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Form **990**

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning **MAR 1, 2018** and ending **FEB 28, 2019**

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization

NATIONAL RURAL WATER ASSOCIATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

2915 S. 13TH STREET

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

DUNCAN, OK 73533

F Name and address of principal officer **SAM WADE**

SAME AS C ABOVE

D Employer identification number

73-1006395

E Telephone number

580-252-0629

G Gross receipts \$

56,536,212.

H(a) Is this a group return

for subordinates?

☐ Yes

☒ No

H(b) Are all subordinates included?

☐ Yes

☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status ☐ 501(c)(3) ☒ 501(c) (**6**) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: **WWW.NRWA.ORG**

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: **1976**

M State of legal domicile: **OK**

Part I Summary

Activities & Governance	Revenue	Expenses	Net Assets or Fund Balances
1 Briefly describe the organization's mission or most significant activities TO STRENGTHEN STATE ASSOCIATIONS.			
2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets			
3 Number of voting members of the governing body (Part VI, line 1a)	3		
4 Number of independent voting members of the governing body (Part VI, line 1b)	4		
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5		
6 Total number of volunteers (estimate if necessary)	6		
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		
7b Net unrelated business taxable income from Form 990-T, line 38	7b		
8 Contributions and grants (Part VIII, line 1h)	8		
9 Program service revenue (Part VIII, line 2g)	9		
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11		
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12		
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13		
14 Benefits paid to or for members (Part IX, column (A), line 4)	14		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15		
16a Professional fundraising fees (Part IX, column (A), line 11e)	16a		
16b Total fundraising expenses (Part IX, column (D), line 25)	16b		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17		
18 Total expenses Add lines 13-17 (must equal Part IX, column (D), line 25)	18		
19 Revenue less expenses Subtract line 18 from line 12	19		
20 Total assets (Part X, line 16)	20		
21 Total liabilities (Part X, line 26)	21		
22 Net assets or fund balances Subtract line 21 from line 20	22		

Part II Signature Block

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 Brian Churchman	Date 1/13/20
Paid Preparer Use Only	Print/Type preparer's name JOSH MULLINS	Preparer's signature J. Mullins
	Firm's name ARLEDGE & ASSOCIATES, P.C.	Firm's EIN 73-1185089
	Firm's address 309 N. BRYANT AVENUE EDMOND, OK 73034	Phone no 405-348-0615

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes

☐ No

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐

- 1 Briefly describe the organization's mission:
TO CULTIVATE OPPORTUNITIES FOR STATE ASSOCIATIONS TO BE SUCCESSFUL FOR THE BENEFITS OF THEIR MEMBERS.
-
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O
- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
- 4a (Code _____) (Expenses \$ 39,127,754. including grants of \$ 34,451,300.) (Revenue \$ 1,376,171.)
NRWA PROVIDES TRAINING AND TECHNICAL ASSISTANCE THROUGH 49 AFFILIATED STATE RURAL WATER ASSOCIATIONS, THAT CURRENTLY HAVE OVER 31,000 UTILITY SYSTEM MEMBERS. LAST YEAR, STATE RURAL WATER ASSOCIATION STAFF DELIVERED OVER 75,000 ON-SITE TECHNICAL ASSISTANCE VISITS AND 150,000 HOURS OF TRAINING TO MORE THAN 37,000 UTILITIES. RURAL WATER TRAINING AND TECHNICAL ASSISTANCE COVERS EVERY ASPECT OF OPERATING, MANAGING AND FINANCING WATER AND WASTEWATER UTILITIES.
-
- 4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
-
- 4c (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
-
- 4d Other program services (Describe in Schedule O)
 (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
- 4e Total program service expenses **39,127,754.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	X	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 37		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X	
4a 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)?	4a		X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N	15		X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		X

Form 990 (2018)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

- 1a** Enter the number of voting members of the governing body at the end of the tax year
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.
- 1b** Enter the number of voting members included in line 1a, above, who are independent
- 2** Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?
- 3** Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?
- 4** Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
- 5** Did the organization become aware during the year of a significant diversion of the organization's assets?
- 6** Did the organization have members or stockholders?
- 7a** Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?
- b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?
- 8** Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
- a** The governing body?
- b** Each committee with authority to act on behalf of the governing body?
- 9** Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

	Yes	No
1a 49		
1b 49		
2		X
3		X
4		X
5		X
6	X	
7a	X	
7b		X
8a	X	
8b	X	
9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

- 10a** Did the organization have local chapters, branches, or affiliates?
- b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?
- 11a** Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
- b** Describe in Schedule O the process, if any, used by the organization to review this Form 990
- 12a** Did the organization have a written conflict of interest policy? If "No," go to line 13
- b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
- c** Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done
- 13** Did the organization have a written whistleblower policy?
- 14** Did the organization have a written document retention and destruction policy?
- 15** Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
- a** The organization's CEO, Executive Director, or top management official
- b** Other officers or key employees of the organization
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)
- 16a** Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
- b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

	Yes	No
10a	X	
10b	X	
11a	X	
12a	X	
12b	X	
12c	X	
13	X	
14	X	
15a	X	
15b		X
16a		X
16b		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **OK**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **THE ORGANIZATION - 580-252-0629**
2915 S. 13TH STREET, DUNCAN, OK 73533

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN CHOATE BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(2) ELLEN YATES BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(3) EARL ICHIMURA BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(4) ED BAILEY BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(5) EARL MCKINNEY BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(6) DAVID BAIRD BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(7) DOUG ANDERTON BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(8) DAVID WALLER BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(9) DAVID PETERSON BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(10) GEORGE CRUM BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(11) LANCE HOYT BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(12) JANA LITTLEWOOD BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(13) GEORGE HANSON BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(14) JEFF DAY BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(15) GLEN WOMACK BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(16) JAMES MACKIE BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(17) CHRIS KENYON BOARD MEMBER	0.00 0.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) WILMER MELTON, III BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(19) JOHN JONES BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(20) BRUCE BOTTOMLEY BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(21) TOM SPEER BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(22) JOHN SASUR BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(23) KEVIN MRAZ BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(24) DANNIE MCMILLIAN BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(25) KENT WATSON BOARD MEMBER	0.00 0.00	X						0.	0.	0.
(26) CAMERON MCKAY BOARD MEMBER	0.00 0.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								2,785,501.	0.	0.
d Total (add lines 1b and 1c)								2,785,501.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **12**

- 3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3	X	
4	X	
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
KEITH HEARD DBA KEY IMPACT STRATEGIES, LLC PO BOX 1216, WEST POINT, MS 39733	LOBBYING	300,000.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2018)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) BILL SHROYER	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(28) TOM GOULETTE	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(29) JOHN O'CONNELL	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(30) MARK KERNS	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(31) MICHELE SCHOMMER	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(32) PAT WILLIAMS	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(33) PAUL FULGHAM	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(34) MACK LEE	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(35) RANDOLPH HALL	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(36) PHILLIP COMBS	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(37) ROBERT MOORE	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(38) TOM DELBRIDGE	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(39) TODD GRINSTEAD	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(40) TOM REESE	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(41) ROBERT MUNRO	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(42) JIM MAGONE	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(43) ROBERT CULVER	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(44) RANDY PLEIMA	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(45) STEVE FLETCHER	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
(46) LINDA EVANS	0.00									
BOARD MEMBER	0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	2,159,361.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	40,452,331.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f			42,611,692.			
Program Service Revenue		Business Code					
	2 a ASSET MANAGEMENT PROGRAM	900099	1,082,991.	1,082,991.			
	b REVOLVING LOAN PROGRAM	900099	212,828.	212,828.			
	c AFFINITY PROGRAMS	900099	51,489.	51,489.			
	d ASDWA	900099	28,863.	28,863.			
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		1,376,171.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		648,334.			648,334.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real (ii) Personal					
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	11,833,640.				
	b Less cost or other basis and sales expenses		9,168,560.				
	c Gain or (loss)		2,665,080.				
	d Net gain or (loss)		2,665,080.			2,665,080.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a ADVERTISING	511120	66,375.		66,375.			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d		66,375.					
12 Total revenue. See instructions			47,367,652.	1,376,171.	66,375.	3,313,414.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	34,411,300.	34,411,300.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	40,000.	40,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,951,296.	1,177,448.	773,848.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,088,052.	656,551.	431,501.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	260,978.	157,479.	103,499.	
9 Other employee benefits	935,050.	564,227.	370,823.	
10 Payroll taxes	232,511.	140,302.	92,209.	
11 Fees for services (non-employees)				
a Management				
b Legal	48,902.	19,951.	28,951.	
c Accounting	35,877.	14,637.	21,240.	
d Lobbying	331,620.	135,295.	196,325.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	60,927.	24,857.	36,070.	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	42,423.	17,308.	25,115.	
13 Office expenses	172,505.	70,379.	102,126.	
14 Information technology				
15 Royalties				
16 Occupancy	308,091.	125,695.	182,396.	
17 Travel	316,295.	236,489.	79,806.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	896,163.	365,618.	530,545.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,542.	3,485.	5,057.	
23 Insurance	44,193.	18,030.	26,163.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a FEES TO STATES	763,540.	740,499.	23,041.	
b SUPPORT & SUPPORT MATER	259,555.	105,894.	153,661.	
c MEMBER SERVICES	57,895.	23,620.	34,275.	
d REPAIRS & MAINTENANCE	43,531.	17,760.	25,771.	
e All other expenses	149,343.	60,930.	88,413.	
25 Total functional expenses. Add lines 1 through 24e	42,458,589.	39,127,754.	3,330,835.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,143,808.	1	506,097.
	2 Savings and temporary cash investments	14,271,016.	2	13,857,484.
	3 Pledges and grants receivable, net	4,369,109.	3	8,154,252.
	4 Accounts receivable, net	366,260.	4	423,692.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L	0.	6	0.
	7 Notes and loans receivable, net	3,922,092.	7	4,171,151.
	8 Inventories for sale or use	30,245.	8	8,608.
	9 Prepaid expenses and deferred charges	89,979.	9	130,854.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 591,274.		
	b Less accumulated depreciation	10b 577,003.	10c 22,813.	14,271.
	11 Investments - publicly traded securities	22,186,755.	11	22,179,064.
	12 Investments - other securities. See Part IV, line 11	0.	12	0.
	13 Investments - program-related. See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
15 Other assets. See Part IV, line 11	0.	15	0.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	46,402,077.	16	49,445,473.	
Liabilities	17 Accounts payable and accrued expenses	902,928.	17	775,331.
	18 Grants payable	4,287,749.	18	6,909,733.
	19 Deferred revenue	5,747,984.	19	4,445,343.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	0.
	26 Total liabilities. Add lines 17 through 25	10,938,661.	26	12,130,407.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	30,363,416.	27	37,315,066.
	28 Temporarily restricted net assets	0.	28	0.
	29 Permanently restricted net assets	5,100,000.	29	0.
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	35,463,416.	33	37,315,066.
	34 Total liabilities and net assets/fund balances	46,402,077.	34	49,445,473.

Form 990 (2018)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	47,367,652.
2	Total expenses (must equal Part IX, column (A), line 25)	2	42,458,589.
3	Revenue less expenses Subtract line 2 from line 1	3	4,909,063.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	35,463,416.
5	Net unrealized gains (losses) on investments	5	-3,057,413.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	37,315,066.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2018)

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

2018

**Open to Public
Inspection**

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 organization

NATIONAL RURAL WATER ASSOCIATION

Employer identification number

73-1006395

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 campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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-

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

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.)		(a) Filing organization's totals	(b) Affiliated group totals
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) 2015	(b) 2016	(c) 2017	(d) 2018	(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					

Schedule C (Form 990 or 990-EZ) 2018

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

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

OMB No 1545-0047

2018

Open to Public
Inspection

Name of the organization

NATIONAL RURAL WATER ASSOCIATION

Employer identification number

73-1006395

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)	☐ Preservation of a historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

Schedule D (Form 990) 2018

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ☐ _____ %
 b Permanent endowment ☐ _____ %
 c Temporarily restricted endowment ☐ _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		10,000.		10,000.
b Buildings		371,064.	371,064.	0.
c Leasehold improvements		45,228.	45,228.	0.
d Equipment		49,343.	49,343.	0.
e Other		115,639.	111,368.	4,271.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				14,271.

Schedule D (Form 990) 2018

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Schedule D (Form 990) 2018

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements		1	44,589,445.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	-3,057,413.	
b	Donated services and use of facilities	2b	279,206.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d	2e	-2,778,207.	
3	Subtract line 2e from line 1	3	47,367,652.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	4c	0.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	47,367,652.	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements		1	42,737,795.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	279,206.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d	2e	279,206.	
3	Subtract line 2e from line 1	3	42,458,589.	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b	4c	0.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	42,458,589.	

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ASSOCIATION IS A NON-PROFIT ORGANIZATION THAT IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE. CERTAIN ACTIVITIES OF THE ASSOCIATION ARE SUBJECT TO INCOME TAXES BECAUSE THEY ARE UNRELATED TO THE ASSOCIATION'S EXEMPT PURPOSE. NO PROVISION FOR INCOME TAXES HAS BEEN PROVIDED SINCE SUCH ACTIVITIES HAVE HISTORICALLY NOT GENERATED SIGNIFICANT TAXABLE INCOME. THE ASSOCIATION EVALUATES AND ACCOUNTS FOR ITS UNCERTAIN TAX POSITIONS IN ACCORDANCE WITH ASC TOPIC 740, "INCOME TAXES," INCLUDING THE ASSOCIATION'S TAX POSITION AS A TAXEXEMPT, NON-PROFIT ENTITY. THROUGH ITS EVALUATION OF THE ASSOCIATION'S UNCERTAIN TAX POSITIONS, MANAGEMENT HAS DETERMINED THAT NO UNCERTAIN TAX POSITIONS EXISTED AS OF FEBRUARY 28, 2019 AND 2018, WHICH WOULD REQUIRE THE

Part XIII Supplemental Information *(continued)*

ASSOCIATION TO RECORD A LIABILITY FOR THE UNCERTAIN TAX POSITIONS IN ITS
FINANCIAL STATEMENTS. THE ASSOCIATION IS NO LONGER SUBJECT TO INCOME TAX
EXAMINATIONS BY THE U.S. FEDERAL, STATE, OR LOCAL TAXING AUTHORITIES FOR
YEARS BEFORE 2015.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No 1545-0047

2018

Open to Public
Inspection

Name of the organization

NATIONAL RURAL WATER ASSOCIATION

Employer identification number

73-1006395

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II **Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALABAMA RURAL WATER ASSOC. 2576 BELL BLVD MONTGOMERY, AL 36117		501(C)(6)	779,445.	0.			SUB-AWARD
ALASKA RURAL WATER ASSOC. 1075 CHECK STREET, SUITE 106 WASILLA, AK 99654		501(C)(3)	939,968.	0.			SUB-AWARD
RURAL WATER OF ARIZONA 879 N PLAZA DRIVE, SUITE A101 APACHE JUNCTION, AZ 85120		501(C)(6)	572,591.	0.			SUB-AWARD
ARKANSAS RURAL WATER ASSOC. PO BOX 860 LONOKE, AR 72086		501(C)(6)	873,410.	0.			SUB-AWARD
ATLANTIC STATE WATER & WASTEWATER ASSOC. - 11 HIGH STREET, SUITE 204 - SUFFIELD, CT 06078		501(C)(6)	373,104.	0.			SUB-AWARD
CALIFORNIA RURAL WATER ASSOC. 1234 NORTH MARKET BLVD SACRAMENTO, CA 95834		501(C)(6)	938,615.	0.			SUB-AWARD

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

13.
36.

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

Schedule I (Form 990) (2018)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLORADO RURAL WATER ASSOC. 176 WEST PALMER LAKE DRIVE PUEBLO WEST, CO 81007		501(C)(6)	837,327.	0.			SUB-AWARD
DELAWARE RURAL WATER ASSOC. 210 VICKERS DRIVE MILFORD, DE 19963		501(C)(6)	506,676.	0.			SUB-AWARD
EVERGREEN RURAL WATER ASSOCIATION OF WASHINGTON - PO BOX 2300 - SHELTON, WA 98584		501(C)(6)	751,345.	0.			SUB-AWARD
FLORIDA RURAL WATER ASSOC. 2970 WELLINGTON CIRCLE TALLAHASSEE, FL 32309		501(C)(3)	704,214.	0.			SUB-AWARD
GEORGIA RURAL WATER ASSOC. PO BOX 383 BARNESVILLE, GA 30204		501(C)(3)	716,829.	0.			SUB-AWARD
GRANITE STATE RURAL WATER ASSOC. PO BOX 596, 47 MAIN STREET WALPOLE, NH 03608		501(C)(6)	523,460.	0.			SUB-AWARD
HAWAII RURAL WATER ASSOC. 65-118 MAHALAHOA HWY, SUITE 2D KAMUELA, HI 96743		501(C)(3)	865,821.	0.			SUB-AWARD
IDAHO RURAL WATER ASSOC. 6065 WEST CORPORAL LANE BOISE, ID 83704		501(C)(3)	658,700.	0.			SUB-AWARD
ILLINOIS RURAL WATER ASSOC. PO BOX 49 TAYLORVILLE, IL 62568		501(C)(6)	848,628.	0.			SUB-AWARD

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE OF INDIANA RURAL WATER ASSOC. - 555 WEST JEFFERSON STREET - FRANKLIN, IN 46131		501(C)(6)	791,889.	0.			SUB-AWARD
IOWA RURAL WATER ASSOC. 4221 S. 22ND AVENUE, EAST NEWTON, IA 50208		501(C)(6)	682,469.	0.			SUB-AWARD
KANSAS RURAL WATER ASSOC. 706 WATERWAY DRIVE SENECA, KS 66538		501(C)(3)	867,080.	0.			SUB-AWARD
KENTUCKY RURAL WATER ASSOC. 1151 OLD PORTER PIKE BOWLING GREEN, KY 42103		501(C)(6)	756,308.	0.			SUB-AWARD
LOUISIANA RURAL WATER ASSOC. PO BOX 180 KINDER, LA 70648		501(C)(6)	678,540.	0.			SUB-AWARD
MAINE RURAL WATER ASSOC. PO BOX 263 RICHMOND, ME 04357		501(C)(6)	519,759.	0.			SUB-AWARD
MARYLAND RURAL WATER ASSOC. PO BOX 225 WOODBINE, MD 21797		501(C)(6)	512,903.	0.			SUB-AWARD
MASS RURAL WATER ASSOC. 781 MILLERS FALL ROAD NORTHFIELD, MA 01360		501(C)(6)	533,847.	0.			SUB-AWARD
MICHIGAN RURAL WATER ASSOC. 2127 UNIVERSITY PARK DRIVE, SUITE 3 HARRISON, MI 48864		501(C)(3)	841,918.	0.			SUB-AWARD

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNESOTA RURAL WATER ASSOC. 217 12TH AVENUE SE ELBOW LAKE, MN 56531		501(C)(3)	893,674.	0.			SUB-AWARD
MISSISSIPPI RURAL WATER ASSOC. 5400 N MIDWAY ROAD RAYMOND, MS 39154		501(C)(3)	858,522.	0.			SUB-AWARD
MISSOURI RURAL WATER ASSOC. 901 RICHARDSON DRIVE ASHLAND, MO 65010		501(C)(6)	894,468.	0.			SUB-AWARD
MONTANA RURAL WATER ASSOC. 525 CENTRAL AVENUE, M6 GREAT FALLS, MT 59401		501(C)(3)	711,154.	0.			SUB-AWARD
NEBRASKA RURAL WATER ASSOC. 3390 PONDEROSA DRIVE WAHOO, NE 68066		501(C)(6)	559,236.	0.			SUB-AWARD
NEVADA RURAL WATER ASSOC. 363 FAIRVIEW DRIVE CARSON CITY, NV 89701		501(C)(6)	503,755.	0.			SUB-AWARD
NEW JERSEY WATER ASSOC. 505 US HIGHWAY 9 WARETOWN, NJ 08734		501(C)(6)	542,210.	0.			SUB-AWARD
NEW MEXICO RURAL WATER ASSOC. 8336 WASHINGTON PLACE, NE ALBUQUERQUE, NM 87113		501(C)(6)	781,972.	0.			SUB-AWARD
NEW YORK RURAL WATER ASSOC. PO BOX 487 CLAVERRACK, NY 12513		501(C)(6)	877,253.	0.			SUB-AWARD

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTH CAROLINA RURAL WATER ASSOC. PO BOX 540 WELCOME, NC 27374		501(C)(6)	833,961.	0.			SUB-AWARD
NORTH DAKOTA RURAL WATER SYSTEMS ASSOC. - 2718 GATEWAY AVENUE, SUITE 201 - BISMARCK, ND 58503-0585		501(C)(3)	537,797.	0.			SUB-AWARD
OHIO RURAL WATER ASSOC. 55 WHITES ROAD ZANESVILLE, OH 43701		501(C)(6)	660,136.	0.			SUB-AWARD
OKLAHOMA RURAL WATER ASSOC. PO BOX 95349 OKLAHOMA CITY, OK 73143		501(C)(6)	792,505.	0.			SUB-AWARD
OREGON ASSOC. OF WATER UTILITIES 935 NORTH MAIN STREET INDEPENDENCE, OR 97351		501(C)(6)	736,726.	0.			SUB-AWARD
PENNSYLVANIA RURAL WATER ASSOC. 138 WEST BISHOP STREET BELLEFONTE, PA 16823		501(C)(6)	754,577.	0.			SUB-AWARD
SOUTH CAROLINA RURAL WATER ASSOC. 128 STONEMARK LANE CLINTON, SC 29210		501(C)(6)	624,427.	0.			SUB-AWARD
SOUTH DAKOTA ASSOC. OF RURAL WATER 203 WEST CENTER STREET SIOUX FALLS, SD 57042		501(C)(6)	751,125.	0.			SUB-AWARD
TENNESSEE ASSOC. OF UTILITIES PO BOX 2529 MURFREESBORO, TN 37133-2529		501(C)(6)	673,754.	0.			SUB-AWARD

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS RURAL WATER ASSOC. 1616 RIO GRANDE STREET AUSTIN, TX 78701		501(C)(6)	866,375.	0.			SUB-AWARD
RURAL WATER ASSOC. OF UTAH 76 EAST RED PINE DRIVE ALPINE, UT 84004		501(C)(3)	521,653.	0.			SUB-AWARD
VERMONT RURAL WATER ASSOC. 20 SUSIE WILSON ROAD, SUITE B ESSEX JUNCTION, VT 05452-2827		501(C)(6)	542,370.	0.			SUB-AWARD
VIRGINIA RURAL WATER ASSOC. 2138 SYCAMORE AVENUE BUENA VISTA, VA 24416		501(C)(3)	566,586.	0.			SUB-AWARD
WEST VIRGINIA RURAL WATER ASSOC. 100 YOUNG STREET SCOTT DEPOT, WV 25560		501(C)(6)	626,910.	0.			SUB-AWARD
WISCONSIN RURAL WATER ASSOC. 350 WATER WAY PLOVER, WI 54467		501(C)(6)	690,760.	0.			SUB-AWARD
WYOMING ASSOC. OF RURAL WATER SYSTEMS - PO BOX 1750 - GLENROCK, WY 82637		501(C)(6)	534,548.	0.			SUB-AWARD

Schedule I (Form 990)

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No 1545-0047

2018

Open to Public
Inspection

Name of the organization

NATIONAL RURAL WATER ASSOCIATION

Employer identification number

73-1006395

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

- | | |
|--|---|
| ☒ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- a** The organization?
- b** Any related organization?

If "Yes" on line 5a or 5b, describe in Part III

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- a** The organization?
- b** Any related organization?

If "Yes" on line 6a or 6b, describe in Part III

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b		
2	X	
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2018

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE CEO IS EVALUATED BY EACH MEMBER OF THE BOARD AND THEN THE CEO
EVALUATION COMMITTEE, CONSISTING OF THE PRESIDENT, SENIOR VICE PRESIDENT
AND VICE PRESIDENT, REVIEW THE EVALUATIONS AND DO A FORMAL EVALUATION WITH
THE CEO. THIS COMMITTEE WILL RECOMMEND SALARY ADJUSTMENTS. THE
RECOMMENDATION WILL THEN BE VOTED ON BY THE BOARD. THE COMMITTEE WILL USE
OUTSIDE SURVEYS OF LIKE ORGANIZATIONS TO DETERMINE THE ANNUAL ADJUSTMENT.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2018

Open to Public
Inspection

Name of the organization

NATIONAL RURAL WATER ASSOCIATION

Employer identification number
73-1006395

FORM 990, PART VI, SECTION A, LINE 1:

AN EXECUTIVE COMMITTEE IS ELECTED FROM THE FULL BOARD. THIS COMMITTEE HAS
THE AUTHORITY AND POWER TO MAKE DECISIONS FOR THE FULL BOARD AND THE
ASSOCIATION.

#40

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FORM 990, PART VI, SECTION A, LINE 6:

RECEIVED ENTITY DEPT

THE VOTING MEMBERS OF NRWA ARE THE STATE ASSOCIATIONS AND ARE ALSO
SUB-AWARDEES TO OUR GRANTS.

FORM 990, PART VI, SECTION A, LINE 7A:

EACH STATE ASSOCIATION IS A VOTING MEMBER AND HAS ONE SEAT ON THE BOARD OF
DIRECTIONS OF NATIONAL RURAL WATER ASSOCIATION (NRWA). ONE MEMBER IS
ELECTED FROM EACH STATE ASSOCIATION AND NOMINATED TO THE BOARD OF NRWA. THE
MEMBERSHIP THEN VOTES ON THE NOMINEES AT THE ANNUAL BUSINESS MEETING THAT
IS HELD EACH FALL.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE WHICH CONSISTS OF MEMBERS
OF THE GOVERNING BOARD. EACH MEMBER IS SENT A COPY BY E-MAIL AND ONCE FILED
IT IS POSTED TO THE PRIVATE WEBSITE SPECIFICALLY FOR THE NRWA BOARD OF
DIRECTORS. THE FORM 990 IS ALSO REVIEWED BY THE AUDITORS AS PART OF THE
ANNUAL AUDIT.

FORM 990, PART VI, SECTION B, LINE 12C:

THE POLICY IS FOR BOARD MEMBERS AND IS POSTED ON THE BOARD'S PRIVATE
WEBSITE AND REVIEWED ANNUALLY BY THE PROGRAM REVIEW COMMITTEE OF THE BOARD

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization

NATIONAL RURAL WATER ASSOCIATION

Employer identification number

73-1006395

OF DIRECTORS. THIS COMMITTEE OVERSEES SUCH POLICIES OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 15A:

THE CEO IS EVALUATED BY EACH MEMBER OF THE BOARD AND THEN THE CEO EVALUATION COMMITTEE, CONSISTING OF THE PRESIDENT, SENIOR VICE PRESIDENT AND VICE PRESIDENT, REVIEW THE EVALUATIONS AND DO A FORMAL EVALUATION WITH THE CEO. THIS COMMITTEE WILL RECOMMEND SALARY ADJUSTMENTS. THE RECOMMENDATION WILL THEN BE VOTED ON BY THE BOARD. THE COMMITTEE WILL USE OUTSIDE SURVEYS OF LIKE ORGANIZATIONS TO DETERMINE THE ANNUAL ADJUSTMENT.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THIS PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

OMB No. 1545-0047

2018

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Name of the organization

NATIONAL RURAL WATER ASSOCIATION

Employer identification number
73-1006395

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

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
JOE & JEAN PALMER ENDOWMENT FUND - 73-1593688, 2915 S. 13TH STREET, DUNCAN, OK 73533	PROVIDE SCHOLARSHIPS	OKLAHOMA	501(C)(3)	PF	N/A		X
WATER INDUSTRY ADVANCEMENT AND SUSTAINABILITY INSTITUTE - 82-2979724, 2915 S. 13TH STREET, DUNCAN, OK 73533	EDUCATION REGARDING THE ADVANCEMENT & SUSTAINABILITY OF WATER	OKLAHOMA	501(C)(3)	LINE 7	N/A		X

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2018

Part V

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	JOE & JEAN PALMER ENDOWMENT FUND	B	12,000.CASH PAYMENT	
(2)				
(3)				
(4)				
(5)				
(6)				

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

WATER INDUSTRY ADVANCEMENT AND SUSTAINABILITY INSTITUTE

PRIMARY ACTIVITY: EDUCATION REGARDING THE ADVANCEMENT & SUSTAINABILITY OF
WATER AND WASTEWATER

FORM 990

REASONABLE CAUSE FOR LATE FILING

STATEMENT 1

WE REQUEST THAT A WAIVER OF PENALTIES IS GRANTED UNDER CFR 26 301.6724-1 REASONABLE CAUSE FOR TAX YEAR ENDING FEBRUARY 28, 2019. THE TAXPAYER, NATIONAL RURAL WATER ASSOCIATION, ACTED IN A RESPONSIBLE MANNER UNDER CFR 26 301.6724-1(D) PRIOR TO THE FILING DEADLINE BY EXERCISING ORDINARY BUSINESS CARE AND PRUDENCE IN MAINTAINING A DILIGENT RECORD OF COMPLIANCE WITH ALL INTERNAL REVENUE LAWS AND PROCEDURES (301.6724-1(B)). SUBSEQUENTLY, UPON DISCOVERY OF THE FAILURE, THE TAXPAYER TOOK CORRECTIVE MEASURES AS PROMPTLY AS POSSIBLE AND INTENDS TO COMPLY WITH THE LAW AT ALL TIMES.

PRIOR TO THE TAX YEAR IN QUESTION, THE CHIEF FINANCIAL OFFICER OF THE ORGANIZATION PREPARED AND TIMELY FILED THE REQUIRED FEDERAL AND STATE INFORMATIONAL RETURNS INCLUDING FORM 990. THE CFO RETIRED AND THE NEW CFO "EXERCISED REASONABLE BUSINESS JUDGEMENT IN CONTRACTING WITH ARLEDGE & ASSOCIATES, P.C. TO FILE TIMELY CORRECT RETURNS, INCLUDING THE EXTENSION" (CFR 26 301.6724-1(C)(5)(I)). THE CPA FIRM ALSO ACTED IN A REASONABLE MANNER IN RELYING ON THE CFO TO TIMELY FILE THE EXTENSION AS THEY HAD HISTORICALLY DONE UNDER THE PREVIOUS CFO. THUS, THE CPA FIRM SATISFIED THE REASONABLE CAUSE CRITERIA SET FORTH IN 26 301.6724-1(B).