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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2016

Open to Public Inspection

A	For the	2016 calen	dar year, or					16, and					,	
В	Check if a	applicable	C Name of or	ganization M	ISSISSIPPI WAT	TER & POLLU	TION CONTROL	OPERAT	ORS AS	SSOCIATION	D Employ	er ident	tification nur	nber
	Add	ress change	Doing busi	ness as						·	64-	0592	428	
	Nam	ne change	Number ar	d street (or P C	box if mail is not o	delivered to stree	et address)		Room	/suite	E Telepho	one num	ber	
	Initia	al return	P. O. B	OX 7203	99			~	ľ		(60	1) 8	57-051	2
	Final	return/terminated	City or tow	n, state or provi	nce, country, and Z	IP or foreign po	stal code							
	Ame	ended return	JACKSON				M	1S 39	272	-0399	G Gross re	eceipts	\$ 256,	161.
	Арр	lication pending	F Name and	address of princ	cipal officer					H(a) Is this a	group return	for sub		Yes X No
	_		DOUG BAR	KER P O	BOX 300	FLOR	A	MS 39	041	H(b) Are all s	subordinates	ıncluded	j? [Yes No
· ·	Tax-ex	kempt status	501(c)(3)	X 501(c)		(insert no)	4947(a)(1		527	If 'No,' a	attach a list (see instr	ructions)	_
J	Webs	site: > ww	w.mwpcoa		, , ,	·	11	<u> </u>		H(c) Group e	exemption nu	mber Þ	•	
ĸ	Form o	of organization	X Corporation		Association	Other >		L Year o	f format				egal domicile	MS
Pa	rt I	Summar		1 1		_1_1					<u> </u>			- 110
				zation's mis	sion or most si	gnificant act	ivities	TRAININ	G AND	TESTING MS	WATER AND	D POLLI	JTION CONT	ROL OPERATORS
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Activities & Governance		Check this bo			tion discontinu							ssets		
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Se				_	ers of the gove	-						4		1 <u>3</u>
Ť					in calendar year if necessary) .							5		2
둉					n Part VIII, colu							6 7a		0
_					e from Form 99							7b		0.
		tet uniciated	- Dasiness tax	able incom	e nom romi s	30-1, lille 34			• • •		rior Year	_ '0	C	0.
	8 (Contributions	and grants (Part VIII line	e 1h)							2.5	Curre	ent Year
Revenue			-		ie 2g)						77,6 250,4	_		50,210. 205,943.
Ver		_			(A), lines 3, 4,						230,4	7.		205,943. 8.
æ					ines 5, 6d, 8c,	-								
					1 (must equal		•				328,0	56		256,161.
_					IX, column (A						32070	"	· · ·	230,101.
					IX, column (A),									
					ee benefits (Pa						71,2	65	· · ·	68,868.
ses					column (A), lir			•			1 + 1 2			_00,000.
Expenses			_		• •	•				·				
ŭ			=		olumn (D), line	-				.				
					lines 11a-11d,	•					247,9			<u>222,689.</u>
					t equal Part IX		•				319,2			<u>291,557.</u>
<u>გ</u> 8	19 F	kevenue less	expenses S	ubtract line	18 from line 12	2		• • • • •			8,8			-35,396.
ō 5 € ⊑	20 T	-4-14- (D-4 V 1 4	C \			<u> </u>			Beginnin	g of Curren			of Year
Bala		•	Part X, line 1	•			RECE	IVE	.)· · ·	·	178,7			<u>151,181.</u>
, F			s (Part X, line	•				· · · · · ·	·	يٰ⊢—اڍِ	23,6	25.		31,456.
<u> </u>				s Subtract	line 21 from lir		***********	- 201	: 18	<u> </u>	155,1	21.		119,725.
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		- K	Dow	a /) -	16.0		JGDE	N. U	T -		20			
		Signatu	re of officer	7 130	ue)				'	 Dat	3/2	<u>3/1</u>	! 7	
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			reparer's name		- (Inc. A)			<u> </u>						
Pa	_	''			Preparer's si	-	11/500	Date			<u> </u>	ן "ני	PTIN	
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			CLI					056			Phone no	(601	<u>) 92</u> 2-	3173
May	the IR:	S discuss the	s return with	he prepare	r shown above	? (see instri	ictions)						Y Vac	

Form 990 (2016)

Form	990 (2016) MISS	SISSIPPI WATER	& POLLUTION CONTRO	L OPERATORS ASSOCIA	TION	64-0	592428	Pa	ge 2
Pari	है।।🔠 Stateme।	nt of Program	n Service Accom	plishments					
	Check if Sc	hedule O contail	ns a response or note	to any line in this Part I	<u> </u>	<u></u> <u>.</u>	<u> </u>	<u></u>	_Ш
1	Briefly describe the	organization's r	nission						
	TRAINING AN	D_TESTING	MS WATER AND	POLLUTION CON	TROL OPERATOR	RS			
								- 	- - .
2	Did the organizatio	n undertake any	significant program se	ervices during the year	which were not listed	on the prior			
	Form 990 or 990-E	Z?					Yes	X I	No
	If 'Yes,' describe th	ese new service	s on Schedule O				_		
3	Did the organizatio	n cease conduct	ing, or make significar	nt changes in how it co	nducts, any program	services?	· · Yes	[X] I	No
	If 'Yes,' describe th						 -		
4	Describe the organ	ization's program	n service accomplishm	ents for each of its thr	ee largest program se	ervices, as measu	red by expens	es	
	and revenue, if any	ing 501(c)(4) org	janizations are require am service reported	d to report the amount	or grants and allocati	ons to otners, the	total expense	S,	
	_								
4 a	(Code) (Expenses	\$	including grants of	\$) (Revenue	\$)
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4 b	(Code) (Expenses	\$	including grants of	\$) (Revenue	\$)
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4 c	(Code	_) (Expenses	\$	_ including grants of	\$) (Revenue	\$)
									
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				- 		-			
4 d	Other program ser	vices (Describe				_			
	(Expenses \$		including gran	its of \$) (Reve	nue Ş)	
4 e	Total program serv	rice expenses	>						

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Part IV Checklist of Required Schedules No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Χ 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Х Χ 3 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, 6 Χ 7 Χ 8 Χ Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Χ 9 10 X If the organization's answer to any of the following questions is 'Yes', then complete Schedule D. Parts VI. VIII. IX. or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule 11 a Χ 11 b Χ 11 c Χ 11 d Χ e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. . . . Χ 11 e 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. 11 f Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete 12a Χ b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional Χ 12b 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. . . . Χ 13 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . X 14a 14b Х 15 Х Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. 19

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35a

35b

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Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule I.

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
 c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I..........

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)
a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete

31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I

Form 990 (2016)

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
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			ĺ
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			İ
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	<u>x</u>	
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a 2			
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b If 'Yes,' enter the name of the foreign country			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			ı
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
b if 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	-		
Form 8282?	7с		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		X
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		Х
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
organization have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		X
10 Section 501(c)(7) organizations. Enter	-		
a Initiation fees and capital contributions included on Part VIII, line 12		1	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ľ		
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources	1	ł	
against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b if 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13 a		
Note. See the instructions for additional information the organization must report on Schedule O	T		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		_X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b	_[

Par	t VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below	v, an	d for	
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in	7		
	Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI			. Ix
Sec	tion A. Governing Body and Management			. 14.
000	Alon A. Governing Body and management		Yes	No
1 a	a Enter the number of voting members of the governing body at the end of the tax year 1a			
	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 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	_2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	<u> </u>
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	_		1
	members of the governing body?	7 a	X	
Þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,		v	l
	stockholders, or persons other than the governing body?	7 b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	a The governing body?	8 a	<u>X</u>	ļ
	Each committee with authority to act on behalf of the governing body?	8 b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	ie C	ode)	
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a	X	
t	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b	Х	
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12 a	a Did the organization have a written conflict of interest policy? <i>If 'No,' go to line 13 · · · · · · · · · · · · · · · · · · </i>	12a	Χ	
Ł	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		Х
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in			
	Schedule O how this was done	12 c	X	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15 a		X
t	Other officers or key employees of the organization	15 b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)			
16 a	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		
ŧ	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16 b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►	-		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply	vailab	le	
	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 the public during the tax year	to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	LINDA GOLLADAY 1313 RANGER RD, JACKSON, MS 39154 (60	1) 8	357-0)512

Form 990 (2016)

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(A) Name and Title	(B) Average hours per		s both dir	an o	ot che unles: ifficer itruste	eck mon s perso and a ee)		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) MYRON FOSTER PRESIDENT	8.00			Х				0.	0.	0.
(2) ANTHONY HALL PRESIDENT-ELECT	_4.00			Х				0.	0.	0.
(3) DOUG BARKER TREASURER	4.00			Х				0.	0.	0.
(4) LINDA GOLLADAY ADMINISTRATOR	40.00					Х		60,310.	0.	5,400.
(5)										
_(6)										
(8)										
(9)							:			
(10)			ï							
(11)										
(12)										
(13)				_						
(14)			_							
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Par	VII Section A. Officers, Directors, Tru	<u>stees, k</u>	∢ey	Em	ıplo	oye	es, a	anc	Highest Com	pensated Emp	loyee	S (co	ntınued)
		(B)			•	2)							
	(A) Name and title	Average hours per week	burs box, unless person is both a er officer and a director/truste					an ee)	(D) Reportable compensation from	(E) Reportable compensation from	amo	(F) Estimate ount of compensal	other
		(list any hours for related organiza - tions below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	or a	from the ganization nd relate ganization	ed on ed
		dotted line)	tee	stee			nsated						
<u>(15)</u>													_
(16)		-											
<u>(17)</u>		-											
(18)													
(19)													
(20)												- · _	
(21)													
(22)													
(23)													
(24)												_	
(25)		-										.	
	Sub-total							•	60,310.	0.		5,	400.
	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)	<i>.</i>						>	60,310.	0.			400.
2	Total number of individuals (including but not limited from the organization ►	to those	listed	i ab	ove)	who	rece	eive	d more than \$100,	000 of reportable co	mpens	ation	
	Did the organization list any former officer, director,	or trusto	n ka		nlo		05 bu	-h	-t componented on	anlayon.		Yes	No
	on line 1a? If 'Yes,' complete Schedule J for such in	dıvıdual		٠.	• •	•					. 3		Х
4	For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the such individual	nan \$150,	0002	If '\	es,	' con	nplete	e Sc	hedule J for		. 4	-	
5	Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' co										. 5		X
Sec	ion B. Independent Contractors Complete this table for your five highest compensate	ed indene	nder	t co	ntra	ctors	that	rec	eived more than \$	100.000 of			
	compensation from the organization Report compe	nsation fo	r the	cale	enda	ır ye	ar en	dıng	with or within the	organization's tax ye		(C)	
	Name and business addre	ess 							Description of		Comp		on
			_										
	Total number of independent contractors (including	but not lin	nıted	to ti	hose	e liste	ed ab	ove	l) who received mo	re than		_	
	\$100,000 of compensation from the organization	<u> </u>											

	Check if Schedule O contains a response or note to any line	e in this Part VIII			
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d				
rtions, G er Simila	e Government grants (contributions) 1 e f All other contributions, gifts, grants, and				
ontribu od Oth	g Noncash contributions included in lines 1a-1f \$				
<u>3 E</u>	h Total. Add lines 1a-1f · · · · · · · · · · · · · · · · · · ·	50,210.			
Program Service Revenue	Business Code				
e√e	2a EDUCATIONAL COURSES _ 900099	122,596.	<u>122,596.</u>	0.	0.
eВ	b TRAINING CONTRACTS 900099	49,000.	49,000.	0.	0.
Şi	C TESTING FEES 900099	12,720.	12,720.	0.	0.
<u>8</u>	d LOG BOOKS, MANUALS 900099	8,080.	8,080.	0.	0.
am	e LATE FEES & MISCELLANEOUS 900099	13,547.	13,547.	0.	0.
ğ	f All other program service revenue · · ·				
ፈ	g Total. Add lines 2a-2f · · · · · · · · · · · · · · · · · · ·	205,943.			-
	3 Investment income (including dividends, interest and				
	other similar amounts)	8.	8.	0.	0.
	· · · · · · · · · · · · · · · · · · ·				
	5 Royalties				
	6a Gross rents				
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) · · · · · · · · · · · · · · · · · ·				
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other		:		
	b Less cost or other basis and sales expenses				
	c Gain or (loss)			· · · · · · · · · · · · · · · · · · ·	
	d Net gain or (loss)				
Other Revenue	8 a Gross income from fundraising events (not including. \$ of contributions reported on line 1c)				
&	See Part IV, line 18 a				
ē	b Less direct expenses b				
듄	c Net income or (loss) from fundraising events			<u> </u>	
	9 a Gross income from gaming activities See Part IV, line 19 a				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities · · · · · · . ▶				
	10 a Gross sales of inventory, less returns and allowances		-		
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory ▶				
	Miscellaneous Revenue Business Code				
	11a				
1	D				
	C				
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions ▶	256,161.	205,951.	0.	0.

64-0592428

	Part IX	Statement of	<u>Functional</u>	Expenses
i	ו טונוא	Ocaconione or	· angerona	LAPOITOGO

Sect	ion 501(c)(3) and 501(c)(4) organizations must cor	mplete all columns All o	ther organizations must	complete column (A)						
	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21									
2	Grants and other assistance to domestic individuals See Part IV, line 22 · · · · · · ·									
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16			1						
4	Benefits paid to or for members									
5	Compensation of current officers, directors, trustees, and key employees	51,310.								
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	7,500.								
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)									
9	Other employee benefits	5,400.								
10	Payroll taxes	4,658.								
11	Fees for services (non-employees)	··								
a	Management									
t	Legal	2,945.								
(; Accounting	3,710.								
(j Lobbying									
e	Professional fundraising services See Part IV, line 17 .									
	Investment management fees									
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)									
12	Advertising and promotion									
13	Office expenses	18,791.								
14	Information technology									
15	Royalties			<u> </u>						
16	Occupancy	9,000.								
17	Travel	11,760.								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	90,880.								
20	Interest			 						
21	Payments to affiliates									
22	Depreciation, depletion, and amortization			 						
23	Insurance									
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)									
_	· · · · · · · · · · · · · · · · · · ·		<u> </u>	 						
	SCHOLARSHIPS	2,000.		 						
	TRAINING EXPENSES	43.051.		 						
	DISTRICT_REBATES & REFUNDS _	12,085.		 						
	MANUALS & TESTS	19,828.		 						
	All other expenses	8,639.		 						
	Total functional expenses Add lines 1 through 24e	291,557.		 						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here									
	SOP 98-2 (ASC 958-720)		<u> </u>							

Part X **Balance Sheet** (A) End of year Beginning of year 178,746. 1 151,181 2 2 3 3 4 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 8 9 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 10 b 10 c 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV. line 11 13 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 178,746 16 151,181 17 17 18 18 19 21. 135 19 28,985 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Liabilities Loans and other payables to current and former officers, directors, trustees, 22 22 23 23 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . 2,490 25 2,471 Total liabilities. Add lines 17 through 25........... 23,625 26 31,456 26 Organizations that follow SFAS 117 (ASC 958), check here ► and complete or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets....... 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here > X and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Net Assets Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds 119,725 155,121 33 33 155,121 119,725. 178,746 34

BAA

151,181. Form **990** (2016)

		0592	428		Pa	age 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	· • • •	<u>.</u> .			. П
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2!	56.1	161.
2	Total expenses (must equal Part IX, column (A), line 25)	2				557.
3	Revenue less expenses Subtract line 2 from line 1	3				396.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				121.
5	Net unrealized gains (losses) on investments	5				<u> </u>
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	_		'	
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	19,7	<u> 725.</u>
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. X
		•			Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual X Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			İ		
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		[2 a	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a		ſ	Ī		
	separate basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis		-			ا ا
	Were the organization's financial statements audited by an independent accountant?					v
•	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate		· · · · -	2 b		X
	basis, consolidated basis, or both			- 1		
	Separate basis Consolidated basis Both consolidated and separate basis		İ			
(c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audireview, or compilation of its financial statements and selection of an independent accountant?	it,		2 c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			3 a		X
t	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a					-
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b	i	
BAA			F	orm 9	990 (2	2016)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2016

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

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

_	Section 501(c)(4), (5), or (6) org	janizations Complete Part III		Employee dont-5	
	•		7.000GT7.01	Employer identific	
		POLLUTION CONTROL OPERATORS OF TRANSPORTED TO THE PROPERTY OF		64-059242 Section 527 organi	
	Provide a description of the o	rganization's direct and indirect political camil of 'political campaign activities')			24(1011.
2	Political campaign activity exp	penditures (see instructions)			5
		ampaign activities (see instructions)			
Pa	rt I-B Complete if the o	rganization is exempt under sect	ion 501(c)(3).	<u> </u>	
1	Enter the amount of any excis	se tax incurred by the organization under sec	tion 4955		3
2		se tax incurred by organization managers und			
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for this	s year?		· · · Yes No
	a Was a correction made? b If 'Yes,' describe in Part IV				· · · · Yes No
Par	rt I-C Complete if the o	organization is exempt under secti	ion 501(c) . excen	t section 501(c)(3)	
1	Enter the amount directly exp	ended by the filing organization for section 5	27 exempt function act	ivities · · · · · · Þ S	<u> </u>
2	Enter the amount of the filing	organization's funds contributed to other org	anizations for section 5	i27 exemnt	
3	Total exempt function expend	litures Add lines 1 and 2 Enter here and on	Form 1120-POI	,	
4	Did the filing organization file	Form 1120-POL for this year?			· · · Yes No
5	organization made payments amount of political contribution	and employer identification number (EIN) of a For each organization listed, enter the amouns received that were promptly and directly daction committee (PAC). If additional space	unt paid from the filing i lelivered to a separate	organization's funds. Also	anter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)					
(4)			-		
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2016

Part II-A Complete if					
section 501		on is exempt under sec	etion 501(c)(3) and		ection under
		ngs to an affiliated group (and I share of excess lobbying exp		liated group member's nan	ne,
	•	ked box A and 'limited control	·		
(The term	Limits on Lobby 'expenditures' me	ying Expenditures ans amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence pub	lic opinion (grass roots lobbyii	ng)		
b Total lobbying expenditu	res to influence a le	gislative body (direct lobbying) · · · · · · · · · · · · · ·		
c Total lobbying expenditu	res (add lines 1a an	id 1b)	• • • • • • • • • •		
d Other exempt purpose e	xpenditures				
e Total exempt purpose ex	penditures (add line	es 1c and 1d). · · · · · · ·			
		ount from the following table in			
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable	amount is.		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over	\$17,000,000	\$225,000 plus 5% of the excess of	ver \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	mount (enter 25% o	of line 1f)			
h Subtract line 1g from line	a 1a If zero or less,	enter -0			
i Subtract line 1f from line	1c If zero or less, e	enter -0			
		er line 1h or line 1i, did the or			· · Yes No
(Som		4-Year Averaging Period U at made a section 501(h) ele elow. See the separate instr	ection do not have to		
	Lob	bying Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e)) · · · ·					
c Total lobbying expenditures · · · · ·					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e)) · · · ·					
f Grassroots lobbying expenditures					
BAA				Schedule C (Forn	n 990 or 990-EZ) 2016

Part	II-B	Complete if the	organization	is exempt under	section 501(c)(3) and has	NOT filed Form	5768
		(election under	section 501(h	1)).				

(closure and coolers of the coolers		T -	(b)		
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity			Amou		
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		7			
c Media advertisements?		T			
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	1				
i Other activities?	1				
j Total Add lines 1c through 1i					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1				
b If 'Yes,' enter the amount of any tax incurred under section 4912		7			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	-				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).), or				
36061011 001(0)(0).				'es l	No
1 Were substantially all (90% or more) dues received nondeductible by members?				x .	-
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				$\frac{x}{x}$	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?					X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(_	
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Par answered 'Yes.'	ill-A	, line	3, is	(0)	
1 Dues, assessments and similar amounts from members	. 1				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year	. 2 a				
b Carryover from last year	. 2 t				
¢ Total	. 20	;			
3. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	. 3				

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes' 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.

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

	MISSISSIPPI WATER & POLLUTION CONTROL OPERAT	ORS ASSOCIATI	ON	64-0592428
Par	Organizations Maintaining Donor Advised Funds or Ot Complete if the organization answered 'Yes' on Form 990,	ther Similar Fund Part IV, line 6.	is or A	
	(a) Donor advised	d funds	(b	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the as are the organization's property, subject to the organization's exclusive legal co	sets held in donor adv	rised fund	ds No
6	Did the organization inform all grantees, donors, and donor advisors in writing for charitable purposes and not for the benefit of the donor or donor advisor, o impermissible private benefit?	r for any other purpose	e conferri	ng
Par	Conservation Easements. Complete if the organization answered 'Yes' on Form 990,	Part IV, line 7		
1	Purpose(s) of conservation easements held by the organization (check all that	apply)		
	Preservation of land for public use (e.g., recreation or education)	Preservation of a	a historica	ally important land area
	Protection of natural habitat	Preservation of a	a certified	historic structure
	Preservation of open space	_		
2	$\overline{\text{Complete}}$ lines 2a through 2d if the organization held a qualified conservation last day of the tax year	contribution in the for	n of a co	nservation easement on the
				Held at the End of the Tax Year
	Total number of conservation easements			
t	Total acreage restricted by conservation easements		2 b	
C	Number of conservation easements on a certified historic structure included in	(a)	2 c	
c	Number of conservation easements included in (c) acquired after 8/17/06, and structure listed in the National Register	not on a historic	2 d	
3	Number of conservation easements modified, transferred, released, extinguish tax year ▶	ned, or terminated by t	he organ	ization during the
4	Number of states where property subject to conservation easement is located	>		
5	Does the organization have a written policy regarding the periodic monitoring, and enforcement of the conservation easements it holds?			
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violati			
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, ►S	and enforcing conserv	ation eas	sements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requand section $170(h)(4)(B)(ii)^2 \dots \dots \dots \dots \dots \dots$			3)(ı) · · · · · Yes No
9	In Part XIII, describe how the organization reports conservation easements in include, if applicable, the text of the footnote to the organization's financial state conservation easements	its revenue and expentements that describes	se staten s the orga	nent, and balance sheet, and inization's accounting for
Par	Organizations Maintaining Collections of Art, Historica Complete if the organization answered 'Yes' on Form 990,	al Treasures, or (Part IV, line 8	Other S	imilar Assets.
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to reart, historical treasures, or other similar assets held for public exhibition, education Part XIII, the text of the footnote to its financial statements that describes the	ation, or research in fu		
t	olf the organization elected, as permitted under SFAS 116 (ASC 958), to report historical treasures, or other similar assets held for public exhibition, education following amounts relating to these items.	n, or research in furthe	rance of	public service, provide the
	(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 s amounts required to be reported under SFAS 116 (ASC 958) relating to these	items	-	-
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			
BAA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA3301 0	3/15/16	Schedule D (Form 990) 2016

•						
Schedule D (Form 990) 2016 MISSISS Part III Organizations Maintai			PERATORS ASSOCIATION	64-059		Page
3 Using the organization's acquisition items (check all that apply)						
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e Other	- · · ·			
c Preservation for future generati	ions	о <u>П</u> ошог				
Provide a description of the organiz Part XIII		s and explain how the	ey further the organization	n's exempt purpose in		
5 During the year, did the organizatio to be sold to raise funds rather than	n solicit or receiv	e donations of art, his d as part of the organ	storical treasures, or other	er sımılar assets	Yes	No
Part IV Escrow and Custodial line 9, or reported an ar	Arrangemer mount on Forr	nts. Complete if t in 990, Part X, line	he organization ans e 21.	wered 'Yes' on Forr	n 990, Pa	rt IV,
1 a Is the organization an agent, trusted on Form 990, Part X?	e, custodian or o	ther intermediary for o	contributions or other ass	sets not included	Yes	No
b If 'Yes,' explain the arrangement in	Part XIII and cor	nplete the following to	able			
					Amount	
c Beginning balance			<i></i>	1c		
d Additions during the year						
e Distributions during the year						
f Ending balance						
2 a Did the organization include an am						∐ No
b If 'Yes,' explain the arrangement in	Part XIII Check	here if the explanatio	n has been provided on	Part XIII		. 📙
<u> </u>						
Part V Endowment Funds. C						
	(a) Current year	r (b) Prior yea	r (c) Two years bacl	k (d) Three years back	(e) Four	years back
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	of the current yea	r end balance (line 1	g, column (a)) held as	<u> </u>		
a Board designated or quasi-endown	nent ►	⁹⁶				
b Permanent endowment ▶	ુ જ					
c Temporarily restricted endowment	-	⁹⁶				
The percentages on lines 2a, 2b, a	nd 2c should equ	ıal 100%				
3 a Are there endowment funds not in a organization by	the possession o	f the organization tha	t are held and administer	red for the	Y (es No
(i) unrelated organizations					. 3a(i)	$\neg \uparrow \neg \neg$
(ii) related organizations					. 3a(ii)	
b If 'Yes' on line 3a(ii), are the related						 -
4 Describe in Part XIII the intended u	=				<u> </u>	
Part VI Land, Buildings, and	_ 					
Complete if the organiz		ed 'Yes' on Form	990, Part IV, line 11	a. See Form 990, P	art X, line	± 10.
Description of property		Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Boo	ok value
1 a Land		. <u></u>				

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)_	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings · · · · · · · · · · · · · · · · · · ·				
c Leasehold improvements				
d Equipment				
e Other				

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Schedule D (Form 990) 2016

<u>64-</u> 0592428	Pá
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	nvestments - Other Securities.	Vac' as Farm 000. F	Part IV line 11h Coo Form 000	Dowl V. June 40
	complete If the organization answered on of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-	
	derivatives · · · · · · · · · · · · · · · · · · ·	1	(C) Method of Valuation Cost of end-	or-year marker value
• •	eld equity interests			
(A)				
<u>(B)</u>				
(C)				
(D)				
(E) (F)				
(G)				
(H)				
(l)				
	n) must equal Form 990, Part X, column (B) line 12)			<u></u>
Part VIII	nvestments - Program Related. Complete if the organization answered	Yes' on Form 990. F	Part IV. line 11c. See Form 990.	Part X. line 13
	a) Description of investment	(b) Book value	(c) Method of valuation Cost or end	
(2)				
(3)		 		
<u>(4)</u> (5)				
(6)				
(7)				
(8)				
(9)				
(10)	15 - 200 P-4V - h (D) H 121	 		
Part IX C	b) must equal Form 990, Part X, column (B) line 13) ▶ Other Assets.			
	Complete if the organization answered		Part IV, line 11d See Form 990,	
(1)	(a) Do	escription		(b) Book value
(2)				
(3)				,
(4)				
<u>(5)</u> (6)		··········	·	
(7)				
(8)				
(9)				
(10)	nn (b) must equal Form 990, Part X, column (B)	line 15.)		
	Other Liabilities.			
C	complete if the organization answered 'Yes' on		le or 11f. See Form 990, Part X, line 25	
(4) Fadaral	(a) Description of liability	(b) Book value		
	Income taxes LL TAXES PAYABLE	2,47	1	
(3)			<u> </u>	
(4)				1
(5)				,
(6)				ï
(8)				
(9)				1
(10)				i
(11)	Maria (5.00 002 5.1%) (7.1 05.1		3	;
	b) must equal Form 990, Part X, column (B) line 25). Certain tax positions In Part XIII, provide the text of the foo			hility for uncertain
	er FIN 48 (ASC 740) Check here if the text of the footnote			
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Schedule D (Form 990) 2016 MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION 64	-0592428 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a	
1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	1 1
c Recoveries of prior year grants	1
d Other (Describe in Part XIII)	·}
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b 4 a	
b Other (Describe in Part XIII)	1 1
c Add lines 4a and 4b	4 c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	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 Amounts included on line 1 but not on Form 990, Part IX, line 25	
a Donated services and use of facilities	
b Prior year adjustments	1 1
c Other losses]
d Other (Describe in Part XIII)	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	. .
b Other (Describe in Part XIII)	.
c Add lines 4a and 4b	4 c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5
Part XIII Supplemental Information.	
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V	

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

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is

► Attach to Form 990 or 990-EZ.

AUDIT COMMITTEE REVIEWS ALL COMPILED FINANCIAL STATEMENTS EACH YEAR.

OMB No 1545-0047 2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Pt VI, Line 12c

Pt XII, Line 2c

at www.irs.gov/form990. Name of the organization Employer identification number MISSISSIPPI WATER & POLLUTION CONTROL OPERATORS ASSOCIATION 64-0592428 EXECUTIVE COMMITTEE REVIEWS THE FORM 990; AUDIT COMMITTEE REVIEWS Pt VI, Line 11b REVIEWS ALL FINANCIAL RECORDS EACH YEAR. BY-LAWS REQUIRE EACH DISTRICT ASSOC. CONSTITUTION & BY-LAWS TO BE Pt VI, Line 10b COMPATIBLE WITH THE STATE ASSOC. CONSTITUTION & BY-LAWS. Pt VI, Line 19 DOCUMENTS MADE AVAILABLE UPON REQUEST Pt XII, Line 1 MODIFIED CASH METHOD USED FOR ACCOUNTING (METHOD HAS NOT CHANGED). Pt VI, Line 6 EACH OPERATOR IS A MEMBER OF THE ASSOCIATION. THE OPERATOR MEMBERS ELECT REPRESENTATIVES ON THE GOVERNING BOARD FROM Pt VI, Line 7a EACH DISTRICT. Pt VI, Line 7b DECISIONS OF THE GOVERNING BOARD ARE APPROVED AT THE ANNUAL MEETING. PRIOR TO ELECTION OF A MEMBER OF THE BOARD OF GOVERNORS, ANY POTENTIAL

FOR CONFLICT OF INTEREST IS INVESTIGATED.