table State of	14	
		section 4958(f)(1)), persons described in section	•		buting	The state of the s		The state of the s
	l	employers and sponsoring organizations of sect				法是法律 法国	حزه ۱۹۰۰	ale The Man in
ŧ	ł	employees' beneficiary organizations (see instr).					6_	
Assets	7	Notes and loans receivable, net					7	
⋖	8	Inventories for sale or use				26,177.		23,670.
	9	Prepaid expenses and deferred charges	·······		•••••	39,226.	9	43,600.
	10a						1.3	
		basis. Complete Part VI of Schedule D	10a	629,				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	ł	Less: accumulated depreciation	10b	560,		123,590.		68,813.
	11	Investments - publicly traded securities				916,513.	11	1,167,388.
	12	Investments - other securities. See Part IV, line 1				ļ	12	
	13	Investments - program-related. See Part IV, line		ļ	13	ļ		
	14	Intangible assets			14			
	15	Other assets. See Part IV, line 11		- F44 545	15	1 504 300		
	16	Total assets. Add lines 1 through 15 (must equal				1,511,343.	_	1,604,320.
	17	Accounts payable and accrued expenses		160,470.	17	171,260.		
	18	Grants payable		262 000	18	366 556		
	19	Deferred revenue				363,939.	19	366,556.
	20	Tax-exempt bond liabilities				<u></u>	20	
	21	Escrow or custodial account liability. Complete				P. C.	21	1 Tal. 1 1 48 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
es	22	Loans and other payables to current and former						
₩.		key employees, highest compensated employee				A STATE OF S		The state of the s
Liabilities		Complete Part II of Schedule L				ļ	22	
_	23	Secured mortgages and notes payable to unrela					23	
	24	Unsecured notes and loans payable to unrelated	-		······ ·		24	
	25	Other liabilities (including federal income tax, pay			_		l	į
		parties, and other liabilities not included on lines	-	•		55 220		33 306
	00	Schedule D	••••••			55,230.		571,122.
	26	Total liabilities, Add lines 17 through 25	········	Lham N [Ÿ]		Care William - white Hilliam	26	Marie Marie Const.
		Organizations that follow SFAS 117 (ASC 958)		k nere	ano		25	
Ses	07	complete lines 27 through 29, and lines 33 and				631.	144 St. 27	352,031.
and	27	Unrestricted net assets				931,073.		681,167.
Ba	28	Temporarily restricted net assets				331,073.	28	001,107.
Pu	29) about to		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	29	
ī.		Organizations that do not follow SFAS 117 (As	5C 956), cneck nere	ـــا		落	
õ	20	and complete lines 30 through 34.				बिन्दी है है है जिस कर विकास		The case is the state of the state of the
Set	30	Capital stock or trust principal, or current funds					30	
As	31	Paid-in or capital surplus, or land, building, or eq					31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc				921 704	32	1,033,198.
-	33	Total net assets or fund balances				931,704.	33	
	34	Total liabilities and net assets/fund balances				1,511,343.	34	1,604,320.

	m 990 (2016) Air & Waste Management Association	25-6	048614	Page 12
Pa	art XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	<u> , ,</u>	🗀
.1	Total revenue (must equal Part Vill, column (A), line 12)	1	2,691	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,639	
3	Revenue less expenses. Subtract line 2 from line 1	3		,242.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		,704.
5	Net unrealized gains (losses) on investments	5	49	,252.
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	}		
	column (B))	10	1,033	,198.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			<u> X</u>
		•	\	es No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule C	١.		-4
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		10 Sept. 1
	separate basis, consolidated basis, or both:		- 長溪科	
	Separate basis Consolidated basis Both consolidated and separate basis			溪.
ь	Were the organization's financial statements audited by an independent accountant?			X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	\$ 1.50	S (2) 4 1 1 5
	consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			基件的
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit.		
	review, or compilation of its financial statements and selection of an independent accountant?		1	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched		***	15 J
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing			
_	Act and OMB Circular A-133?	,	3a	x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ad audit	··· 	
_	or guidite explain why in Schoolule O and describe any steep taken to undergo und sudite		35	- 1

Form 990 (2016)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ 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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

_		Alr	& waste Ma	nagement Ass	ociat:	lon		<u> 25-6048614 </u>					
P	art I	Reason for Public	Charity Status	(All organizations must co	omplete th	is part) S	ee instructions.						
The	organi	ization is not a private found	dation because it is:	(For lines 1 through 12, c	heck only	one box.)							
1		A church, convention of ch	urches, or association	on of churches described	in sectio	n 170(b)(1)(A)(i).						
2		A school described in sect	tion 170(b)(1)(A)(ii).	(Attach Schedule E (Forn	n 990 or 9	90-EZ).)							
3		A hospital or a cooperative					iiD.						
4		A medical research organiz					•	r the hospital's name,					
		city, and state:	•					•					
5		An organization operated for	or the benefit of a co	liege or university owner	or operat	ed by a no	overnmental unit describ	ed in					
_		section 170(b)(1)(A)(iv). (0		g- or		,							
6		A federal, state, or local go		mental unit described in	sostan 1'	70/hV4VA	V _M						
7	\equiv							nublic described in					
•		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
			•	VANANOS VOSTESIAS DES	A 11 \								
8		A community trust describe						h 11					
9		An agricultural research org											
		or university or a non-land-	grant college of agric	zulture (see instructions).	Enter the	name, city	, and state of the colleg	e or					
		university:											
10		An organization that norma											
		activities related to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	more that	n 33 1/3% of its support	from gross investment					
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	ired by the organization	after June 30, 1975.					
		See section 509(a)(2). (Co	mplete Part III.)										
11	\square	An organization organized	and operated exclus	ively to test for public sa	fety. See	section 5	09(a)(4).						
12		An organization organized	and operated exclus	ively for the benefit of, to	perform t	he functio	ns of, or to carry out the	purposes of one or					
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3).	Check the box in					
		lines 12a through 12d that	describes the type o	of supporting organization	n and com	plete lines	12e, 12f, and 12g.						
а		Type I. A supporting orga	anization operated, s	supervised, or controlled	by its supp	orted org	anization(s), typically by	giving					
		the supported organization	on(s) the power to re	gularly appoint or elect a	majority c	of the direc	ctors or trustees of the s	upporting					
		organization. You must o	complete Part IV, Se	ections A and B.									
b		Type II. A supporting org	anization supervised	d or controlled in connect	tion with it	s supporte	ed organization(s), by ha	ving					
		control or management o						-					
		organization(s). You mus			•		•	•					
c		Type III functionally inte			in connect	ion with, a	and functionally integrate	ed with.					
-		its supported organization	-				• •						
d		Type III non-functionally		•	-			zation(s)					
		that is not functionally int		·									
		•	•	• •	•		•	V6/1003					
		requirement (see instructi		•	-								
•		Check this box if the orga					турет, турет, турет						
	5 -4	functionally integrated, or	• •										
7		the number of supported of						L					
_ 9		de the following information Name of supported	about the supports	d organization(s). (iii) Type of organization	I IIV) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other					
	٧٠,	organization	(11) = 11	(described on lines 1.10	(rv) is the orga in your govern		support (see instructions)	support (see instructions)					
				above (see instructions))	Yes	No							
				Į.			1						
			l										
				<u> </u>				<u> </u>					
						ı	1						
]										
				İ	1		1	1					
					,								
_						19		 					

	nedule A (Form 990 or 990-EZ) 2016 A					25-6048	8614 Page 2
		_		-			
	(Complete only if you checke fails to qualify under the tests				n railed to quality u	inder Part III. II the t	organization
60	ction A. Public Support	s ilsted Delow, piez	150 COMPICIO I ZITI	····			
			T				
	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Gifts, grants, contributions, and	1				ŀ	
	membership fees received. (Do not include any "unusual grants.")		}	ì		Ì	
2	Tax revenues levied for the organ-		 	 	 		
~	ization's benefit and either paid to	į	1	}		ì	
	or expended on its behalf						
3	The value of services or facilities	ļ 	 			 	
3	furnished by a governmental unit to		l				
	the organization without charge		}				
	Total. Add lines 1 through 3		 				
5	The portion of total contributions	September 1	TO THE TIME STATE OF	No. of the Control of	STRUCKSTON.	東京の東京の日本の	
J	by each person (other than a	图整整理		张学····································			
	governmental unit or publicly	政策發統	国际现代的	唯為於 語館		局。在公司	
	supported organization) included	中的影響	FREE STATE	医验验	对国际的公	是是不是	
	on line 1 that exceeds 2% of the		松声感光	以为是			
	amount shown on line 11,				A TOTAL TOTAL		
	column (f)	沙马克·克	30.50		使为一种	罗勒尼德教	
6	Public support. Subtract line 5 from line 4	11人人	1984 788	1, 12 1, 130		\$1 E 7 E 7 Z	
_	ction B. Total Support	<u> </u>			L '	<u> </u>	
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on		ŀ				
	securities loans, rents, royalties		1				
	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		1			1	
	or loss from the sale of capital						
	assets (Explain in Part VI.)		<u> </u>				
11	Total support. Add lines 7 through 10	185 强烈"影	學的學生	第一场后, 在11年	(中国)。(1)(1)(2)(2)	新华的新州	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	,,,,,,,,,
Sec	organization, check this box and stop tion C. Computation of Publi	here c Support Per	centage			<u> </u>	
14	Public support percentage for 2016 (li	ne 6, column (f) di	vided by line 11, c	olumn (f))		14	%
15	Public support percentage from 2015	Schedule A, Part	II, line 14		,,,,,,,,,	15	%
16a	33 1/3% support test - 2016. If the o	organization did no	ot check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				▶□
b	33 1/3% support test - 2015. If the o	organization did no	ot check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check this	box
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t	test. The organizat	tion qualifies as a p	oublicly supported	organization		▶□
þ	10% -facts-and-circumstances test	- 2015. If the org	janization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 10	1% or

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

(Complete only if you checked the box on line 10 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	Section A. Public Support											
Cale	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received. (Do not]			ĺ							
	include any "unusual grants.")	1117777.	1092519.	1105178.	961,715.	976,777.	5253966.					
2	Gross receipts from admissions,											
	merchandise sold or services per-	į.			1							
	formed, or facilities furnished in any activity that is related to the				į							
	organization's tax-exempt purpose											
3	Gross receipts from activities that											
	are not an unrelated trade or bus-											
	iness under section 513	2012995.	1673722.	1907223.	1619504.	1696945.	8910389.					
4	Tax revenues levied for the organ-											
	ization's benefit and either paid to											
	or expended on its behalf											
5	The value of services or facilities											
	furnished by a governmental unit to	ĺ										
	the organization without charge]										
6	Total. Add lines 1 through 5	3130772.	2766241.	3012401.	2581219.	2673722.	14164355.					
	Amounts included on lines 1, 2, and											
	3 received from disqualified persons	}					0.					
t	Amounts included on lines 2 and 3 received											
	from other than disqualified persons that											
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year				736 583.	259,905.	996 488.					
,	Add lines 7a and 7b					259,905.						
	Public support. (Subtract line 7c from line 6.)	4 2 2 3	"好"。15	द्वार्याच्याच्याच्याच्याच्याच्याच्याच्याच्याच		744. N. (3142)						
Sec	etion B. Total Support	<u></u>	35377		- 1000	(1, 10, 11, 10, 11)	131070071					
	ndar year (or fiscal year beginning in)	(a) 2012	(ь) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total					
	Amounts from line 6	3130772.	2766241.	3012401.	2581219.	2673722.						
	Gross income from interest.	32307724	a,oozar.	30124011	<u> </u>	20737221	141043331					
	dividends, payments received on											
	securities loans, rents, royalties and income from similar sources	55,737.	63,588.	87,890.	66,878.	34,440.	308,533.					
	Unrelated business taxable income	33,7376	05,500.	07,050.	00,010	34,440.	300,333.					
	(less section 511 taxes) from businesses											
	acquired after June 30, 1975	144,106.	83 851	108,244.	97,012.	15 979	449,192.					
_	Add lines 10a and 10b	199,843.		196,134.	163,890.	50,419.						
	Net income from unrelated business	133,043.	147,437.	170,134.	103,030.	30,413.	131,123.					
•	activities not included in line 10b,					ļ						
	whether or not the business is		.									
10	regularly carried on											
14	Other income. Do not include gain or loss from the sale of capital	0.0	2200				-204 -					
	assets (Explain in Part VI.)	88.	<389.>	2000525	0545100	0704141	<301.>					
	Total support. (Add lines 9, 10a, 11, and 12.)	3330703.	2913291.	3208535.		2724141.						
14	First five years. If the Form 990 is for	the organization's	first, second, third	l, fourth, or fifth tax	x year as a section	501(c)(3) organiza	tion,					
<u></u>	check this box and stop here						<u> </u>					
	tion C. Computation of Publi											
	Public support percentage for 2016 (li		-	olumn (f))		15	88.25 %					
	Public support percentage from 2015					16	90.16 %					
Sec	tion D. Computation of Inves	tment income	Percentage			·····						
17	7 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f) 17 5.08 %											
18	8 Investment income percentage from 2015 Schedule A, Part III, line 17											
19a	33 1/3% support tests - 2016. If the	organization did n				3 1/3%, and line 17						
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization											
b	33 1/3% support tests - 2015. If the		=									
	line 18 is not more than 33 1/3%, chec	_										
	Private foundation. If the organization			·		_						

Schedule A (Form 990 or 990-EZ) 2016 Air & Waste Management Association

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")?

 "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- 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 by or in connection with its supported organizations.
- c 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.
- 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).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 I of Schedule L (Form 990 or 990-EZ).
- 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.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- 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.)

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n 9	90 or 99	10-EZ)	2016

	edule A (Form 990 or 990-EZ) 2016 Air & Waste Management Association 25-	604861	4 P	age 5
-	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			1
. а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		` '	17 (4)
	below, the governing body of a supported organization?	11a		<u> </u>
	A family member of a person described in (a) above?	11b		
Sec	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.	110		L
	inon or type I copporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	3827	105	140
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	1		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		100	
			, (a)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	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	3000 S		-
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	41.45.67	1202	26.7.73
2	Did the organization operate for the benefit of any supported organization other than the supported	7875	(37.	250
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		- 3	1
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated.			3/4 2
	supervised, or controlled the supporting organization.	2	4 352.0	
Sec	tion 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	3.5%	. (2)	193
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		1.7	
	or management of the supporting organization was vested in the same persons that controlled or managed	13.72.7		3 2 3
	the supported organization(s).	1	, 23	ľ
Sec	tion 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		1.6	1
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		. **	19
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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	1	ام براد ده د انور ایس	100
	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	海海	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1
	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	1200	7.74	
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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	7.1	A D	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	(第四)		2 4
	how the organization was responsive to those supported organizations, and how the organization determined	7.53		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	300		\$00 10 g
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	11/1	4.5	Je. 10
	reasons for the organization's position that its supported organization(s) would have engaged in these	19 19 10	1.	100
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	小歌:	,	1 1 1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	(2) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	165	13.
	trustees of each of the supported organizations? Provide details in Part VI.	3a_		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	7. 24. 11. 4.	7.	· • • •
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
32025	09-21-18 Schedule A (Fo		0-EZ)	2016

	edule A (Form 990 or 990-EZ) 2016 Air & Waste Management rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			5-6048614 Page 6
1				lort V/I \ Can instructions A
•	Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain the content of the conten	_	· · · · · · · · · · · · · · · · · · ·	art vi.) See instructions. A
-Sec	tion A - Adjusted Net Income	ompiete c	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3		3		
4		4		
5	Depreciation and depletion	5		
6	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		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	Sec.	VI AND THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF	The office of the state of the
	instructions for short tax year or assets held for part of year):		於自己的實際物質	
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		····
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other		the state of the state of the state of	Mark of the state of the
_	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		1,000
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	<u> </u>		
•	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	1 7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount	<u> </u>		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	AND THE PERSON AS	
2	Enter 85% of line 1	2	张清明的基础的 。	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	尼克特斯及特特斯斯	
4	Enter greater of line 2 or line 3	4	学院或中国大学院 ,对任	
5	Income tax imposed in prior year	5	The state of the state of the	
6	Distributable Amount, Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional			nization (see
•	instructions).	,) Pr Photosia oigu	

	edule A (Form 990 or 990-EZ) 2016 Air & Waste M rt V Type III Non-Functionally Integrated 509	anagement Association (a)(3) Supporting Organical	ciation 2 unizations (continued)	25-6048614 Page 7
Sec	tion D - Distributions		(CO)TAINGEON	Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes	 	
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity	, , , , , , , , , , , , , , , , , , , ,		
3_	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	s	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	•	(1)	(ii)	(iii)
Caat	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2016	Distributable
3eCI	ion E - Distribution Allocations (see instructions)			Amount for 2016
1	Distributable amount for 2016 from Section C, line 6	不是深刻的人們	學、生產、自然學習所	
2	Underdistributions, if any, for years prior to 2016 (reason-		į	定可能够加强。
	able cause required- explain in Part VI). See instructions			Section 2
3	Excess distributions carryover, if any, to 2016:	[新] 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	发展的一个人	
8	一一一人一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一	And the second	是是學學的學學	经验的证据
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е	From 2015	11、1915年11年11年11年11年1	The second of the second	Property of the second
	Total of lines 3a through e	1 3. 3 1 2 1 3 5 1 1 1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1	· 计图像 · · · · · · · · · · · · · · · · · · ·	
9	Applied to underdistributions of prior years	是一种的一种,一种	- /i. 122b - 127 t t t t 222b t t	A CALL THE RESIDENCE VI
h	Applied to 2016 distributable amount	THE STATE OF THE S	The state of the s	1.73 43 10 14 13 . 72 1 4 4 4 .
<u>i</u>	Carryover from 2011 not applied (see instructions)	州教育。在于安全的	21-12-1-12	With the Print of the Art
	Remainder, Subtract lines 3g, 3h, and 3i from 3f.		"不是一个	THE STATE OF THE S
4	Distributions for 2016 from Section D,			
	line 7: \$		等手贯的影響的大學	THE PROPERTY OF THE PROPERTY O
	Applied to underdistributions of prior years		No. 1. CT 1.74 PRIS C. BERTONE	经等的证据 學事
	Applied to 2016 distributable amount	THE PROPERTY OF THE PARTY OF TH	The state of the s	William Baller of Late
	Remainder. Subtract lines 4a and 4b from 4	The first week or was a side of the same	。	AND THE WAR AND AND THE
5	Remaining underdistributions for years prior to 2016, if	X2022		
	any. Subtract lines 3g and 4a from line 2. For result greater	The second secon		
	than zero, explain in Part VI. See instructions	Antonia de la constanta de la	CONCRETE OF THE PROPERTY OF TH	第一条 4 条 4 条 4 条 4 条 4 条 4 条 4 条 4 条 4 条 4
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions	一种的一种的一种一种的一种	No. of the second secon	Na de la Carmana de Cara de Cara
7	Excess distributions carryover to 2017. Add lines 3j		THE RESERVE OF THE PARTY OF THE	
	and 4c		A CONTROL OF THE REAL PROPERTY.	
8	Breakdown of line 7:			
<u>a</u>	the first of the second second second second second		CONTRACTOR OF THE PARTY OF THE	据性以外的是是是是有的 2000年11月1日
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<u>d</u>	Excess from 2015	という 一本 一本 一本 一本 一本 一本 一本 一本 一本 一本 一本 一本 一本		明 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Schedule A (Form 990 or 990-EZ) 2016

e Excess from 2016

Schedule A	(Form 990 or 990-EZ) 2016 Air	& Waste	Managemen	t Associatio	on 25-6048614	Page 8
Part VI	Part IV. Section A. lines 1, 2, 30, 3	ic, 4b, 4c, 5a, b nd 3: Part IV. S	i, 9a, 9b, 9c, 11a, 11t ection E. lines 1c, 2a	o, and 11c; Part IV, Sec 2b, 3a, and 3b; Part \	t II, line 17a or 17b; Part III, line 12; ttion B, lines 1 and 2; Part IV, Section I, line 1; Part V, Section B, line 1e; Par or any additional information.	C, rt V,
						
						
						
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Schedule A

Excess Payments from Non-Disqualified Persons Included on Part III, Line 7b

2016

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	2012 Amount	2013 Amount	2014 Amount	2015 Amount	2016 Amount
Network Media					252 225
Partners	0.	0.	0.	736,583.	259,905
					
					
					
	- 				
					
		}			
					
			+		
					
					
		-			
	+				
	+				
					
otal to Schedule A, art III, Line 7b				736,583.	259,905

Schedule A

Identification of Excess Support Payments Included on Part III, Line 7b, column (e)

2016

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	Amount Received in 2016	2016 Excess Payments
Network Media Partners	287,146.	259,905.
		····
		
		
		
		·
		···
		·
Fotal Excess Payments to Schedule A, Part III, Line 7b, column (e)		259,905.

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

16 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Schedule D (Form 990) 2016

Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Other	COUNTS Complete if the
		Complete it the
	organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	to the same same same
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year) Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fund	
5	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used o	
0	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confermations and the force of the donor or donor advisor, or for any other purpose confermations.	•
Pa	impermissible private benefit? rt II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV,	line 7
	Purpose(s) of conservation easements held by the organization (check all that apply).	1110 7.
•		important land area
	Preservation of land for public use (e.g., recreation or education) Preservation of a historically Preservation of a certified hi	•
	Preservation of open space	Stone Structure
		
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a condensation has a transfer of the American	
	day of the tax year.	Troid at the pine of the fax ide;
a	Total number of conservation easements	2a
Ь	The state of the s	2b
	Number of conservation easements on a certified historic structure included in (a)	2c
a	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
_	listed in the National Register	[2d]
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organi	zation during the tax
	year >	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	n easements during the year
_	Assert of a second to a second to a second to be a	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation eas	sements during the year
_	Day 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	m
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)	
_	and section 170(h)(4)(B)(li)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statem	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's	anization's accounting for
Da	conservation easements.	imilar Assats
Pai	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other S	mindi Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
Та	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and	· ·
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public exhibition, education, or research in furtherance of public exhibition, education, or research in furtherance of public exhibition, education, or research in furtherance of public exhibition, education, or research in furtherance of public exhibition, education, or research in furtherance of public exhibition, education, or research in furtherance of public exhibition, education, or research in furtherance of public exhibition.	oublic service, provide, in Part XIII,
_	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and ba	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public sen	vice, provide the following amounts
	relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	> \$
	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	> \$
b	Assets included in Form 990, Part X	▶ \$

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

		<u>aste Manage</u>						Page 2
Pa	rt III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Oth	er Simila	r Assets	s (continu	red)
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the t	following that are a	significant :	use of its c	collection it	ems
	(check all that apply):							
· a	Public exhibition	d	Loan or exc	hange programs				
b	===,	е	Other					
C	Preservation for future generations							
4	Provide a description of the organization's co					se in Part	XIII.	
5	During the year, did the organization solicit of	r receive donations o	f art, historical treas	sures, or other simil	ar assets			
	to be sold to raise funds rather than to be ma	aintained as part of th	e organization's co	llection?			Yes	☐ No
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the organizatio	n answered "Yes" o	n Form 990), Part IV,	line 9, qr	
12	Is the organization an agent, trustee, custodi		any for contributions	or other assets no	t included			
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII			•••••••			7 149	
_			owing woio.				Amount	
c	Beginning balance				1c		7 41100171	
d	Additions during the year					<u> </u>		
	Distributions during the year							
ť	Ending balance							
2a	Did the organization include an amount on F	orm 990. Part X. line	21. for escrow or cu	stodial account liab	<u></u>		Yes	No
	If "Yes," explain the arrangement in Part XIII.							F
	t V Endowment Funds. Complete					************	· · · · · · · · · · · · · · · · · · ·	
		(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four v	ears back
1a	Beginning of year balance	180,917.	213,330.	205,568		46,820.	30,100.7	99,441.
ъ	Contributions				† — —			
c	Net investment earnings, gains, and losses	35,080.	<4.035.>	25,389		63,304.		47,379.
4	Grants or scholarships	47,573.	28,378.	17,627		4,556.		
8	Other expenditures for facilities				+			
Ū	and programs				1	İ	i	
•	Administrative expenses				 		 -	
g	End of year balance	168,424.	180,917.	213,330		05,568,	1	46,820.
2	Provide the estimated percentage of the curr					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,
a	Board designated or quasi-endowment	-	%) Held as.				
b	Permanent endowment	%						
	Temporarily restricted endowment	 -						
·	The percentages on lines 2a, 2b, and 2c short							
2-	Are there endowment funds not in the posse		tion that are hold an	d administered for	the emeniz	ation		
Ja		ssion of the organiza	uon mat are neio an	u administered for	ule organiza	211011	L.	/on Mo
	by:							es No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	 ^
	Describe in Part XIII the intended uses of the	·				•••••	3b	
4 Par	t VI- Land, Buildings, and Equipm		vment lungs.					
			Flort IV Imp 44a C	E 000 Dord	/ line 10			
	Complete if the organization answered							
	Description of property	(a) Cost or of	1 , ,	1	Accumulate		(d) Book	value
		basis (investm	Dasis (epreciation			
	Land				• • • • • • • • • • • • • • • • • • • •	10 mg		
	Buildings			2 422	10 4			060
	Leasehold improvements			2,433.	19,4			<u>,962.</u>
	Equipment	1	60	7,262.	541,4		65	<u>,851.</u>
	Other							
ı otal	Add lines 1a through 1e. (Column (d) must e	qual Form 000 Part 1	Column (B) line 11	Oc 1			bd	.813.

Part VII Investments - Other Securities.		Association		-0048614 Page 3
Complete if the organization answered "Yes" or (a) Description of security or category (tholuding name of security)				l-of-year market value
	(b) Book value	(c) Method of V	Aluation; Cost or end	Poryear market value
(1) Financial derivatives (2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)		 		
(D)				
(E)				
(F)				
(G)				······································
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		र्दा है । अनुसर्वे हैं		医心理 合作的原则
Part VIII investments - Program Related.	- F 000 F-+ N/			
Complete if the organization answered "Yes" of a local control of investment	(b) Book value		valuation: Cost or end	-of-year market value
(2)	 :			
(3)				
(4)				
(5)				
<u>(6)</u> (7)				
(8)			· · · · · · · · · · · · · · · · · · ·	
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			· 李智·斯特·斯德·法德·斯特	的印度的电影中心
Part IX, Other Assets.		<u> </u>	,	<u> </u>
Complete if the organization answered "Yes" or	n Form 990, Part IV,	line 11d. See Form 990,	Part X, line 15.	
(a) D	escription			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
	 			
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 1 Part X: Other Liabilities.	15.}			
Complete if the organization answered "Yes" or	n Form 990, Part IV,		990, Part X, line 25.	
1. (a) Description of liability		(b) Book value	38 38 4 4 6	
(1) Federal income taxes				
② Capital lease obligation		33,306.	WE'S SKI	
(3)				
(4)				
(5)			人名罗克索尔	
(6)			1360年到18	
(8)				
(9)				
Total. (Column (b) must equal Form 990. Part X. col. (B) line 2	25.)	33,306.	14分的50%的基础	第一种种的

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2016 Air & Waste Management Asso	ciation	25-6	5048614	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per R	eturn.		
	 Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 				
1	Total revenue, gains, and other support per audited financial statements		11	2,740	<u>,574.</u>
٠2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1:1		
a	Net unrealized gains (losses) on investments	2a 49,252	<u>.</u>		
b	Donated services and use of facilities	2b] :		
c	Recoveries of prior year grants	2c	1 2 2 2		
	Other (Describe in Part XIII.)	1 1][[1]		
8	Add lines 2a through 2d		2e	49	,252.
3	Subtract line 2e from line 1		3	2,691	,322.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		75.7		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1		
	Other (Describe in Part XIII.)	4b	144		
С	Add lines 4a and 4b		4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)		5	2,691	,322.
Par	t XII. Reconciliation of Expenses per Audited Financial Statemer	its With Expenses per	Return		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	•			
1	Total expenses and losses per audited financial statements		1	2,639	.080.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1 3		
	Donated services and use of facilities	2a	734		
	Prior year adjustments	2b			
	and the second s		1 ;%1		
	Other losses Other (Describe in Part XIII.)		海		
			2e		0.
	Add lines 2a through 2d		3	2,639	
	Subtract line 2e from line 1		ES HTT	2,032	, 000.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	t . l			
	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIII.)	4b	32.5		Λ
	Add lines 4a and 4b		4c	2 (20	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) LXIII Supplemental Information.		5	2,639	,000.
	والمنتاب والمستنان والمستنان والمستنان والمستنان والمستنان والمستنان والمستنان والمستنان والمستنان والمستنان والمستنان		4 5 1 1	/ Kan O. David V	
	te the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV		4; Part X	, line 2; Part X	J,
lines 2	d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onal information.			
D	t 17 1ima 4.				
Par	t V, line 4:				
_		1 1 1			
Qua	si-endowment funds are used for graduate so	holarships.			
Par	t X, Line 2:				
The	Association has been classified by the IRS	as a tax-exem	ot no	nprofit	<u>.</u>
org	<u>anization under Section 501(c)(3) of the In</u>	ternal Revenue	Code	· .	
Alt	hough certain activities may be deemed unre	lated to the As	ssoci	ation's	3
exe	mpt purpose and subject to tax, net operati	ng loss carry-i	Forwa	rds are	•
ava	ilable to offset any income. Accordingly, a	provision for	fede	eral	
		<u> </u>			
inc	ome tax is not required for the year ended	December 31 20	116.		
-110	owe can in not reduited for the heat suden	DECEMBEL JI, 4	<u>, 10 j</u>		
_ 44	itionally at Dogombor 21 2016 there	manarimatal A	2 200	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
auu	itionally, at December 31, 2016 there was a	ipproximately \$1	5,4UL	,,000 11	<u> </u>
~	making loog gamma farmanda akidah adili		·	LL	b
ope	rating loss carry-forwards which will expir	e in various ar			
632054	08-29-16		Sched	ule D (Form 9	90) 2016

2028.	
	
	cordance with generally accepted accounting principles relative to
uncer	tainty in income tax purposes, the Association recognizes the inco
tax b	enefit (or liability as applicable) from an uncertain tax position
when	it is more likely than not that, based on technical merits, the
posit	ion will be sustained upon examination, including resolutions of a
relat	ed appeals or litigation process. Management has determined that
there	are no uncertain tax positions that qualify for either recognition
or di	sclosure in the financial statements.
mb	
THE Y	ears of 2013 and forward are open for purposes of potential audit
taxing	
-445711	g authorities.
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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

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

► Attach to Form 990.

2016
Open to Public Inspection:

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Air & Waste Management Association 25-6048614 Part I . | General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes No the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (e) If activity listed in (d) (f) Total (a) Region (b) Number of (d) Activitles conducted in the region employees, agents, and expénditures offices (by type) (such as, fundraising, prois a program service, for and in the region describe specific type gram services, investments, grants to independent investments contractors of service(s) in the region recipients located in the region) in the region in the region 3 a Sub-total ٥. A CONTRACTOR OF THE PROPERTY O b Total from continuation sheets to Part I 0. c Totals (add lines 3a and 3b) ٥.

Schedule F (Form 990) 2016

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

3 Enter total number of other organizations or entitles

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash diabursement	(f) Amount of noncash assistance	(g) Description of noncesh assistance	(h) Method of valuation (book, FMV, appraisa), other
	North America -	T	1				
Scholarships awarded for	Canada and	4	ļ	ļ	, ,		
graduate study in the	Mexico, but not	J	ļ				
environmental field.	the United States	3	9,000.	Check			PHV
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Schedule F	(Form 990) 2016 Air & Waste Management Association	25-6048614	Page 5
Part V	Supplemental Information		
_	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account	ting method; amounts of	
·	investments vs. expenditures per region), Part II, line 1 (accounting method); Part III (accounting method) (estimated number of recipients), as applicable. Also complete this part to provide any additional information of the complete this part to provide any additional information.		
	estimated number of recipients), as applicable. Also complete this part to provide any additional infor	mation, See instructions.	
			·
			
			
			
			
			···········
			
			
			
- -			

SCHEDULE I (Form 990)

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.

Internal Revenue Service		<u></u> Informati	on about Schedule) (Form 990) and its	instructions is si	www.irs.aav/form99	o .	co Inspection
Name of the organizati			ment Associa					Employer Identification numbe 25-6048614
Part I General II	nformation on Grants s		METIC MPROCIE	3C1OH				25-0040014
Does the organizement or teria used to a	tation maintain records award the grants or assi	to substantiate the						
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any								
	hat received more than							· · · · · · · · · · · · · · · · · · ·
	dress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								

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

Schedule I (Form 990) (2016)

632101 11-01-16

Part III Grants and Other Assistance to Domestic Individu	als. Complete if the	organization answe	ared "Yes" on Form 9	90, Part IV, line 22.	25-6048614 Pas
Part III can be duplicated if additional space is neede	d.			···	
(a) Type of grant or assistance	(b) Number of reciplents	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncesh assistance
Scholarships awarded for graduate study in the			1		
environmental field	13	40,500.	0.		
			}		
				,	
•]				
			,		
Part IV. Supplemental Information. Provide the information	required in Part I lin	a 2: Part III. column	(b): and any other ad	Iditional information	
		211 611111111111111	<u> </u>	and the final factor is	
art I, Line 2:					
cholarships are made payable dir	ectly to t	he college	or univer	aitv	
				-	
<u>ducational institutions are advi</u>	sed that t	he funds a	re to be u	sed for	
uition and professional developm	ont in see	andanga sil	th undersone	d + / 1 1	
arcion and professional developm	ent in acc	Ordance wi	.cn univers.	rry/correge	
olicies.					
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Schedule I (Form 990) (2016)

632102 11-01-16

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

Open to Public inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Air & Waste Management Association

Employer identification number 25-6048614

Form 990, Part I, Line 1, Description of Organization Mission:
and critical environmental decision-making of our members to benefit
society.
Form 990, Part III, Line 4d, Other Program Services:
Councils - The organization supports four Councils which include
Education, Sections & Chapters, Technical, and Young Professionals
Advisory. Each Council conducts business to support the vision and
mission of the organization through education, publications,
networking, volunteer development, local membership and programming, and
information exchange.
Scholarship Awards - Scholarships awarded to graduate students.
Recipients can be U.S. or non-U.S. members or non-members. All
scholarships are paid to the university/college.
Expenses \$ 225,513. including grants of \$ 49,500. Revenue \$ 0.
Form 990, Part VI, Section A, line 6:
Our organization consists of over 5,100 members.
Form 990, Part VI, Section A, line 7a:
Directors & officers may be either appointed by the board (up to 3) or
voted into office by the membership.
Form 990, Part VI, Section A, line 7b:
Membership must approve the acceptance of the annual audited financial
statements.

Form 990, Part VI, Section C, Line 19:

Governing Policy, Minutes, and Financial Statements are made available on the Association's website and SharePoint access systems. Public documents are on the main website and proprietary or private in the Volunteer Resource area.

Air & Waste Management Association	25-6048614
Form 990, Part VII Contact Addresses for Officers, Directo	rs, Etc:
Brad Waldron - One Caesars Palace Drive, Las Vegas, NV 891	09
Scott Freeburn - 1837 NW Gibson Way, Albany, OR 97321	
Dallas Baker - PO Box 2261, Jackson, MS 39225	
Michele Gehring - 1150 First Avenue, Suite 501, King of Pr	ussia, PA 19406
Kim Marcus - 1001 SW 5th Ave. Suite 1010, Portland, OR 972	04
Chris Nelson - 3M Center Bldg 224-5W03, Saint Paul, MN 551	44
Leah Blinn - 500 Penn Center Blvd, Pittsburgh, PA 15235	
Jack Broadbent - 375 Beale Street Suite 600, San Francisco	, CA 94105
Carol Clinton - 6724 Perimeter Loop Road #236, Dublin, OH	43017
Chris Frey - 208 Mann Hall Campus Box 7908, Raleigh, NC 27	695
Jayme Graham - 301 39th Street, Building 7, Pittsburgh, PA	15201
Jordan Haywood - 4400 Alafaya Trail MC Q2-286, Orlando, FL	32826
Sara Head - 1000 Business Center Circle, Suite 103, Newbur	y Park, CA 91320
Greg Johnson - 701 Poydras Street, Suite 5000, New Orleans	, LA 70139
Jen Cowman Moore - 3M Center, Bldg 224-05-A-03, Saint Paul	, MN 55144
Tony Ward - 32 Campus Drive, Skaggs Building Room 173, Mis	soula, MT 59812
Jeffry Muffat - 9085 Jasmine Ave S, Cottage Grove, MN 5501	6
Form 990, Part XII, Line 2c:	
The organization has not changed its oversight or selection	n process
related to the audit during the year.	