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)

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public. ▶Go to www.irs.gov/Form990EZ for instructions and the latest information

Address change Name change Initial return Final return/terminated Amended return Application pending G Accounting Method J Website: WWW.ISOSWO.ORG J Tax-exempt status (check only one) — X 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527 K Form of organization 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 ! _ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Each of the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory Address change A2 - 13			
Address change Name change Initial return Final return/terminated Amended return Application pending G Accounting Method J Website: WWW.ISOSWO.ORG J Tax-exempt status (check only one) — X 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527 K Form of organization 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 ! _ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Each of the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory Address change A2 - 13			
Name change Initial return Number and street (or PO box, if mail is not delivered to street address) Room/suite E Telephone in the final return/reminated Amended return Toy 0 4 20TH AVENUE City or town, state or province, country, and ZIP or foreign postal code Application pending BLAIRSTOWN TA 52209 F Group Exert Number Numb	D Employer identification numb		
Initial return Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telephone in 641-7!			
Final return/terminated Amended return Application pending BLAIRSTOWN IA 52209 H Check Number Num			
Amended return Application pending BLAIRSTOWN IA 52209 F Group Exert Number Number Accounting Method X Cash			
Application pending BLAIRSTOWN IA 52209 Number Numb	51-8370		
G Accounting Method X Cash Accrual Other (specify) ► H Check ► if the Grequired to attach S Website: ► WWW . ISOSWO . ORG J Tax-exempt status (check only one) — X 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527 (Form 990, 990-EZ, K Form of organization X 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 I₂ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for E Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory	mption		
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K Form of organization X 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 Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5a	chedule B		
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 Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Expenses, and Similar amounts received 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5a	or 990-PF)		
(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Part II Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Expenses) and Changes in Net Assets or Fund Balances (see the instructions for Expenses) and Schedule O to respond to any question in this Part II Contributions, gifts, grants, and similar amounts received Program service revenue including government fees and contracts Membership dues and assessments Investment income Gross amount from sale of assets other than inventory Sales Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and similar amounts received II Schedule O to respond to any question in this Part II II Contributions, gifts, grants, and sin this Part II II Contributions, gifts, grants, and similar amou			
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Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5 Gross amount from sale of assets other than inventory 5 Total Contribution in this Part I 1 Contributions, gifts, grants, and similar amounts received 2 Investment income 3 Investment income 5 Total Contributions, gifts, grants, and similar amounts received 3 Investment income 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, grants, and similar amounts received 5 Total Contributions, gifts, g	131,481		
1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5 Gross amount from sale of assets other than inventory 5 1	Part I)		
2 Program service revenue including government fees and contracts 3 Membership dues and assessments 4 Investment income 5 Gross amount from sale of assets other than inventory 5 January 1 January 2 January 2 January 3 January	X		
3 Membership dues and assessments 4 Investment income 5a Gross amount from sale of assets other than inventory 5 5 5 7	7,240		
4 Investment income 5a Gross amount from sale of assets other than inventory 5a	114,108		
5a Gross amount from sale of assets other than inventory 5a	3,065		
· · · · · · · · · · · · · · · · · · ·	4		
b Less cost or other basis and sales expenses 5b 7			
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			
b Gross income from fundraising events (not including of contributions			
\$15,000) 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 7,064			
c Less direct expenses from gaming and fundraising exents 6c 6c			
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract			
line 6c) 6d	7,064		
7a Gross sales of inventory, less cerurns and allowances O 7a 7a 7b			
c Gross profit or (loss) from sales of inventory (Subtract time 76 from line 7a) 7c			
8 Other revenue (describe in Schedule & DEN, UT			
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	131,481		
10 Grants and similar amounts paid (list in Schedule O)	3,000		
11 Benefits paid to or for members			
g 12 Salaries, other compensation, and employee benefits 12			
2 13 Professional fees and other payments to independent contractors	36,645		
12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing publications postage and shipping			
15 Printing, publications, postage, and shipping			
16 Other expenses (describe in Schedule O)	90,140		
17 Total expenses. Add lines 10 through 16	129,785		
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	1,696		
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)	159,740		
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) 20 Other changes in net assets or fund balances (explain in Schedule O) 20			
21 Net assets or fund balances at end of year Combine lines 18 through 20	161,436		

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Part II Balance Sheets (see the instructions for	•				
Check if the organization used Schedule O	to respond to a				
		(A) Beg	inning of year		(B) End of year
22 Cash, savings, and investments		 	159,740	22	161,436
23 Land and buildings			0	23	
24 Other assets (describe in Schedule O)		<u> </u>	150 740	24	161 426
25 Total assets			159,740 0	25 26	161,436
26 Total liabilities (describe in Schedule O) 27 Not seed on fund belonges (line 37 of selumn (R) must describe the seed on the seed of the seed on the seed of th	agroo with line 21)		159,740	27	161,436
27 Net assets or fund balances (line 27 of column (B) must a Part III] Statement of Program Service Acco				_21	101,430
Check if the organization used Schedule O	•	•	(44)		Expenses
What is the organization's primary exempt purpose?	to respond to a	ny question in time i	<u></u>	(Re	quired for section
STATEWIDE ORGANIZATION SUPPORTING SOLID WASTE	INDUSTRY			•	(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments f		e largest program servic	ces,		anizations, optional for
as measured by expenses In a clear and concise manner, desc		• • •		_	ers)
persons benefited, and other relevant information for each prog	ram title				,
28 FALL CONFERENCE OFFERS TOURS, TRADE SHOW,	EDUCATIONAL S	ESSIONS, AND			
NETWORKING. SPRING CONFERENCE IS SIMILAR.					
				1	
(Grants\$) If this amount includes	foreign grants, ch	neck here	▶ □	28a	97,330
29 WEBSITE-PROVIDE ADDITIONAL BENEFITS TO MEM	BERS INCLUDING	G REAL TIME			
DIRECTORY AND LIBRARY CONTAINING POLICIES,	MANUALS, PRO	CEDURES FOR SOLID			
WASTE ORGANIZATIONS ACROSS THE STATE.					
(Grants\$) If this amount includes	foreign grants, ch	neck here	<u> </u>	29a	11,509
30 POLICY WORK-LEGISLATIVE-COMMUNICATE TO MEM	BERS ON PROPOS	SED OR PENDING			
LEGISLATION IMPACTING THE SOLID WASTE INDU	STRY.				
					c 001
(Grants\$) If this amount includes	s foreign grants, ch	neck here	<u> </u>	30a	6,001
31 Other program services (describe in Schedule O)		!- b		24.5	14,945
(Grants\$) If this amount includes		теск пеге		31a 32	129,785
32 Total program service expenses (add lines 28a through 3 Part IV List of Officers, Directors, Trustees, and Key		each one even if not co	mpensated — se		
Check if the organization used Schedule O to re	spond to any que	stion in this Part IV			<u> </u>
(a) Name and title	(b) Average hours per week	(c) Reportable compensation	(d) Health ben contributions to ei	nolovee	(e) Estimated amount of
(a) realise and	devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, deferred comper	and	other compensation
BILL ROWLAND					
PRESIDENT	2.00	0		0	0
KARMIN MCSHANE					
VICE PRESIDENT	2.00	0		0	0
JENNIFER FRAMPTON					
SECRETARY	2.00	0		0	0
MICHAEL CLASSEN					
TREASURER	2.00	0		0	0
BRIAN SEALS		_		_	
PAST PRESIDENT	2.00	0		0	0
MARY WITTRY					
CHAPTER DIRECTOR	2.00	0		0	0
JODY RHONE	2 00	•		^	
MEMBER	2.00	0		0	0
DAN BACEHOWSKI	2 00	o		0	
MEMBER JOHN FOSTER	2.00				0
MEMBER	2.00	o	i	0	0
WADE HAMM	2.00				
MEMBER	2.00	o		0	0
LORI DICKS	1	·			<u> </u>
MEMBER	2.00	0		0	0
	<u> </u>		_		

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SWANA IOWA SOCIETY OF SOLID WASTE 42-1314569

ABCO Page 3

	SWANA IOWA SUCIEII OF SULID WASIE 42-1314369			-3
₽Pa	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	t V	1	
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			x
	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		x
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	•		_=_
000	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		x
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	35b		
С	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	35c		<u>· x</u>
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		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	Tili	-12	141
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were		1111	2 4/2 4
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	abal . r	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	- 11	1	狂光
39	Section 501(c)(7) organizations Enter	7	11 447	
a	Initiation fees and capital contributions included on line 9	-	111	
b	Gross receipts, included on line 9, for public use of club facilities 39b	-	44.	47.17
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	1.11	44.7	121
.	section 4911 ▶, section 4912 ▶, section 4955 ▶	層層	1	441
þ	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year	- Actoria	نعاديسيية.	511
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		x
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed.	75.15	7 1.7	727.57
·	on organization managers or disqualified persons during the year under sections 4912,	墨台	工造	
	4955, and 4958		4	1
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line	1	17.13	2.1
_	40c reimbursed by the organization	12.3	34	317
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed ▶ NONE			
42a	The organization's books are in care of ▶MICHAEL CLASSEN Telephone no ▶ 641	75	1-8	370
	10805 POPPLETON AVENUE			
	Located at ▶ OMAHA . NE ZIP + 4 ▶ 68	144		
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	. 447.55	X
	If "Yes," enter the name of the foreign country	1:4	17	
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	7-1	14.	闦
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		X
·	If "Yes," enter the name of the foreign country	720	L	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			$\blacktriangleright \Box$
	and enter the amount of tax-exempt interest received or accrued during the tax year			ـــــا
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	14:1	1141	iii
	completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	莊田	TH	EFF
	completed instead of Form 990-EZ	44b		_X_
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	-14-14	كعث	51.4
	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			E
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		44	لنينا
	Form 990-EZ (see instructions)	45b	<u> </u>	<u> X</u>

Form 990	-EZ (2017) SWA	NA	IOW	A SOCI	ETY	OF SOLID	WAS	TE 42-1	314569)		Р	age 4
	_	anization en	gage,	directly	or indirecti	y, ın poli	tical campaign acule C, Part I					46	Yes	No X
Part \	Al	ection 50 I section 5 I and 51	01(c) 01(c)	(3) org (3) orga	anizations	ns onl must a	y inswer question	s 47–4	9b and 52, and	d complete	the tables	for lines		
			orga	nızatıon	used Sc	hedule	O to respond to	any qu	iestion in this F	Part VI				
		anization en s," complete				s or hav	e a section 501(h) electio	n in effect during	the tax		47	Yes	No
•		•		•		tion 170(b)(1)(A)(II)? If "Yo	es," com	plete Schedule I	E		48		X
	•						on-charitable rela					49a		X
		s the related	_			_						49b		
	•			-		_	mpensated empl	-						
em	ipioyees)	wno each i	eceive	ea more	than \$100	,000 01 0	ompensation from		(c) Reportable		Ith benefits,			
	(a)) Name and t	itle of	each emp	loyee		hours per weel	:	compensation is W-2/1099-MISC	contribution benefit	ns to employee plans, and compensation	(e) Estimate other con		
NONE	2													
						·								
51 Co	mplete th	er of other e is table for compensa	the or	ganizatio	on's five hi	ghest co	mpensated indep	endent lone "	contractors who	each receiv	 ved more that	n		
		ame and bus							(b) Ty	pe of service		(c) Compe	nsation	1
NONE			•									-		
				-										
				-										
52 Did	the orga		•				eiving over \$100, ction 501(c)(3) or		ons must attach	а		X Yes		 No
Under per	nalties of p	erjury, I decl	are tha	t I have e of prepa	examined the rer (other the	is retum, an officer	including accompai) is based on all inf	nying sch ormation	edules and statem of which preparer	nents, and to has any kno	the best of my wledge			ef, it is
					-									
Sign Here		MICHA	EL		SSEN				TREASUR	Date RER				
		ype or print na		ude	•	Т	reparer's signature			Date		☐ PTIN	ı	
Daid			iaiii6								Checi	K If		_
Paid Prepare		BREWER	DT:	AND 8	& ASS		AMIE BREWER CES, P.C.				12/19 self-e	47-06	23128	
Use On		address >	45		GENCY		Y STE 340					02-397		
May the	IRS disci	uss this retu			-		e? See instructio	าร			Tribue to Z	<u> </u>		No
					<u> </u>						-	Form 99 0		2017)

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

2017

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization ▶ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

SWANA IOWA SOCIETY OF SOLID WASTE

Employer identification number 42–1314569

OPERATIONS CHAPTER, INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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 7 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) R 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 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% 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) 11 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 12 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. 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 Enter the number of supported organizations Provide the following information about the supported organization(s) (IV) Is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported (III) Type of organization listed in your governing support (see other support (see (described on lines 1-10 organization document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D)

(E)

Total

m 990 or 990-EZ) 2017 SWANA IOWA SOCIETY OF SOLID WASTE 42-1314569

Page 2
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	tion A. Public Support			,				
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016 /	(e) 201	7	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
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	,						
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	tri di imai	1.17117/111	144 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	41.74. 777.	Entre C	mu.	
	tion B. Total Support					<u> </u>	•	
	ndar year (or fiscal year beginning in)	(a) 2013	(b)/2014	(c) 2015	(d) 2016	(e) 201	7	(f) Total
7	Amounts from line 4					-		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10			a la	1411 marra	u an an a	Lu:	
12	Gross receipts from related activities, et-						12	
13	First five years. If the Form 990 is for the	ne orgánization's f	irst, second, thırd	, fourth, or fifth tax	k year as a sectioi	n 501(c)(3)		···
	organization, check this box and stop h			<u></u>				<u> </u>
Sec	tion C. Computation of Public							
14	Public support percentage for 2017 (line			lumn (f))			14	
15	Public support percentage from 2016 Sc						15	<u>%</u>
16a	33 1/3% support test—2017. If the orga				4 is 33 1/3% or m	ore, cneck tr	IIS	▶ □
	box and stop here . The organization qu	-			4E io 22 4/29/	ar mara ah	بامد	▶ []
D	33 1/3% support test—2016. If the organization				ine 15 is 33 1/3%	or more, ch	BUK	▶ □
470	this box and stop here. The organizatio 10%-facts-and-circumstances test2			-	2 16a or 16b an	d line 14 ic		
174	10% or more, and if the organization me	-						
	Part VI how the organization meets the '				=	•		
	organization	lacis-and-circums	nances test me	organization qua	inico do a pabiloly	Supported		▶ □
b	10%-facts-and-circumstances test—2	016 If the organiz	ration did not che	ck a box on line 1	3 16a 16b or 17	a and line		
~	15 is 10% or more, and if the organization	_						
	Explain in Part VI how the organization r							
	supported organization							▶ □
18	Private foundation. If the organization	did not check a bo	x on line 13. 16a.	16b, 17a, or 17b	, check this box a	nd see		٠ ـــ
-	Instructions							> [

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.

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning ın)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	5,321	4,801	4,939	5,392	3,065	23,518
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	127,878	129,284	146,819	169,182	128,412	701,575
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	133,199	134,085	151,758	174,574	131,477	725,093
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	:	27,378	6,153			33,531
C	Add lines 7a and 7b		27,378	6,153			33,531
8	Public support. (Subtract line 7c from line 6)		1-11-			1,	691,562
	tion B. Total Support					r	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	133,199	134,085	151,758	174,574	131,477	725,093
10a	payments received on securities loans, rents, royalties, and income from similar sources	153	131	4.	5	4	297
þ	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						444
С	Add lines 10a and 10b	153	131	4	.5	4	297
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)	133 353	124 216	151 762	174,579	121 481	725,390
14	First five years. If the Form 990 is for the	133,352	irst second third			131,481 501(c)(3)	723,330
17	organization, check this box and stop he		iiot, booona, tiiia	, routin, or markax	your do a coolie.		▶ □
Sec	tion C. Computation of Public S		entage				
15	Public support percentage for 2017 (line	8, column (f) divid	ded by line 13, co	lumn (f))		15	95.34%
16	Public support percentage from 2016 Sc					16	94.42%
Sec	tion D. Computation of Investm	<u>nent Income P</u>	Percentage				
17	Investment income percentage for 2017	(line 10c, column	(f) divided by line	13, column (f))		17	%
18	Investment income percentage from 201				_	18	<u>%</u>
19a	33 1/3% support tests—2017. If the org						▶ X
h	17 is not more than 33 1/3%, check this 33 1/3% support tests—2016. If the org		_				
U	line 18 is not more than 33 1/3%, check						▶ 🗌
20	Private foundation. If the organization of	•		•		-	▶ [

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.)

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- 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
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- 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)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 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.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
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	7	. * : - ! - !
 10b		

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
	those supported organizations and explain how these activities directly furthered their exempt purposes,
	how the organization was responsive to those supported organizations, and how the organization determined
	that these activities constituted substantially all of its activities.

- b 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
- 3 Parent of Supported Organizations Answer (a) and (b) below.
- a 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.
- **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.

	Yes	No
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2a		
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		17
2b		
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3a		
3b		
	2b 3a	2a 2b 3a

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (Organ	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust of			\/I\ S oo
instructions. All other Type III non-functionally integrated supporting organizations			
instructions. All other Type in non-functionally integrated supporting organizations	s musi c	John piete Sections A timo	(B) Current Year
Section A - Adjusted Net Income		(A) Prior Year	(optional)
1 Net short-term capital gain	1		(optional)
	1 2		
	3		
3 Other gross income (see instructions)	4		
4 Add lines 1 through 3	5		
5 Depreciation and depletion	+ -	·	· · · · · · · · · · · · · · · · · · ·
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	_ ا		
maintenance of property held for production of income (see instructions)	6 7		
7 Other expenses (see instructions)		<u> </u>	
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		(D) C:
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
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	1: -		
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
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		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	Ť		
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integral		pe III supporting organiza	ation (see
instructions)	7	. ,, 5	•

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) 5 Other distributions (describe in Part VI) See instructions 6 Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI) See instructions 9 Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by line 9 amount 10 (iii) (ii) **Excess Distributions** Underdistributions Distributable Section E - Distribution Allocations (see instructions) Pre-2017 Amount for 2017 Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in Part VI) See instructions. Excess distributions carryover, if any, to 2017 **b** From 2013 c From 2014 d From 2015 e From 2016 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2017 from Section D, line 7 a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2018. Add lines 3_j and 4c Breakdown of line 7 a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016

e Excess from 2017

Schedule A (Form 990 or 990-EZ) 2017 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 C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2017

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

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

- 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.							
Nam	me of organization SWANA IOWA SOCIETY O	F SOLID WASTE			tification number		
	OPERATIONS CHAPTER,	INC.		42-13145			
Pa	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 indire	ct political campaign activit	ies in Part IV (see	e instructions for			
	definition of "political campaign activities")						
2	Political campaign activity expenditures (see instructions)			▶ \$			
	Volunteer hours for political campaign activities (see instruc						
<u>Pa</u>	art I-B Complete if the organization is exem	·	(c)(3).				
1	Enter the amount of any excise tax incurred by the organization	ation under section 4955		▶ \$			
2		-	4955	▶ \$	— —		
3		rm 4720 for this year?			∐ Yes ∐ No		
	a Was a correction made?				Yes No		
	b If "Yes," describe in Part IV	-4 dan aaa4'aa 504	(-)	-Non-E04/5\/2\			
	art I-C Complete if the organization is exem			ection 501(c)(3).			
1	, , , , , , , , , , , , , , , , , , , ,	on for section 527 exempt f	unction	. .			
_	activities			▶ \$			
2	Enter the amount of the filing organization's funds contribut	led to other organizations to	or section	. .			
	527 exempt function activities						
3	•	er nere 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						
		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political		
	(a) Name	(b) Address	(C) ENV	filing organization's	contributions received and		
				funds if none, enter -0-	promptly and directly		
					delivered to a separate political organization		
		;			If none, enter -0-		
(1)					<u>. </u>		
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Schedule C (Form 990 or 990-EZ) 2017 SWANA	IOWA SOC	IETY OF SO	LID WAS	TE	42-131456	9		Page 2
Part II-A Complete if the organiz							ection ur	ider
section 501(h)).		·						
A Check > If the filing organization to	elongs to an a	ffiliated group (and	list in Part I\	/ each	affiliated group	memb	er's name	1
address, EIN, expenses,								
B Check ▶ ☐ if the filing organizatio	n checked bo	x A and "limited c	ontrol" pro	visions	apply.			
Limits on Lobb (The term "expenditures" me	ans amounts	paid or incurred.)		org	(a) Filing janization's totals		(b) Affiliated group totals	
1a Total lobbying expenditures to influence pu	blic opinion (gras	s roots lobbying)						
b Total lobbying expenditures to influence a legislative body (direct lobbying)								
c Total lobbying expenditures (add lines 1a a	nd 1b)							
d Other exempt purpose expenditures								
e Total exempt purpose expenditures (add lir	nes 1c and 1d)							
f Lobbying nontaxable amount Enter the am	f Lobbying nontaxable amount. Enter the amount from the following table in both							
columns		<u> </u>						
If the amount on line 1e, column (a) or (b) is:	The lobbying no	ontaxable amount is:		是	开口亚田			
Not over \$500,000	20% of the amount on line 1e			137.3				马护
Over \$500,000 but not over \$1,000,000		5% of the excess over \$5		171-171	四、证法通知证		語為實際語	4
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10	% of the excess over \$1	,000,000			\$ 1.4	用。持用	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	6 of the excess over \$1,	500,000	171:				
Over \$17,000,000	\$1,000,000			FF 7 + 6	Startani	1.11.77	that the col	-6 6-41 [1
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	4-Year Averagi	ing Period Under s	ection 501	(h)				
(Some organizations that made a	section 501(h) election do not h	ave to com	piete a	II of the five co	lumns	s below.	
See	the separate ii	nstructions for line	es 2a throug	gh 2f.)				
Labb	ing Evnendit	During 4 Vac	Averaging	Porio	<u> </u>			
Lobby	ying Expenditi	ures During 4-Year	Averaging	Period	<u> </u>			
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 201	6	(d) 2017		(e) Tota	al
2a Lobbying nontaxable amount								
b Lobbying ceiling amount	Auto into	医性精神性排 数	おけばは	1 9 1 1 1 1 1 1	想好,就以生	:-# :-#:-		
(150% of line 2a, column (e))	19 15日本	中国共和国共和国	是许证证	(Par	。中国自由于"三	FF.		
c Total lobbying expenditures								
		 			1			

Schedule C (Form 990 or 990-EZ) 2017

d Grassroots nontaxable amount
e Grassroots ceiling amount
(150% of line 2d, column (e))
f Grassroots lobbying expenditures

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (b) (a) For each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed Yes **Amount** description of the lobbying activity. No 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 X a Volunteers? X b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? X c Media advertisements? X d Mailings to members, legislators, or the public? X e Publications, or published or broadcast statements? X f Grants to other organizations for lobbying purposes? X g Direct contact with legislators, their staffs, government officials, or a legislative body? X h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? X 6,001 i Other activities? 6,001 i Total Add lines 1c through 1i X 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? [Part III-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members?

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

[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).

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

- a Current year
- **b** Carryover from last year
- c Tota
- 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)

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

SCHEDULE C, PART II-B, LINE 1

MEMBERS OF ORGANIZATION ROUTINELY INTERACT WITH LOCAL ELECTED OFFICIALS ON PROPOSED LEGISLATION IMPACTING THE SOLID WASTE INDUSTRY.

CONTRACT WITH A REGISTRED LOBBYIST WHO COMMUNICATES WITH LEGISLATORS REGARDING PROPOSED LEGISLATION IMPACTING THE SOLID WASTE INDUSTRY.

2

1

2a

2b

2c

3

4

5

Part IV Supplemental	Information (continued	d)		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Good Bray OF COLLD WAGE

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization SWANA IOWA SOCIETY OF SOLID WASTE OPERATIONS CHAPTER, INC.

Employer identification number

42-1314569

FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES

DESCRIPTION

AMOUNT

EXPENSES

BOARD EXPENSES \$ 11,945

FALL CONFERENCE EXPENSES \$ 78,195

TOTAL \$ 90,140

FORM 990-EZ, PART III, LINE 31 - ALL OTHER ACCOMPLISHMENT

PT III, LINE 31 BOARD EXPENSE \$10,243 MEETING EXPENSE \$1,702 SCHOLARSHIPS

AWARDED \$3,000