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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

Department of the Treasury
Internal Revenue Service

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

Open to Public
Inspection

| | |
|---|--|
| A For the 2016 calendar year, or tax year beginning 01-01-2016 , and ending 12-31-2016 | |
| B Check if applicable | C Name of organization NEVADA TELECOMMUNICATIONS ASSOCIATION |
| <input type="checkbox"/> Address change | Number and street (or P O box, if mail is not delivered to street address) PO BOX 34449 |
| <input type="checkbox"/> Name change | Room/suite |
| <input type="checkbox"/> Initial return | City or town, state or province, country, and ZIP or foreign postal code |
| <input type="checkbox"/> Final return/terminated | RENO, NV 895334449 |
| <input type="checkbox"/> Amended return | |
| <input type="checkbox"/> Application pending | |
| D Employer identification number 88-0209315 | |
| E Telephone number (775) 827-0191 | |
| F Group Exemption Number ► | |

G Accounting Method Cash Accrual Other (specify) ► _____**H** Check ► if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**I Website:** ► WWW.NEVTELASSN.ORG**J Tax-exempt status** (check only one) - 501(c)(3) 501(c)(6) (insert no) 4947(a)(1) or 527**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 ► \$ 116,582****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

| | | | |
|------------|--|----|---------|
| Revenue | 1 Contributions, gifts, grants, and similar amounts received | 1 | 3,167 |
| | 2 Program service revenue including government fees and contracts | 2 | 31,996 |
| | 3 Membership dues and assessments | 3 | 80,955 |
| | 4 Investment income | 4 | 464 |
| | 5a Gross amount from sale of assets other than inventory | 5a | |
| | b Less cost or other basis and sales expenses | 5b | |
| | c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) | 5c | |
| | 6 Gaming and fundraising events | | |
| | a Gross income from gaming (attach Schedule G if greater than \$15,000) | 6a | |
| | b 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 | |
| Expenses | c Less direct expenses from gaming and fundraising events | 6c | |
| | d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) | 6d | |
| | 7a Gross sales of inventory, less returns and allowances | 7a | |
| | b Less cost of goods sold | 7b | |
| | c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) | 7c | |
| | 8 Other revenue (describe in Schedule O) | 8 | |
| | 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ► | 9 | 116,582 |
| | 10 Grants and similar amounts paid (list in Schedule O) | 10 | 8,000 |
| | 11 Benefits paid to or for members | 11 | |
| | 12 Salaries, other compensation, and employee benefits | 12 | 64,717 |
| Net Assets | 13 Professional fees and other payments to independent contractors | 13 | 2,100 |
| | 14 Occupancy, rent, utilities, and maintenance | 14 | |
| | 15 Printing, publications, postage, and shipping | 15 | 1,225 |
| | 16 Other expenses (describe in Schedule O) | 16 | 31,837 |
| | 17 Total expenses. Add lines 10 through 16 ► | 17 | 107,879 |
| | 18 Excess or (deficit) for the year (Subtract line 17 from line 9) | 18 | 8,703 |
| | 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | 19 | 111,692 |
| | 20 Other changes in net assets or fund balances (explain in Schedule O) | 20 | -2,570 |
| | 21 Net assets or fund balances at end of year Combine lines 18 through 20 | 21 | 117,825 |

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

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

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)

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)?

b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O

c 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

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

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► **37a**

b Did the organization file **Form 1120-POL** for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

b If "Yes," complete Schedule L, Part II and enter the total amount involved **38b**

39 Section 501(c)(7) organizations Enter

a Initiation fees and capital contributions included on line 9 **39a**

b Gross receipts, included on line 9, for public use of club facilities **39b**

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► _____, section 4912 ► _____, section 4955 ► _____

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

c 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 ► _____

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization ► _____

e 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

41 List the states with which a copy of this return is filed ► _____

42a The organization's books are in care of ► MIKE EIFERT Telephone no ► (775) 827-0191
Located at ► 1045 UNIVERSITY RIDGE DRIVE RENO, NV ZIP + 4 ► 89512

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

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)**

c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country ► _____

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 ► **43**

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

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

c Did the organization receive any payments for indoor tanning services during the year?

d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

45b 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 Form 990-EZ (see instructions)

| | Yes | No |
|------------|-----|----|
| 33 | | No |
| 34 | | No |
| 35a | | No |
| 35b | | |
| 35c | Yes | |
| 36 | | No |
| 37b | | No |
| 38a | | No |
| 40b | | |
| 40e | | No |
| 42b | | No |
| 42c | | No |
| 44a | | No |
| 44b | | No |
| 44c | | No |
| 44d | | |
| 45a | | No |
| 45b | | No |

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

| | | | |
|--------------------------|-------------------------------------|------------|-----------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Yes | No |
| 46 | | | No |

Part VI **Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

| | | | |
|--------------------------|-------------------------------------|------------|-----------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Yes | No |
| 47 | | | |

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

| | | | |
|--------------------------|-------------------------------------|------------|-----------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Yes | No |
| 48 | | | |

49a Did the organization make any transfers to an exempt non-charitable related organization?

| | | | |
|--------------------------|-------------------------------------|------------|-----------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Yes | No |
| 49a | | | |

b If "Yes," was the related organization a section 527 organization?

| | | | |
|--------------------------|-------------------------------------|------------|-----------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Yes | No |
| 49b | | | |

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None".

| (a) Name and title of each employee | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|--|---|--|--|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None".

| (a) Name and business address of each independent contractor | (b) Type of service | (c) Compensation |
|---|----------------------------|-------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

d Total number of other independent contractors each receiving over \$100,000. ►

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A ► Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2017-05-03

Date

MIKE EIFERT EXECUTIVE DIRECTOR

Type or print name and title

| | | | | | |
|-------------------------------|--|----------------------|--------------------|--|-------------------------|
| Paid Preparer Use Only | Print/Type preparer's name ELAINE ALEXANDER CPA | Preparer's signature | Date 2017-05-09 | Check <input checked="" type="checkbox"/> if self-employed | PTIN P00543692 |
| | Firm's name ► ELAINE ALEXANDER CPA | | | | Firm's EIN ► 26-2929724 |
| | Firm's address ► 448 HILL STREET RENO, NV 895011814 | | | | Phone no (775) 324-7449 |
| | | | | | |

May the IRS discuss this return with the preparer shown above? See instructions ► Yes No

Additional Data

Software ID:

Software Version:

EIN: 88-0209315

Name: NEVADA TELECOMMUNICATIONS
ASSOCIATION

Form 990EZ, Part III - Statement of Program Service Accomplishments

| Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title. | Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.) |
|---|---|
| <p>28 PROVIDE REGULATORY AND LEGISLATIVE ADVOCACY ON BEHALF OF THE ASSOCIATION AND ITS MEMBERS, INCLUDING TIMELY DISSEMINATION OF INFORMATION REGARDING PERTINENT GOVERNMENTAL ACTIONS (Grants \$)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p> | <p>28a</p> |

Form 990EZ, Part III - Statement of Program Service Accomplishments

| Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title. | Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.) |
|--|---|
| <p>29 HOST AN ANNUAL CONFERENCE FOR THE EDUCATION OF ASSOCIATION MEMBERS REGARDING EMERGING TECHNOLOGY, CURRENT LEGISLATIVE AND REGULATORY EVENTS AND OTHER MEMBER INTERESTS ATTENDANCE AT THE ANNUAL CONFERENCE IS APPROXIMATELY 100-125 PERSONS (Grants \$)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p> | <p>29a</p> |

Form 990EZ, Part III - Statement of Program Service Accomplishments

| <p>Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.</p> | <p>Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)</p> |
|---|---|
| <p>30 ANNUAL SCHOLARSHIP(S) AWARDED TO HIGH SCHOOL SENIORS IN 2016 EIGHT 1,000 SCHOLARSHIPS WERE AWARDED, FOR A TOTAL OF 8,000 (Grants \$)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p> | <p>30a</p> |

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV.

| (a) Name and title | (b) Average hours per week devoted to position | (c) Reportable compensation (Forms W-2/1099-MISC) | (d) Health benefits, contributions to employee benefit plans, and deferred compensation | (e) Estimated amount of other compensation |
|-------------------------------|---|--|--|---|
| MARK FEEST DIRECTOR | 0 50 | 0 | | |
| JAKE WARNER DIRECTOR | 0 50 | 0 | | |
| STEVE COWGER DIRECTOR | 0 50 | 0 | | |
| MARK MARTELL DIRECTOR | 0 50 | 0 | | |
| LINDA STINAR DIRECTOR | 0 50 | 0 | | |
| ALISON BECK DIRECTOR | 0 50 | 0 | | |
| JOHN W CHRISTIAN III DIRECTOR | 0 50 | 0 | | |
| JOHN LYON DIRECTOR | 0 50 | 0 | | |
| HAROLD OSTER DIRECTOR | 0 50 | 0 | | |
| DAVE COLLIER DIRECTOR | 0 50 | 0 | | |
| BUCK SPEARS ASSOCIATE DI | 0 50 | 0 | | |
| CHARLIE BORN DIRECTOR | 0 50 | 0 | | |
| MIKE EIFERT EXECUTIVE DI | 30 00 | 61,833 | | |

SCHEDULE C
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities****2016****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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

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

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

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

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

Name of the organization

NEVADA TELECOMMUNICATIONS
ASSOCIATION

Employer identification number

88-0209315

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures
- 3 Volunteer hours

► \$ _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

 Yes No

- 4a Was a correction made?

 Yes No

- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- 4 Did the filing organization file **Form 1120-POL** for this year?

 Yes No

- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

| (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- |
|----------|-------------|---------|---|--|
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

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

B Check ► if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

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

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

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

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

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

| Calendar year (or fiscal year beginning in) | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) Total |
|--|----------|----------|----------|----------|-----------|
| 2a 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 | | | | | |

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

a Volunteers?

b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

c Media advertisements?

d Mailings to members, legislators, or the public?

e Publications, or published or broadcast statements?

f Grants to other organizations for lobbying purposes?

g Direct contact with legislators, their staffs, government officials, or a legislative body?

h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

i Other activities?

j Total Add lines 1c through 1i

2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

b If "Yes," enter the amount of any tax incurred under section 4912

c If "Yes," enter the amount of any tax incurred by organization managers under section 4912

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

| | (a) | | (b) |
|----|-----|----|--------|
| | Yes | No | Amount |
| 1 | | | |
| a | | | |
| b | | | |
| c | | | |
| d | | | |
| e | | | |
| f | | | |
| g | | | |
| h | | | |
| i | | | |
| j | | | |
| 2a | | | |
| b | | | |
| c | | | |
| d | | | |

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

1 Were substantially all (90% or more) dues received nondeductible by members?

2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?

3 Did the organization agree to carry over lobbying and political expenditures from the prior year?

| | Yes | No |
|---|-----|----|
| 1 | 1 | No |
| 2 | 2 | No |
| 3 | 3 | No |

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members

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

b Carryover from last year

c Total

3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

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

| | |
|----|--------|
| 1 | 78,385 |
| 2a | 9,708 |
| 2b | |
| 2c | 9,708 |
| 3 | 11,758 |
| 4 | |
| 5 | -2,050 |

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

| | |
|------------------|-------------|
| Return Reference | Explanation |
|------------------|-------------|

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

NEVADA TELECOMMUNICATIONS
ASSOCIATION**Supplemental Information to Form 990 or 990-EZ**

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

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

2016**Open to Public
Inspection****Employer identification number**

88-0209315

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|------------------------------|------------------------|
| FORM 990-EZ, PART I, LINE 10 | SCHOLARSHIPS 8,000 0 0 |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|-------------------------------------|---|
| FORM 990- EZ, PART I, LINE 16 | EXPENSES BANK FEES 367 CONVENTION EXPENSES 23,638 INSURANCE 2,181 TRAVEL/MILEAGE 2,373 TEL EPHONE/DATA 1,691 OFFICE 1,069 MEALS/ENTERTAINMENT 518 TOTAL 31,837 |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|-------------------------------------|--|
| FORM 990- EZ, PART I, LINE 20 | 2015 OVERSTATED MEMBERSHIP DUES -2,570 |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|-------------------------------|---|
| FORM 990-EZ, PART II, LINE 24 | PREPAID EXPENSES AND DEFERRED CHARGES 1,100 1,300 TOTAL 1,100 1,300 |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--------------------------------------|--------------------------------|
| FORM 990- EZ, PART II, LINE 26 | DEFERRED REVENUE 60,861 58,030 |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|-----------------------|---|
| FORM 990-EZ, PART III | THE NEVADA TELECOMMUNICATIONS ASSOCIATION WILL SUPPORT ITS MEMBER ORGANIZATIONS THROUGH REGULATORY, LEGISLATIVE AND PUBLIC RELATIONS ADVOCACY. THE ASSOCIATION WILL ENHANCE THE COMMUNICATIONS BUSINESS ENVIRONMENT, ADVANCE THE BUSINESS INTERESTS AND PROMOTE THE REPUTATION OF ITS MEMBER ORGANIZATIONS. THE ASSOCIATION WILL FOSTER COOPERATION, MUTUAL RESPECT AND UNITY AMONG ITS MEMBERS IN PURSUIT OF THE ASSOCIATION'S GOALS AND OBJECTIVES. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--------------------------------|---|
| FORM 990-EZ, PART III, LINE 29 | HOST AN ANNUAL CONFERENCE FOR THE EDUCATION OF ASSOCIATION MEMBERS REGARDING EMERGING TECHNOLOGY, CURRENT LEGISLATIVE AND REGULATORY EVENTS AND OTHER MEMBER INTERESTS. ATTENDANCE AT THE ANNUAL CONFERENCE IS APPROXIMATELY 100-125 PERSONS. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--------------------------------|--|
| FORM 990-EZ, PART III, LINE 31 | ANNUAL SCHOLARSHIP(S) AWARDED TO HIGH SCHOOL SENIORS IN 2016 EIGHT 1,000 SCHOLARSHIPS WERE AWARDED, FOR A TOTAL OF 8,000 |