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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

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

2016

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

For Paperwork Reduction Act Notice, see the separate instructions.

A For the 2016 calendar year, or tax year beginning January 1 2016, and ending December 31 , 20 B Check if applicable C Name of organization D Employer identification number Address change 72-1291068 Louisiana Section A&WMA Room/surte Name change Number and street (or P O box, if mail is not delivered to street address) E Telephone number Initial return 13518 Buckley Ave. (225) 252-1544 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Application pending Baton Rouge, LA 70816 ✓ Cash Other (specify) H Check ► ✓ if the organization is not G Accounting Method. ☐ Accrual Website: ▶ required to attach Schedule B http://la-awma.org J Tax-exempt status (check only one) — ✓ 501(c)(3) ☐ 501(c) ((Form 990, 990-EZ, or 990-PF) ☐527) ◀ (insert no.) ☐ 4947(a)(1) or K Form of organization Corporation ☐ Trust √ Association Other L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received. 5,175 2 Program service revenue including government fees and contracts 2 118,011 3 3 1,128 Investment income 142 5a Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000). . . 6b Less: direct expenses from gaming and fundraising events . . . 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d Gross sales of inventory, less returns and allowances . . . 7a Less: cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7с R Other revenue (describe in Schedule O) 8 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 124,456 10 Grants and similar amounts paid (list in Schedule O) 10 18,257 Benefits paid to or for members 11 11 12 Salaries, other compensation, and employee benefits . 12 13 Professional fees and other payments to independent contractors. 13 14 14 15 Printing, publications, postage, and shipping 15 88 16 16 95,809 Total expenses. Add lines 10 through 16 17 17 114,154 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 10,302 Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 Other changes in net assets or fund balances (explain in Schedule O) . 20 20 125,112 Net assets or fund balances at end of year. Combine lines 18 through 20 21 135,414

(M

Form 990-EZ (2016)

Pa	rt II Balance Sheets (see the instructions f					
	Check if the organization used Schedule	O to respond to a	ny question in this	(A) Beginning of year		(B) End of year
00	C-sh		}		-	·
22 23	Cash, savings, and investments			125,112	23	135,414
24	Other assets (describe in Schedule O)		· · · · · · · · · · · · · · · · · · ·		24	
25	Total assets			125,112		135,414
26	Total liabilities (describe in Schedule O)		}	125,112	26	133,414
27	Net assets or fund balances (line 27 of column	(B) must agree with	n line 21)	125,112		135,414
Par				Part III)		
	Check if the organization used Schedule	•				Expenses
Wha	t is the organization's primary exempt purpose?					quired for section (c)(3) and 501(c)(4)
Desc	cribe the organization's program service accomplis	shments for each o	f its three largest r	rogram services.		anizations, optional for
as n	neasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the			oth	ers.)
28	Annual Conference - Louisiana Section Environment	al Focus. Includes pa	rticipation from stat	e and federal		
	regulators (agencies), industry members, and private	companies. It is a fo	rum to exchange in	ormation		
	Conference Attendees numbered 325		,			ł
		includes foreign gra			28	52,793
29	Educational Programs include providing college scho			classroom		1
	projects, and sponsorship of the Air and Waste Mana	gement Internationa	conference]	1
	72					
00		ıncludes foreign gra			298	18,257
30	Routine business and educational dinner meetings.					}
	7 meetings with a 50 participant average					Ì
	(Grants \$) If this amount	includes forcion are	unta abaak bara	▶ □	30	
31	Other program services (describe in Schedule O)	includes foreign gra	ints, check here .		308	13,769
01		includes foreign gra	nte chack hara	▶ □	 31a	29,335
32	Total program service expenses (add lines 28a t	hrough 31a)	ints, check here .	· · · · •	32	
Par						
	Check if the organization used Schedule					
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and	ee (e	
Kevir	n Calhoun - Chair			 	+	
	Main Street, Baton Rouge, LA 70802	2	ì		a	o
	n Brignac - Past Chair	 	 	` 	7	
	Office Park Blvd Suite A, Baton Rouge, LA 70809	2	[)	اه	O
	n Midgett • Treasurer				1	
	Hwy 1 South, Port Allen, LA 70767	2	}	o l	0	0
	fer Tullier - Vice Chair				1	
	Perkins Road, Baton Rouge LA 70810	2	()	0	O
Karer	n Blakemore - Secretary			Ţ	T	
400 C	Convention St #1100	2		o }	0	0
Greg	Johnson - S&C Council Chair					
701 P	oydras Street, Suite 5000, New Orleans, LA 70139	2)	0	0
Willia	m Palermo - S&C Council Rep		l	\		
	V. Esplanade, Suite, 401, Kenner, LA 70065	2)	0	
	Beall - Director		1			
	orth Boulevard, Baton Rouge, LA 70802	2	 	<u> </u>	0	0
	on Morales- Director		l			
	Highway 18, St. James, LA 70086		<u> </u>	<u> </u>	9	0
	Grego - Director			}		
	Huggins-Treasurer	1		 	0	0
135][Buckley Ave, Baton Rouge, LA 70816			J		_
		11		'	0	
		}	{			

Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37b 38a		✓
b 39 a b 40a	If "Yes," complete Schedule L, Part II and enter the total amount involved	-		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		
41	List the states with which a copy of this return is filed ▶ Louisiana			
42a	Tip 4 b	225-25	806	4
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		7
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country:	42c	L	_ ✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	· ·	ا . -برا	▶ [_]
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
	Did the organization receive any payments for indoor tanning services during the year?	44c		1
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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," Form 990 and Schedule R may need to be completed instead of	45a		1
_	Form 990-EZ (see instructions)	45b		1

	20 (20 (0)						т	age -	
46	Did the organization engage, directly or ii	ndirectiv un political c	ampaign activities on	behalf of or	ın oppositi	ion	Yes	No	
70	to candidates for public office? If "Yes," of	complete Schedule C,	Part I			46			
Part		sonly					or lin	es	
	Check if the organization used Sc	hedule O to respond	to any question in t	his Part VI	<u></u>	· <u>· · ·</u>			
47	Did the organization engage in lobbying		section 501(h) electio	n in effect o	during the t	tax	Yes	No	
	year? If "Yes," complete Schedule C, Par					47	 	Į ✓	
48	Is the organization a school as described i		-				├	1	
49a b	Did the organization make any transfers t If "Yes," was the related organization a se					49a 49b	+	 	
50	Complete this table for the organization's employees) who each received more than	five highest compens	sated employees (oth	er than offic	ers, directo	rs, truste	es, an		
	employees) who each received more than	(b) Average	(c) Reportable	(d) Health	benefits,				
	(a) Name and title of each employee	hours per week devoted to position	compensation (Forms W-2/1099-MISC)	contributions benefit plans, comper	and deferred	(e) Estimate other con			
None				Ţ					
				 					
				1					
				1					
									
			ļ						
		 		 					
			ļ						
f 51	Total number of other employees paid ov Complete this table for the organization \$100,000 of compensation from the organization	's five highest compe	ensated independent	contractors	who each	received	more	than	
	(a) Name and business address of each independ	dent contractor	(b) Type of service (c) Co			Compensati	ompensation		
	Table and the second se		1						
52	Total number of other independent contra Did the organization complete Schedi	•	· · · · · · · · · · · · · · · · · · ·	puzations ~		<u> </u>			
32	completed Schedule A	ile A? Note: All Se				a .▶☑ Yes		No	
	enalties of perjury, I declare that I have examined this rect, and complete peclaration of preparer (other tha					owledge and	d belief,	, it is	
	1 Taigs Hus	2110			40	104	15	1	
Sign Here	Signature of officer Paige Huggins-Treasurer	<i>N</i>		Dat	e 				
	Type or print name and title		_			T 5=			
Paid Prep	Print/Type preparer's name	Preparer Dignature	ducin Da	114187	Check Self-employ				
Use	alel				n's ElN ▶				
	Firm's address ▶			Pho	ne no				
May th	ne IRS discuss this return with the prepare	r shown above? See i	nstructions	_ · <u></u> .	<u></u> .	Yes		No	

SCHEDULE A (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.

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Open to Public

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Louisiana Section A&WMA 721291068 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 ✓ An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (i) Name of supported organization (v) Amount of monetary (ii) FIN (iii) Type of organization (iv) is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes Ño (A) (B) (C) (D)

(E) **Total**

Pari							-
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	ion A. Public Support		,			T	
	ndar 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 include any "unusual grants.")				i I		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		}		 	}	<u> </u>
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	L	<u> </u>	<u> </u>	ł	<u> </u>	<u> </u>
	ion B. Total Support	(1) 0040	(1) 0010	(1) 0044	(1) 0045	T (-) 0010	(0 T-1-1
Caler 7	ndar year (or fiscal year beginning in) Amounts from line 4	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the organization, check this box and stop he	ne organization	n's first, secor	nd, third, fourth	n, or fifth tax y	rear as a section	
Secti	ion C. Computation of Public Support	rt Percentag	je				
14 15 16a	Public support percentage for 2016 (line Public support percentage from 2015 Sci 331/3% support test—2016. If the organ box and stop here. The organization qua	nedule A, Part ization did not	II, line 14 .tcheck the bo		 nd line 14 is 3		
b	331/3% support test—2015. If the organithis box and stop here. The organization						
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the organization	eets the "facts facts-and-circ	s-and-circumst	tances" test, c est. The organ	heck this box	and <mark>stop here</mark>	. Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization is Explain in Part VI how the organization is supported organization	ation meets the meets the "fac	ne "facts-and-	circumstances stances" test.	" test, check	this box and	stop here.
18	Private foundation. If the organization di				a, or 17b, chec	k this box and	see ▶ □

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

(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.)

Secti	on A. Public Support						
Calen	dar 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 include any "unusual grants.")	9257	7353	7611	8429	6303	38953
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the	. (· ·				
	organization's tax-exempt purpose	114289	115736	108173	112672	118257	569127
3	Gross receipts from activities that are not an			ļ			
	unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the	l					
	organization's benefit and either paid	l l					
	to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the					ł	
_	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5.	126546	123089	115784	121101	124560	608080
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons			_	_	_	_
		0	0	- O	0		0
р	Amounts included on lines 2 and 3]				1	
	received from other than disqualified persons that exceed the greater of \$5,000	1)		}	
	or 1% of the amount on line 13 for the year			ا م	•	ا م	0
_	Add lines 7a and 7b	0	0	0	0	0	
8	Public support. (Subtract line 7c from					-	
	line 6.)				'		
Secti	on B. Total Support	<u> </u>		<u> </u>		L	
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	123546	123089	115784	121101	124560	608080
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,				'		
	royalties and income from similar sources .	104	71	71	134	142	522
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses			\ \) [
	acquired after June 30, 1975	0	0	0	0	0	0
C	Add lines 10a and 10b	104	71	71	134	142	522
11	Net income from unrelated business					i	
	activities not included in line 10b, whether					}	
	or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or			}		}	
	loss from the sale of capital assets				_	1	
40	(Explain in Part VI.)	<u></u>	0	<u>0</u>	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12.)				44400	404700	22222
14	First five years. If the Form 990 is for the	123650	123160		121235		608602
17	organization, check this box and stop he	-					▶ □
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2016 (line 8			3. column (f))		15	99 %
16	Public support percentage from 2015 Sch	* *	-			16	99 %
	on D. Computation of Investment In						
17	Investment income percentage for 2016 (y line 13, colur	nn (f))	17	1 %
18	Investment income percentage from 2015	5 Schedule A, F	Part III, line 17			18	1 %
19a	331/3% support tests-2016. If the organ	ization did not	check the box	k on line 14, ar	nd line 15 is m		%, and line
	17 is not more than 331,8%, check this box		-			_	
b	331/3% support tests-2015. If the organiz						
	line 18 is not more than 331/3%, check this l	box and stop h	ere. The organ	izatıon qualifıes	as a publicly s	upported organ	ization 🕨 🔲
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, c	heck this box	and see instru	ctions 🕨 🔲

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.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P	art V	<u>.)</u>	
Secti	on A. All Supporting Organizations		,	
4			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	1	1	
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	<u> </u>	<u> </u>	
_	organization was described in section 509(a)(1) or (2).	2	<u> </u>	<u> </u>
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За	<u> </u>	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	50	 	-
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
þ	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		<u> </u>	
	despite being controlled or supervised by or in connection with its supported organizations.	4b	ļ	
С	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)	1	Ì	Ì
	purposes.	4c	1	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		1	
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN		}	l
	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).		<u> </u>	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a	 	
_	designated in the organization's organizing document?	5b		1-
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	 	t^{-}
6	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	1	Ì	}
	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.	- <u>-</u> -	}	
7		6	 	├
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	}		1
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	·	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	\vdash		
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more		[
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		 	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	9a	┼──	├
-	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit		1 -	
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
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	\	<u> </u>	
h	supporting organizations)? If "Yes," answer 10b below. Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to	10a	├	

determine whether the organization had excess business holdings.)

10b

Schedu	e A (FOITH 990 OF 990-EZ) 2016		-	age 😏
Part	Supporting Organizations (continued)			
_			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	[
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	44-		ــــــا
h	A family member of a person described in (a) above?	11a 11b		<u> </u>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	on B. Type I Supporting Organizations	11.0		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,	}		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	}		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			<u>-</u>
2	Did the organization operate for the benefit of any supported organization other than the supported	1		
~	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1		
	supervised, or controlled the supporting organization.	2		[,
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	} [!]	 -
Secti	on D. All Type III Supporting Organizations	<u>''</u>	نـــــا	<u> </u>
	over the members and organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	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		ļ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	}		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		 -
3	By reason of the relationship described in (2), did the organization's supported organizations have a	- -		
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on 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 it	nstru	ctions	s).
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.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ın	struct	ions).
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	ļ		
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	<u></u> -		
I_	·	2a	 	
Ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	}		
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>	10		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations				
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ						
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3.	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					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):						
a Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other factors (explain in detail in Part VI):						
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
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, 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	7					
8 Minimum Asset Amount (add line 7 to line 6)	8		+			
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1.	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3.	4					
5 Income tax imposed in prior year	5		Ţ			
6 Distributable Amount. Subtract line 5 from line 4, unless subject to						
emergency temporary reduction (see instructions).	6		<u> </u>			
7 Check here if the current year is the organization's first as a non-functional	y int	tegrated Type III support	ing organization (see			
instructions)						

Part) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted	
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
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	h the organization is res	ponsive	
	(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			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2016:			
а				
b				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			
	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			<u> </u>
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2017. Add lines 3j and 4c.			
8	Breakdown of line 7.			
а				
b	Excess from 2013			
С	Excess from 2014			
_ d	Excess from 2015			
е	Excess from 2016			

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

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.

OMB No 1545-0047 2016

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

Inspection Employer identification number

Louisiana Section A&WMA	721291068
The primary purpose of the Louisiana Section of Air and Waste Management Association (A&WMA) is	to provide environmental eduction and
awareness to its members. Membership includes environmental professionals in industrial, private, ar	d government sectors. The Association
also strives to provide environmental awareness to the community at large in the form of grants support	orting environmental education activity.
In the calendar year 2015 the Association awarded 3 scholarships to college students majoring in envi	ronmental or engineering studies.
Two schools were selected for grants through Adopt-a-School campaign which provided funds for tea	chers to implement environmental
education programs in their classroom at elementary or middle school. Other expenses included spon	oring numerous LA Section member
attendance at various International Association events (including training, meetings, and conferences)	. College Students support for
conference attendance and student activities.	
Scholarships totaled \$10,500, adopt a school \$1,500 college student support \$5,958	
The organization is 501(c)(3) entity and does not generate income from unrelated trade or business ac	tivities and is not required to submit
IRS Form 990-T.	·
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Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer identification number
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