

WATERPRO RATE CASE APPLICATION

TO:

STATE OF UTAH PUBLIC SERVICE COMMISSION

Epic Engineering Copy

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- WaterPro Taxes 2014 and 2015
- Independent Auditors' Report and Consolidated Financial Statements



WaterPro Inc. *a Draper Irrigation Company*

12421 South 800 East / PO Box 156 / Draper, Utah 84020 / 801.571.2232, Fax 801.571.8054
www.waterpro.net

December 8, 2016

Attn: Gary Widerburg
Utah Public Service Commission
Heber M. Wells Building
160 East 300 South
Salt Lake City, UT 84114

Phone: 801-530-6716
Fax: 801-530-6796
Email - psc@utah.gov

SUBJECT: Water Pro Application for Culinary Water Rate Case (rate increase)

Dear Mr. Widerburg,

We are pleased to submit this letter to the Commission informing you that WaterPro wishes to apply for a rate increase to their Culinary Water Rates. WaterPro has diligently managed finances eliminating the need for a rate increase for many years.

This letter will serve as a notice of the intent to submit an application for a culinary water rate increase. In January 2017 WaterPro will submit the application including all information required under R746-700-50 Sections A thru D that supports WaterPro's need for the proposed culinary water rate increase.

The rates shown below represent the current culinary water base rate and tier rates used within the WaterPro service area.

- **Current Culinary Water Rates:**

- **Base Fee's**

- Residential \$18.72/Month

- **Main Resident Usage**

- Tier 1 \$1.28/1000 gallons 0 -18,000 gallons
 - Tier 2 \$1.97/1000 gallons 18,001-57,000 gallons
 - Tier 3 \$2.69/1000 gallons 57,001-150,000 gallons
 - Tier 4 \$3.80/1000 gallons >150,001 gallons

The following are the proposed culinary rates for the base fee and main resident usage that WaterPro has determined is needed to continue to provide the best service and water to our customers. The proposed rates show a 5% increase to the base rate and each tier rate.

- **Proposed Culinary Water Rates: 5% Increase to Base Rate and all Tiers**

- **Base Fee's**

- Residential \$19.66/Month

- **Main Resident Usage**

- Tier 1 \$1.34/1000 gallons 0 -18,000 gallons
 - Tier 2 \$2.06/1000 gallons 18,001-57,000 gallons
 - Tier 3 \$2.83/1000 gallons 57,001-150,000 gallons
 - Tier 4 \$3.99/1000 gallons >150,001 gallons

Quality on Tap!
Our Commitment  Our Profession

In addition to the main residents WaterPro has four other smaller service areas that are charged a different usage rate based on location. Attached you will find a full list of WaterPro's existing and proposed rates for each of those service areas.

We respectfully request your assistance in the processing of the application. If you need additional information please contact me at WaterPro at 801-571-2232, or you may contact our engineers Trevor Andra, at 801-955-5605 who will be assisting in the generation of much of the backup material.

Sincerely,



Darrin L. Jensen-Peterson
C.E.O / General Manager
WaterPro Inc.

Attached: Existing and proposed culinary rates for each service area

December 1, 2016

Attn: Gary Widerburg
Utah Public Service Commission
Heber M. Wells Building
160 East 300 South
Salt Lake City, UT 84114

Phone: 801-530-6716
Fax: 801-530-6796
Email - psc@utah.gov

SUBJECT: Water Pro Application for Culinary Water Rate Case (rate increase)

Dear Mr. Widerburg,

We are pleased to submit the included and attached information associated with the application process for approval of a culinary water rate increase for WaterPro. WaterPro has diligently managed finances eliminating the need for a rate increase for many years. We have included information herein showing evidence of the need for a rate increase at this time.

This letter will serve as our application for a culinary water rate increase. We have attached information for R746-700-50 Sections A thru D that supports WaterPro's need for the proposed culinary water rate increase.

The rates shown below represent the current culinary water base rate and tier rates used within the WaterPro service area.

- **Current Culinary Water Rates:**

- **Base Fee's**

- Residential \$18.72/Month

- **Main Resident Usage**

- Tier 1 \$1.28/1000 gallons 0 -18,000 gallons
 - Tier 2 \$1.97/1000 gallons 18,001-57,000 gallons
 - Tier 3 \$2.69/1000 gallons 57,001-150,000 gallons
 - Tier 4 \$3.80/1000 gallons >150,001 gallons

The following are the proposed culinary rates that WaterPro has determined is needed to continue to provide the best service and water to our customers. The proposed rates show a 5% increase to the base rate and each tier rate.

- **Proposed Culinary Water Rates: 5% Increase to Base Rate and all Tiers**

- **Base Fee's**

- Residential \$19.66/Month

- **Main Resident Usage**

- Tier 1 \$1.34/1000 gallons 0 -18,000 gallons
 - Tier 2 \$2.06/1000 gallons 18,001-57,000 gallons
 - Tier 3 \$2.83/1000 gallons 57,001-150,000 gallons
 - Tier 4 \$3.99/1000 gallons >150,001 gallons

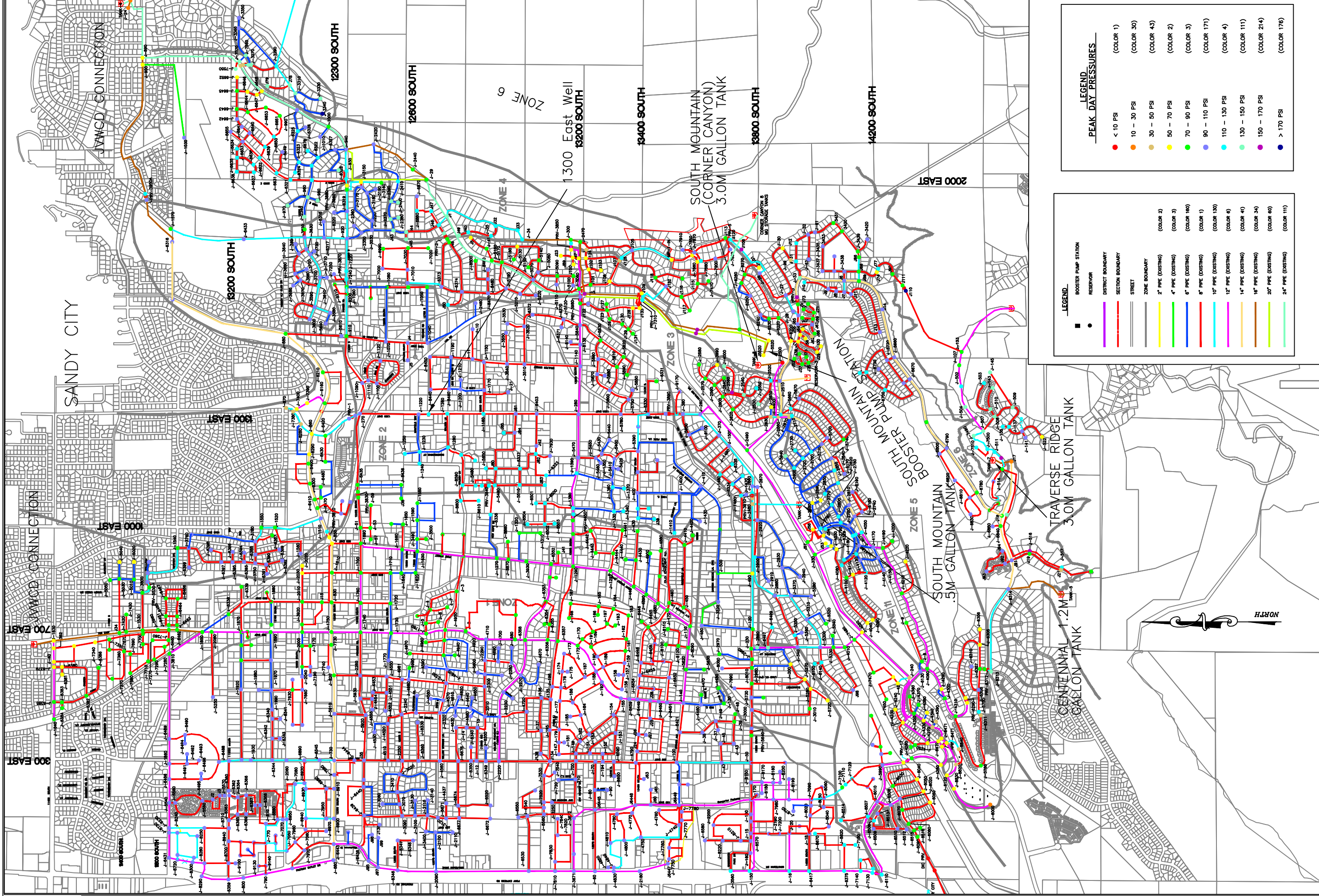
We have included with the application a rate analysis, independent auditors' report and consolidated financial statements for 2014 and 2015. Additionally we have provided Mark Long with the Division of Public Utilities, WaterPro's completed Annual Reports for 2013, 2014 and 2015.

We respectfully request your assistance in the processing of the application. If you need additional information or have questions regarding the attached information please contact me at WaterPro at 801-571-2232, or you may contact our engineers Trevor Andra, at 801-955-5605 who assisted in the generation of much of the backup material.

Sincerely,

Darrin L. Jensen
C.E.O / General Manager
WaterPro Inc.

Attached: Complete Existing and Proposed Rates for all Zones
R746-700-50. Information for a General Rate Case Application for a Water Corporation



LEGEND

BOOSTER PUMP STATION	(COLOR 1)
RESERVOIR	(COLOR 30)
DISTRICT BOUNDARY	(COLOR 43)
SECTION BOUNDARY	(COLOR 2)
STREET	(COLOR 3)
ZONE BOUNDARY	(COLOR 160)
2" PIPE (EXISTING)	(COLOR 1)
4" PIPE (EXISTING)	(COLOR 130)
6" PIPE (EXISTING)	(COLOR 6)
8" PIPE (EXISTING)	(COLOR 41)
10" PIPE (EXISTING)	(COLOR 34)
12" PIPE (EXISTING)	(COLOR 60)
14" PIPE (EXISTING)	(COLOR 111)
16" PIPE (EXISTING)	(COLOR 176)
20" PIPE (EXISTING)	(COLOR 1)
24" PIPE (EXISTING)	(COLOR 30)

LEGEND

PEAK DAY PRESSURES

< 10 PSI	(COLOR 1)
10 - 30 PSI	(COLOR 30)
30 - 50 PSI	(COLOR 43)
50 - 70 PSI	(COLOR 2)
70 - 90 PSI	(COLOR 3)
90 - 110 PSI	(COLOR 171)
110 - 130 PSI	(COLOR 4)
130 - 150 PSI	(COLOR 111)
150 - 170 PSI	(COLOR 214)
> 170 PSI	(COLOR 176)

R746-700-50. Information for a General Rate Case Application for a Water Corporation.

Utah Division of Public Utilities
Heber Wells Building
160 East 300 South
Salt Lake City, Utah 84111

A. General Information:

1. Most recent Division of Drinking Water certification/report.
2. Certificate of Public Convenience and Need Number granted by the Commission and its date.
3. Date the utility started operation.
 - 1911
4. The number of connections approved and current area served, which may be shown by service area map.
 - See Figure A.4 : Service Area
5. Ownership and officers.
Draper Irrigation Company is a not-for-profit corporation owned by its customers.

President – Steven L. Tripp
Vice President – Kent S. Ware
Secretary – Ryan Daw
Director – George Greenwood
Director – Greg J. Matias
Director – Jay Webb
Director – Dale Smith
General Manager – Darrin L. Jensen

6. Associated companies (if any).

WaterPro Inc.
Draper Water Services

7. A copy of its current tariff.

Base Fee's

Residential \$18.72/Month
Lifeline \$12.48/Month
Multiplex Please Call the Office
Apartment Please Call the Office
Commercial/Institutional Please Call the Office

Main Resident

Usage

Tier 1 \$1.28/1000 gallons 0 -18,000 gallons
Tier 2 \$1.97/1000 gallons 18,001-57,000 gallons
Tier 3 \$2.69/1000 gallons 57,001-150,000 gallons
Tier 4 \$3.80/1000 gallons >150,001 gallons

B. Engineering Information.

1. Source of water supply

- Jordan Valley Water Conservancy District connection
- Big Willow Intake
- Southeast Regional Aqueduct Intake
- South Fork Dry Creek Intake
- Well #1
- Corner Canyon Intake
- Bear Canyon Intake
- Draper Water Treatment Plant Well
- Valle Di Villa Well
- Hidden Valley Well

2. Information for all Wells

- Well #1, 950 gallons per minute
- Draper Water Treatment Plant Well, 1200 gallons per minute
- Valle de Villa Well, 620 gallons per minute
- Hidden Valley Well, 3,000 gallons per minute

3. Mains and meters information

69,000 LF of DI Pipe

988,000 LF of PVC Pipe

10,076 metered connections as of the end of 2015

4. Reservoirs information

Culinary Water System Storage

No.	Name	Type	Effective Volume
ST007	4 MG NORTH STORAGE	GROUND	4,000,000 GAL
ST008	4 MG SOUTH STORAGE	GROUND	4,000,000 GAL
ST001	LITTLE VALLEY STORAGE	GROUND	750,000 GAL
ST002	TRAVERSE RIDGE STORAGE	GROUND	3,000,000 GAL
ST003	SOUTH MOUNTAIN STORAGE	GROUND	4,000,000 GAL
ST004	BEAR CANYON STORAGE	GROUND	500,000 GAL

Water Treatment Plant Storage

No.	Name	Type	Effective Volume
ST005	1 MG STORAGE AT WTP	GROUND	1,000,000 GAL
ST006	7 MG STORAGE AT WTP	GROUND	7,000,000 GAL

A total of 8 Reservoirs in operation with a system capacity of 24,250,000 gallons

5. Storage capacity

- A total of 8 Reservoirs in operation with a system capacity of 24,250,000 gallons

6. Service deficiencies and remedies

- See Proposed System Improvement Projects for complete project list

7. Service quality

WaterPro/Draper Irrigation continues to work for the welfare of Draper residents as we look to the future by:

- Working cooperatively with other privately-owned water companies to establish and protect legislative rights that put us on a par with municipally owned water systems. We feel that this is our best path to serving our customers.
- Building infrastructure to provide water service for future Draper residents, including two four-million-gallon tanks in Corner Canyon, as well as many other infrastructure improvements and upgrades.
- Constantly upgrading our water treatment methods as federal regulations for water quality continue to evolve.
- Making the most of our assets while minimizing our carbon footprint through hydroelectric power generation, as well as investigating geothermal and other alternative power methods.

8. Additions or improvements in the last five years

Year	Project
2012	Hidden Valley Production Well
2013	Hidden Valley Pump Station, 1300 E 10-inch Pipe
2014	Little and Big Willow Diversion Structure
2014	Little Willow Pipeline
2014	Pioneer Road PRV
2015	Vestry Road PRV
2015	Osborne Lane PRV
2016	13490 S Reuse Pipeline

9. Any anticipated additions or improvements

- Several pipeline, PRV and pump station project are scheduled. See Proposed System Improvement Projects for complete project list

10. Efforts to encourage conservation

Draper Irrigation maintains a current water conservation plan in accordance with Utah Water conservation Plan Act. Additionally they provide customers with helpful tips to reduce water usage. These include, but are not limited to: Checking your home for leaks, changing personal habits to reduce water usage, and changing irrigation practices to maximize watering effectiveness.

C. Customer Connection Information

Customer Connection Information is large and will only be provided in electronic format

1. Each connection identified by unique lot number or address
 - See [electronic version of Customers](#)
2. The date first put into service
 - See [electronic version of Customers](#)
3. Whether metered or unmetered.
 - See [electronic version of Customers](#)
4. Whether classified as residential or commercial
 - See [electronic version of Customers](#)
5. The water usage per month or billing cycle, showing minimum and average gallons used
 - See [WaterPro Usage Data](#)
6. The amount billed per month or billing cycle
 - See [WaterPro Usage Data](#)
7. The anticipated growth, showing minimum and average gallons used
 - See [Customer Connection Info & Rate Analysis](#)
8. Water usage and billings projected for the next three years
 - See [Customer Connection Info & Rate Analysis](#)
9. Information on any secondary/irrigation water system (the same information as C. 1, 2, 5, 6, 7 and 8 above).
10. Identification whether secondary water is distributed through the culinary system.
 - [Water used for irrigation is distributed thru the culinary system for a portion of the customers](#)

D. Accounting and Financial Data, which shall include the prior two complete years and current up to the date of general rate case application, unless otherwise specified:

WaterPro General Ledger and Check Register for 2014 and 2015 is provided as an electronic version only due to size of document.

1. Identification (contact information) for any accountant used by the utility.
 - Eide Bailly LLP
5 Triad Center, Suite 600
Salt Lake City, UT 84180-1128
PH: 801-532-2200
2. Copies of the General Ledger.
 - See electronic General Ledger
3. Copies of the Balance Sheet
 - See Balanced Sheet
4. Copies of the Income Statement
 - See Income Statement
5. Pro Forma Income Statements, categorized by the National Association of Regulatory Utility Commissions, NARUC, System of Accounts, to include:
 - a. the prior two years of revenues and expenses, and
 - b. the projected revenues and expenses for the next three years, to include the Company's anticipated growth rate and requested rate increase.
 - See attached Rate Analysis
6. A copy of or the utility's check register
 - See electronic Check Register
7. Billing documentation/reports, tied back to the tariff rates
 -
8. Information on the utility plant, including, but not limited to:
 - a. Acquisition date,
 - b. Acquisition price or cost,
 - c. Salvage value,
 - d. Expected useful life,
 - e. Annual depreciation amount per asset,
 - f. Accumulated depreciation per asset and reconciled to the total accumulated depreciation amount to the most recent Annual Report. (If these amounts do not match the most recent Annual Report provide detailed explanations for any needed adjustments),
 - g. If an asset was donated, the amount applied to Contribution in Aid of Construction per asset,
 - h. If donated, the accumulated amortization of the Contribution in Aid of Construction per asset and reconciled to the total accumulated amortization amount to the most recent Annual Report. (If these amounts do not match the most recent Annual Report provide detailed explanations for any needed adjustments), and
 - i. Projected future asset purchases for the next three years, providing the estimated acquisition date and price.

9. Copies of tax returns for the prior two complete years,

- See attached Tax Returns

10. Information on all Notes Payable, Loans, and other Obligations, This will include all outstanding and those retired within the past two years, including:

- a. Interest rate,
 - b. Beginning date,
 - c. Date of last scheduled payment (the Loan pay-off date), and
 - d. Amount of payment
- See Rate Analysis Loan Payment Schedule

E. Customer Notice Information

1. A copy of any notice sent to customers notifying them that the utility is seeking a rate increase.

**CULINARY WATER
PROPOSED SYSTEM IMPROVEMENT PROJECTS**

DESCRIPTION	Source	Size	Length	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Pioneer RR to 1300 E	Replacement	10"	1,050		\$144,375.00								
Pioneer 1745 E to 1840E	Replacement	10"	860	\$118,250.00									
1300 east 13400 to 13800 south	Replacement	10"	1,400			\$231,000.00							
13800 south 979 east to 150 east	Replacement	12"	5,970							\$985,050.00			
800 east 12300 so to 12000 so west to 700 east	Replacement	8"	2,600					\$357,500.00					
12000 south 700 east to 540 east	Replacement	8"	1,340									\$167,500.00	
12100 south 700 east to 500 east	Replacement	8"	1,620		\$202,500.00								
12200 south 700 east to 600 east	Replacement	8"	960			\$120,000.00							
1840 east pioneer rd to 12100 south	Replacement	10"	1,240						\$204,600.00				
1700 east pioneer rd to 12500 south	Replacement	8"	940								\$117,500.00		
12500 south 1565 east to 1700 east	Replacement	8"	1,160				\$145,000.00						
12700 south 1565 east to 1700 east	Replacement	8"	1,260						\$157,500.00				
Fort street 13800 south to Stokes	Replacement	8"	1,380								\$172,500.00		
Canyon Breeze Fort street to 970 east	Replacement	8"	2,420										\$302,500.00
980 east pioneer to 12300 south	Replacement	8"	690		\$94,875.00								
12300 south 800 east to 980 east	Replacement	8"	1,400					\$192,500.00					
13800 south Minite Man Dr to 150 east	Replacement	8"	1,600										\$220,000.00
700 east 12000 south to Kimball's In	Replacement	8"	900				\$123,750.00						
SUM				\$ 118,250	\$ 441,750	\$ 351,000	\$ 268,750	\$ 550,000	\$ 362,100	\$ 985,050	\$ 290,000	\$ 167,500	\$ 522,500
System Automation	Improvement			\$69,600	\$69,600	\$69,600	\$69,600	\$69,600	\$69,600	\$69,600	\$69,600	\$69,600	\$69,600
South Mtn Pump Station Upgrade	Improvement			\$300,000									
Pump Station Upgrade Cove of Bear Canyon	Improvement			\$120,000									
Well repair	Improvement			\$100,000			\$40,000		\$40,000		\$40,000		\$40,000
PRV stations / Meter station connecting to city	Improvement			\$190,000	\$60,000	\$70,000							
Culinary Water Master Plan Updates	Improvement			\$6,000	\$6,000	\$6,000	\$6,000	\$6,000	\$15,000	\$6,000	\$6,000	\$7,000	\$7,000
GIS Upgrades	Improvement			\$5,000	\$5,000	\$5,000	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000	\$6,000	\$8,000
Demolition of 500,000 Gallon Tank	Improvement						\$100,000						
GIS Mapping Upgrades	Improvement				\$30,000			\$30,000			\$30,000		
Water Right Master Plan	Improvement			\$6,000	\$6,000	\$6,000	\$6,000	\$6,000	\$15,000	\$6,000	\$6,000	\$6,000	\$6,000
Water Treatment Plant Membrane Upgrades	Improvement										\$1,600,000		
Meter Replacement	Improvement				\$342,000	\$342,000	\$342,000	\$342,000	\$342,000	\$342,000	\$342,000		
Meter Reading / Maintenance	Improvement				\$14,242	\$28,483	\$42,725	\$56,966	\$71,208	\$85,450	\$85,450	\$85,450	\$85,450
Miscellaneous Department	Improvement			\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000
SUM				\$ 846,600	\$ 582,842	\$ 577,083	\$ 662,325	\$ 566,566	\$ 608,808	\$ 565,050	\$ 1,893,050	\$ 224,050	\$ 266,050
TOTAL				\$ 964,850	\$ 1,024,592	\$ 928,083	\$ 931,075	\$ 1,116,566	\$ 970,908	\$ 1,550,100	\$ 2,183,050	\$ 391,550	\$ 788,550

DIC Culinary Water Rate Analysis

2018 Rate Increase

Water Rates: 5% Increase to Base and Overage Rates Starting January 2018

	2014	2015	2016	2017	2018	2019	2020	2021	2022
Expenses									
Direct Costs	\$ 865,106	\$ 1,260,010	\$ 1,260,010	\$ 1,297,810	\$ 1,336,745	\$ 1,376,847	\$ 1,418,152	\$ 1,460,697	\$ 1,504,518
Direct Professional Expenses	\$ 237,164	\$ 256,841	\$ 267,114	\$ 277,799	\$ 288,911	\$ 300,467	\$ 312,486	\$ 324,985	\$ 337,985
Contract Operating Expenses	\$ 2,223,372	\$ 1,978,010	\$ 2,057,131	\$ 2,139,416	\$ 2,224,993	\$ 2,313,992	\$ 2,406,552	\$ 2,502,814	\$ 2,602,927
Property Taxes	\$ 74,880	\$ 73,264	\$ 83,230	\$ 86,559	\$ 90,022	\$ 93,623	\$ 97,368	\$ 101,262	\$ 105,313
System Rental (Depreciation)	\$ 1,029,087	\$ 1,439,220	\$ 1,482,396	\$ 1,526,868	\$ 1,572,674	\$ 1,619,854	\$ 1,668,450	\$ 1,718,504	\$ 1,770,059
Uncommitted (Depreciation)	\$ (108,337)	\$ (589,095)	\$ (1,364,146)	\$ (1,085,118)	\$ (1,221,674)	\$ (1,351,104)	\$ (1,118,450)	\$ (1,356,404)	\$ (785,009)
System Replacement (Depreciation)	\$ (920,750)	\$ (850,125)	\$ (118,250)	\$ (441,750)	\$ (351,000)	\$ (268,750)	\$ (550,000)	\$ (362,100)	\$ (985,050)
System Rental (H2O Purchase DIC)	\$ 645,000	\$ 645,000	\$ 645,000	\$ 645,000	\$ 645,000	\$ 645,000	\$ 645,000	\$ 645,000	\$ 645,000
Notes Payable (Water Treatment Loan)	\$ 458,086	\$ 458,036	\$ 458,042	\$ 460,099	\$ 458,024	\$ -	\$ -	\$ -	\$ -
Reuse Loan Payment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 396,426	\$ 396,722	\$ 396,448	\$ 396,542
Interest Expense	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
System Improvements	\$ 129,600	\$ 569,000	\$ 846,600	\$ 582,842	\$ 577,083	\$ 662,325	\$ 566,566	\$ 608,808	\$ 565,050
System Replacement	\$ 920,750	\$ 850,125	\$ 118,250	\$ 441,750	\$ 351,000	\$ 268,750	\$ 550,000	\$ 362,100	\$ 985,050
Total Expenses	\$ 5,553,957	\$ 6,090,287	\$ 5,735,377	\$ 5,931,275	\$ 5,971,777	\$ 6,057,430	\$ 6,392,846	\$ 6,402,114	\$ 7,142,383
Income									
Metered Sales	\$ 5,336,926	\$ 5,424,680	\$ 5,526,840	\$ 5,609,743	\$ 5,978,583	\$ 6,068,262	\$ 6,159,286	\$ 6,564,259	\$ 6,652,876
Connections	9925	10076	10278	10432	10588	10747	10908	11072	11221
Base Sales	\$ 2,229,552	\$ 2,263,473	\$ 2,308,742	\$ 2,343,373	\$ 2,497,450	\$ 2,534,912	\$ 2,572,935	\$ 2,742,106	\$ 2,779,124
Overage Sales	\$ 3,107,374	\$ 3,161,207	\$ 3,218,098	\$ 3,266,369	\$ 3,481,133	\$ 3,533,350	\$ 3,586,350	\$ 3,822,153	\$ 3,873,752
TOTAL	\$ 5,336,926	\$ 5,424,680	\$ 5,526,840	\$ 5,609,743	\$ 5,978,583	\$ 6,068,262	\$ 6,159,286	\$ 6,564,259	\$ 6,652,876
Raw Water Sales	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Wholesale Culinary	\$ 11,000	\$ 10,700	\$ 7,000	\$ 7,000	\$ 7,000	\$ 7,000	\$ 7,000	\$ 7,000	\$ 7,000
Connection Fees	\$ 76,596	\$ 86,827	\$ 115,874	\$ 88,644	\$ 89,973	\$ 91,323	\$ 92,693	\$ 94,083	\$ 85,945
Other Income									
Interest Income	\$ 89,082	\$ 61,864	\$ -	\$ -	\$ -	\$ 4,763	\$ 5,068	\$ -	\$ 9,547
Gain on Sale of Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Other Income & Expenses	\$ 559,187	\$ 285,493	\$ 55,000	\$ 55,000	\$ 55,000	\$ 55,000	\$ 55,000	\$ 55,001	\$ 55,002
Reservoir Reserve (Impact Fees)	\$ 495,433	\$ 528,178	\$ 412,108	\$ 281,655	\$ 285,880	\$ 290,168	\$ 294,521	\$ 298,939	\$ 273,081
System Buy-in Fees	\$ 90,271	\$ 96,233	\$ 147,110	\$ 112,539	\$ 114,227	\$ 115,940	\$ 117,679	\$ 119,445	\$ 109,113
Total Income	\$ 6,072,791	\$ 5,869,563	\$ 5,704,714	\$ 5,760,386	\$ 6,130,556	\$ 6,226,348	\$ 6,319,046	\$ 6,720,343	\$ 6,810,370
Difference	\$ 518,834	\$ (220,723)	\$ (30,663)	\$ (170,889)	\$ 158,780	\$ 168,919	\$ (73,800)	\$ 318,228	\$ (332,013)

Year	2006*!	2007*	2008*	2009**	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
WTP DDW Loan Annual Payments	\$ 458,070	\$ 458,030	\$ 458,036	\$ 455,887	\$ 455,789	\$ 455,738	\$ 457,936	\$ 457,986	\$ 458,086	\$ 458,036	\$ 458,042	\$ 460,099	\$ 458,024	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

**TABLE A.6
2015 MONTHLY UNIT RESIDENTIAL EQUIVALENTS**

Rate Table	Title	Units	Dec	Nov	Oct	Sept	August	July	June	May	April	March	Feb	Jan	2015 Total
101	DWS CUL WATER/ALL OTHR RESIDEN	1	4,607	4,618	4,625	4,616	4,618	4,627	4,618	4,605	4,590	4,585	4,561	4,571	4,603
102	DWS CUL WATER - LIFELINE	1	3	3	3	3	3	3	3	3	3	3	4	4	3
103	DWS CUL WATER - TRIPLEX	3	21	21	21	21	21	21	21	21	21	21	21	21	21
104	DWS CUL WATER - FOURPLEX	4	132	132	132	132	132	132	132	132	132	132	132	132	132
105	DWS CUL WATER - SIXPLEX	6	270	270	270	270	270	270	270	270	270	270	270	270	270
106	DWS CUL WATER - DUPLEX	2	14	14	14	14	14	14	14	14	14	14	14	14	14
107	WILLOW BEND CONDOS 57 UNITS	50	50	50	50	50	50	50	50	50	50	50	50	50	50
108	DWS CULWATER - PINNACLE APT 16 UNIT	16	496	496	496	496	496	496	496	496	496	496	496	496	496
109	DWS CULWATER - FIVEPLEX	5	90	90	90	90	90	90	90	90	90	90	90	90	90
110	DWS CUL WATER - 1MTR/2HOMES	2	2	2	2	2	2	2	2	2	2	2	2	2	2
111	DWS CUL WATER - REFUSED PI	1	976	973	970	968	971	975	973	973	970	979	980	985	974
118	COMPOUND BYPASS RE 5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
119	COMPOUND BYPASS RE 10	10	10	10	10	10	10	10	10	10	10	10	10	10	10
120	DWS CULNRY COVE @ BEAR CAYNON	1	62	62	62	62	62	62	63	63	62	64	62	62	62
121	DWS CMPND/2ND/BYPASS METERS	1	1	1	1	1	1	1	1	1	1	1	5	1	1
122	DWS CUL WATER EIGHT PLEX WITH	8	48	48	48	48	48	48	48	48	48	48	40	40	47
124	HERITAGE CONDOMINIUMS 63 UNITS	63	63	63	63	63	63	63	63	63	63	63	63	63	63
129	VILLAGE ON THE GREEN 99 UNITS	99	99	99	99	99	99	99	99	99	99	99	99	99	99
130	PRESSURE ZONE 5 (UPPER SO MTN)	1	373	372	370	371	368	370	366	365	366	367	366	361	368
132	PRESURE ZONE UPPER SO MT 5 PLEX	5	25	25	25	25	25	25	25	25	25	25	25	25	25
133	PRESSURE ZONE UPPER SO MT 6PLEX	6	24	24	24	24	24	24	24	24	24	24	24	24	24
134	PRESSURE ZONE UPPER SO MT 8PLEX	8	24	24	24	24	24	24	24	24	24	24	24	24	24
135	PRESSURE ZONE UPPER SO MT 3 PLEX	3	3	3	3	3	3	3	3	3	3	3	3	3	3
136	PRESSURE ZONE UPPER SO MT 4 PLEX	4	8	8	8	8	8	8	8	8	8	8	8	8	8
137	PRESSURE ZONE UPPER SO MT 7 PLEX	7	7	7	7	7	7	7	7	7	7	7	7	7	7
138	PRESSURE ZONE UPPER SO MT 9 PLEX	9	18	18	18	18	18	18	18	18	18	18	18	18	18
140	LITTLE VALLEY ON SO MOUNTAIN	1	129	130	130	130	126	126	124	123	124	124	122	121	126
150	DWS CUL WATER -12PLEX	12	120	120	108	108	108	108	108	108	108	120	120	120	113
160	WHOLESALE WATER	1	3	4	6	6	6	6	6	5	5	4	4	5	5
199	DETECTOR CHECK METER	1	7	7	7	7	7	7	7	7	7	7	7	7	7
602	DWS CUL WATER RE 2	2	90	84	84	80	82	80	78	78	78	78	78	78	81
603	DWS CUL WATER RE 3	3	93	93	93	90	90	90	87	87	87	87	84	84	86
604	DWS CUL WATER RE 4	4	68	68	68	68	72	68	68	68	68	68	68	68	68
605	DWS CUL WATER RE 5	5	105	105	105	105	105	105	105	105	110	105	105	105	105
606	DWS CUL WATER RE 6	6	108	108	114	102	102	102	102	96	96	96	96	96	102
607	DWS CUL WATER RE 7	7	56	56	63	56	56	56	56	42	42	42	42	42	51
608	DWS CUL WATER RE 8	8	72	72	72	72	72	72	72	72	72	72	72	80	73
609	DWS CUL WATER RE 9	9	63	63	63	63	63	63	63	63	63	63	63	63	63
610	DWS CUL WATER RE 10	10	80	80	80	80	80	80	80	80	80	80	80	80	80
611	DWS CUL WATER RE 11	11	22	22	22	22	22	22	22	22	22	22	22	22	22
612	DWS CUL WATER RE 12	12	72	72	72	72	72	72	48	36	36	36	36	36	55
613	DWS CUL WATER RE 13	13	26	26	26	26	26	26	26	26	13	13	13	13	22
615	DWS CUL WATER RE 15	15	60	60	60	60	60	60	60	60	60	60	60	60	60
616	DWS CUL WATER RE 16	16	16	16	16	16	16	16	16	16	16	16	16	16	16
617	DWS CUL WATER RE 17	17	17	17	17	17	17	17	17	17	17	17	17	17	17
618	DWS CUL WATER RE 18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
619	DWS CUL WATER RE 19	19	19	19	19	19	19	19	19	19	19	19	19	19	19
624	DWS CUL WATER RE 24	24	48	48	48	48	48	48	48	48	48	48	48	48	48
625	DWS CUL WATER RE 25	25	50	50	50	50	50	50	50	50	50	50	50	50	50
626	DWS CUL WATER RE 26	26	52	52	52	52	52	52	52	52	52	52	52	52	52
627	DWS CUL WATER RE 27	27	81	81	81	81	81	81	81	81	81	81	81	81	81
645	DWS CUL WATER RE 45	45	45	45	45	45	45	45	45	45	45	45	45	45	45
702	DWS CUL WATER RE 2 SO.MT	2	2	2	2	2	2	2	2	2	2	2	2	2	2
703	DWS CUL WATER RE 3 SO.MT	3	15	15	15	15	15	15	15	15	15	15	15	15	15
704	DWS CUL WATER RE 4 SO.MT	4	8	8	8	8	8	8	8	8	8	8	8	8	8
705	DWS CUL WATER RE 5 SO.MT	5	10	10	10	10	10	10	10	10	10	10	10	10	10
706	DWS CUL WATER RE 6 SO.MT	6	12	12	12	12	12	6	6	6	6	6	6	6	9
709	DWS CUL WATER RE 9 SO.MT	9	9	9	9	9	9	9	9	9	9	9	9	9	9
720	DWS CUL WATER RE 20 SO.MT	20	20	20	20	20	20	20	20	20	20	20	20	20	20
745	DWS CUL WATER RE 45 SO.MT	45	45	45	45	45	45	45	45	45	45	45	45	45	45
748	DWS CUL WATER RE 48 SO.MT	48	48	48	48	48	48	48	48	48	48	48	48	48	48
803	DWS CUL WATER RE 3 UPPE SO.MT	3	12	12	12	12	12	9	9	9	9	9	9	9	10
805	DWS CUL WATER RE 5 UPPE SO.MT	5	5	5	5	5	5	5	5	5	5	5	5	5	5
810	DWS CUL WATER RE 10 UPPE SO.MT	10	20	20	20	20	20	20	20	20	20	20	20	20	20
1104	COTTAGE COMMUNITIES- FOURPLEX	4	12	12	12	12	12	12	12	12	12	12	12	12	12
1105	COTTAGE COMMUNITIES SIXPLEX	6	30	30	30	30	30	30	30	30	30	30	30	30	30
1106	COTTAGE COMMUNITIES SEVENPLEX	7	14	14	14	14	14	14	14	14	14	14	14	14	14
1107	COTTAGE COMMUNITIES EIGHT PLEX	8	8	8	8	8	8	8	8	8	8	8	8	8	8
1108	COTTAGE COMMUNITIES NINE PLEX	9	9	9	9	9	9	9	9	9	9	9	9	9	9
1701	SOUTH MOUNTAIN RESIDENTS	1	919	918	926	923	918	927	921	911	912	907	903	908	916
4101	COTTAGE COMMUNITIES /RATE 101	1	3	3	3	3	3	3	3	3	3	3	3	3	3
SUM:			10,152	10,154	10,167	10,128	10,127	10,136	10,085	10,027	10,003	9,972	9,973	9,992	10,076

TABLE A.7
2015 MONTHLY WATER USAGE (1,000 GALLONS)

Rate Table	Title	Dec	Nov	Oct	Sept	August	July	June	May	April	March	Feb	Jan	2015 Total
101	DWS CUL WATER/ALL OTHR RESIDEN	28,905	36,116	65,799	106,222	110,845	104,932	81,887	51,812	44,976	28,186	26,866	34,155	720,701
102	DWS CUL WATER - LIFELINE	6	40	7	5	6	9	9	5	5	6	12	13	123
103	DWS CUL WATER - TRIPLEX	70	83	79	121	118	117	117	91	79	77	86	118	1,156
104	DWS CUL WATER - FOURPLEX	922	898	794	1,396	1,386	1,392	1,098	618	460	474	431	579	10,448
105	DWS CUL WATER - SIXPLEX	769	894	795	1,035	978	872	995	833	759	796	742	926	10,394
106	DWS CUL WATER - DUPEX	42	43	57	107	106	110	97	57	54	59	53	66	851
107	WILLOW BEND CONDOS 57 UNITS	256	310	259	292	264	233	286	276	263	223	210	284	3,156
108	DWS CULWATER - PINNACLE APT 16 U	1,339	1,566	1,402	1,524	1,543	1,324	1,637	1,363	1,447	1,497	1,342	1,706	17,690
109	DWS CULWATER - FIVEPLEX	277	369	447	970	1,016	974	698	373	261	285	263	366	6,299
110	DWS CUL WATER - 1MTR/2HOMES	2	1	2	2	2	1	2	2	2	1	3	2	22
111	DWS CUL WATER - REFUSED PI	5,765	8,069	24,613	48,450	53,393	51,335	32,978	15,877	11,433	5,795	5,448	7,042	270,198
118	COMPOUND BYPASS RE 5	7	11	248	343	316	330	178	96	48	9	8	6	1,600
119	COMPOUND BYPASS RE 10	21	219	203	158	96	67	64	53	32	25	17	21	976
120	DWS CULNRY COVE @ BEAR CAYNON	319	551	2,660	5,086	5,591	5,481	3,282	1,436	1,135	374	373	493	26,781
121	DWS CMPND/2ND/BYPASS METERS	0	0	0	0	0	0	0	0	0	0	0	0	0
122	DWS CUL WATER EIGHT PLEX WITH	153	196	118	154	137	140	236	108	113	124	106	143	1,728
124	HERITAGE CONDOMINIUMS 63 UNITS	226	227	526	1,282	1,604	1,516	1,064	281	185	203	192	293	7,599
125	VILLAGE ON THE GREEN 99 UNITS	282	356	1,163	3,665	3,504	4,107	2,474	1,392	334	293	247	394	18,211
130	PRESSURE ZONE 5 (UPPER SO MTN)	2,134	3,168	9,345	17,465	19,038	17,597	13,953	6,777	5,829	3,705	1,922	2,526	103,459
132	PRESSURE ZONE UPPER SO MT 5 PLEX	81	163	641	964	1,007	786	540	314	170	81	75	106	4,928
133	PRESSURE ZONE UPPER SO MT 6 PLEX	79	186	517	788	809	631	478	225	124	80	66	154	4,137
134	PRESSURE ZONE UPPER SO MT 8 PLEX	59	117	620	699	723	559	490	259	116	48	44	64	3,798
135	PRESSURE ZONE UPPER SO MT 3 PLEX	15	22	107	178	168	137	119	86	18	15	12	17	894
136	PRESSURE ZONE UPPER SO MT 4 PLEX	34	52	130	324	303	263	202	135	64	48	52	53	1,660
137	PRESSURE ZONE UPPER SO MT 7 PLEX	26	49	113	210	178	244	150	41	38	27	24	28	1,128
138	PRESSURE ZONE UPPER SO MT 9 PLEX	22	49	279	358	385	267	220	136	51	26	25	31	1,849
140	LITTLE VALLEY ON SO MOUNTAIN	538	1,001	3,204	5,456	5,676	5,269	4,170	2,002	1,069	662	498	659	30,204
150	DWS CUL WATER - 12 PLEX	300	328	280	307	265	228	301	259	255	368	347	452	3,690
160	WHOLESALE WATER	0	0	14	0	771	1,175	0	547	0	0	0	0	2,507
199	DETECTOR CHECK METER	0	3	2	3	4	3	2	3	7	3	2	3	35
602	DWS CUL WATER RE 2	388	853	2,502	3,209	3,228	3,117	2,748	2,558	1,410	570	365	383	21,331
603	DWS CUL WATER RE 3	653	775	3,071	4,671	5,157	4,749	3,114	2,562	1,464	437	388	478	27,519
604	DWS CUL WATER RE 4	602	934	2,098	3,289	3,532	3,056	2,335	1,950	1,898	933	608	925	22,360
605	DWS CUL WATER RE 5	690	870	2,644	3,867	3,566	3,715	3,202	2,586	1,623	653	800	879	24,955
606	DWS CUL WATER RE 6	545	885	1,936	3,966	4,778	3,860	2,951	1,994	796	621	533	581	23,446
607	DWS CUL WATER RE 7	349	528	1,051	1,603	1,789	1,506	1,349	911	638	591	496	746	11,557
608	DWS CUL WATER RE 8	708	917	1,968	1,957	2,220	2,265	2,016	1,731	1,178	989	869	1,112	17,930
609	DWS CUL WATER RE 9	709	774	1,262	2,070	2,064	1,817	1,853	1,589	1,441	797	658	785	15,819
610	DWS CUL WATER RE 10	1,640	1,779	1,662	2,955	3,254	3,152	2,031	1,447	1,477	946	771	1,046	22,160
611	DWS CUL WATER RE 11	433	248	287	482	450	554	418	320	488	394	389	490	4,953
612	DWS CUL WATER RE 12	988	1,030	1,230	1,842	1,937	1,327	954	811	544	344	288	349	11,644
613	DWS CUL WATER RE 13	21	156	360	968	1,172	1,072	581	245	118	45	42	43	4,823
615	DWS CUL WATER RE 15	588	609	575	947	1,021	1,058	1,134	810	1,037	736	574	821	9,910
616	DWS CUL WATER RE 16	30	82	311	742	769	740	502	230	50	39	31	84	3,610
617	DWS CUL WATER RE 17	0	206	245	728	800	797	585	737	457	0	0	0	4,555
618	DWS CUL WATER RE 18	110	61	392	455	466	419	320	217	292	87	79	102	3,000
619	DWS CUL WATER RE 19	16	21	25	138	198	180	136	114	79	16	14	19	956
624	DWS CUL WATER RE 24	587	695	2,260	2,293	1,952	2,012	1,318	1,273	1,627	1,416	1,470	1,585	18,488
625	DWS CUL WATER RE 25	68	371	842	1,731	2,205	2,449	507	127	354	74	67	55	8,850
626	DWS CUL WATER RE 26	403	941	1,698	2,276	2,887	1,927	1,646	1,187	1,115	593	417	347	15,437
627	DWS CUL WATER RE 27	176	667	3,495	4,964	5,277	5,876	4,080	2,035	1,224	163	157	132	28,246
645	DWS CUL WATER RE 45	135	152	132	138	138	26	16	4	11	87	117	156	1,112
702	DWS CUL WATER RE 2 SO.MT	0	34	159	242	181	149	59	50	20	0	0	0	894
703	DWS CUL WATER RE 3 SO.MT	24	241	631	851	823	494	369	506	438	9	7	10	4,403
704	DWS CUL WATER RE 4 SO.MT	0	44	302	475	404	319	198	134	2	0	0	0	1,878
705	DWS CUL WATER RE 5 SO.MT	44	18	117	578	799	587	378	274	98	40	36	32	3,001
706	DWS CUL WATER RE 6 SO.MT	2	401	675	926	654	484	398	181	152	0	0	4	3,877
709	DWS CUL WATER RE 9 SO.MT	4	42	400	696	737	759	539	254	237	116	3	4	3,791
720	DWS CUL WATER RE 20 SO.MT	0	237	549	977	1,102	754	485	127	8	0	0	0	4,239
745	DWS CUL WATER RE 45 SO.MT	0	0	689	2,368	2,568	3,392	399	4	2	0	0	0	9,422
748	DWS CUL WATER RE 48 SO.MT	42	62	1,069	2,226	2,452	2,622	1,367	415	302	56	48	54	10,715
803	DWS CUL WATER RE 3 UPPE SO.MT	0	128	850	973	980	1,055	547	220	237	0	0	0	4,990
805	DWS CUL WATER RE 5 UPPE SO.MT	0	22	687	1,050	882	910	728	153	146	0	0	0	4,578
810	DWS CUL WATER RE 10 UPPE SO.MT	214	390	1,103	1,710	1,759	1,721	1,595	878	788	519	182	275	11,134
1104	COTTAGE COMMUNITIES- FOURPLEX	56	86	280	495	584	481	219	139	176	48	38	87	2,689
1105	COTTAGE COMMUNITIES SIXPLEX	96	174	962	1,627	2,044	1,589	914	582	828	106	74	107	9,103
1106	COTTAGE COMMUNITIES SEVENPLEX	22	50	310	560	722	594	221	134	186	22	28	27	2,876
1107	COTTAGE COMMUNITIES EIGHT PLEX	27	45	223	397	400	132	140	98	108	18	20	32	1,640
1108	COTTAGE COMMUNITIES NINE PLEX	54	73	454	596	710	545	292	203	290	49	37	42	3,345
1701	SOUTH MOUNTAIN RESIDENTS	4,481	6,885	17,741	35,692	39,606	36,771	28,521	11,543	8,572	5,104	4,375	5,874	205,165
4101	COTTAGE COMMUNITIES /RATE 101	25	27	28	33	26	33	34	61	99	73	25	31	495
SUM:		57,579	77,600	171,699	295,327	316,525	299,164	218,926	126,851	101,337	60,181	53,532	68,397	1,847,118

**TABLE A.23
2015 AVERAGE MONTHLY WATER USAGE (1,000 GALLONS)**

Rate Table	Title	Dec	Nov	Oct	Sept	August	July	June	May	April	March	Feb	Jan	2015 Average
101	DWS CUL WATER/ALL OTHR RESIDEN	6	8	14	23	24	23	18	11	10	6	6	7	13
102	DWS CUL WATER - LIFELINE	2	13	2	2	2	3	3	2	2	2	3	3	3
103	DWS CUL WATER - TRIPLEX	3	4	4	6	6	6	4	4	4	4	4	6	5
104	DWS CUL WATER - FOURPLEX	7	7	6	11	11	11	8	5	3	4	3	4	7
105	DWS CUL WATER - SIXPLEX	3	3	3	4	4	3	4	3	3	3	3	3	3
106	DWS CUL WATER - DUPLEX	3	3	4	8	8	8	7	4	4	4	4	5	5
107	WILLOW BEND CONDOS 57 UNITS	5	6	5	6	5	5	6	6	5	4	4	6	5
108	DWS CULWATER - PINNACLE APT 16 U	3	3	3	3	3	3	3	3	3	3	3	3	3
109	DWS CULWATER - FIVEPLEX	3	4	5	11	11	11	8	4	3	3	3	4	6
110	DWS CUL WATER - 1MTR/2HOMES	1	1	1	1	1	1	1	1	1	1	2	1	1
111	DWS CUL WATER - REFUSED PI	6	8	25	50	55	53	34	16	12	6	6	7	23
118	COMPOUND BYPASS RE 5	1	2	50	69	63	66	36	19	10	2	2	1	27
119	COMPOUND BYPASS RE 10	2	22	20	16	10	7	6	5	3	3	2	2	8
120	DWS CULNRY COVE @ BEAR CAYNON	5	9	43	82	90	88	52	23	18	6	6	8	36
121	DWS CMPND/2ND/BYPASS METERS	0	0	0	0	0	0	0	0	0	0	0	0	0
122	DWS CUL WATER EIGHT PLEX WITH	3	4	2	3	3	3	5	2	2	3	3	4	3
124	HERITAGE CONDOMINIUMS 63 UNITS	4	4	8	20	25	24	17	4	3	3	3	5	10
129	VILLAGE ON THE GREEN 99 UNITS	3	4	12	37	35	41	25	14	3	3	2	4	15
130	PRESSURE ZONE 5 (UPPER SO MTN)	6	9	25	47	52	48	38	19	16	10	5	7	23
132	PRESSURE ZONE UPPER SO MT 5 PLEX	3	7	26	39	40	31	22	13	7	3	3	4	16
133	PRESSURE ZONE UPPER SO MT 6PLEX	3	8	22	33	34	26	20	9	5	3	3	6	14
134	PRESSURE ZONE UPPER SO MT 8PLEX	2	5	26	29	30	23	20	11	5	2	2	3	13
135	PRESSURE ZONE UPPER SO MT 3 PLEX	5	7	36	59	56	46	40	29	6	5	4	6	25
136	PRESSURE ZONE UPPER SO MT 4 PLEX	4	7	16	41	38	33	25	17	8	6	7	7	17
137	PRESSURE ZONE UPPER SO MT 7 PLEX	4	7	16	30	25	35	21	6	5	4	3	4	13
138	PRESSURE ZONE UPPER SO MT 9 PLEX	1	3	16	20	21	15	12	8	3	1	1	2	9
140	LITTLE VALLEY ON SO MOUNTAIN	4	8	25	42	45	42	34	16	9	5	4	5	20
150	DWS CUL WATER -12PLEX	3	3	3	3	2	2	3	2	2	3	3	4	3
160	WHOLESALE WATER	0	0	2	0	129	196	0	109	0	0	0	0	36
199	DETECTOR CHECK METER	0	0	0	0	1	0	0	0	1	0	0	0	0
602	DWS CUL WATER RE 2	4	10	30	40	39	39	35	33	18	7	5	5	22
603	DWS CUL WATER RE 3	7	8	33	52	57	53	36	29	17	5	5	6	26
604	DWS CUL WATER RE 4	9	14	31	48	49	45	34	29	28	14	12	14	27
605	DWS CUL WATER RE 5	7	8	25	37	34	35	30	25	15	6	6	8	20
606	DWS CUL WATER RE 6	5	8	17	39	47	38	29	21	8	6	6	6	19
607	DWS CUL WATER RE 7	6	9	17	29	32	27	24	22	15	14	12	18	19
608	DWS CUL WATER RE 8	10	13	27	27	31	31	28	24	16	14	12	14	21
609	DWS CUL WATER RE 9	11	12	20	33	33	29	29	25	23	13	10	12	21
610	DWS CUL WATER RE 10	21	22	21	37	41	39	25	18	18	12	10	13	23
611	DWS CUL WATER RE 11	20	11	13	22	20	25	19	15	22	18	18	22	19
612	DWS CUL WATER RE 12	14	14	17	26	27	18	20	23	15	10	8	10	17
613	DWS CUL WATER RE 13	1	6	14	37	45	41	22	9	9	3	3	3	16
615	DWS CUL WATER RE 15	10	10	10	16	17	18	19	14	17	12	10	14	14
616	DWS CUL WATER RE 16	2	5	19	46	48	46	31	14	3	2	2	5	19
617	DWS CUL WATER RE 17	0	12	14	43	47	47	34	43	27	0	0	0	22
618	DWS CUL WATER RE 18	6	3	22	25	26	23	18	12	16	5	4	6	14
619	DWS CUL WATER RE 19	1	1	1	7	10	9	7	6	4	1	1	1	4
624	DWS CUL WATER RE 24	12	14	47	48	41	42	27	27	34	30	31	33	32
625	DWS CUL WATER RE 25	1	7	17	35	44	49	10	3	7	1	1	1	15
626	DWS CUL WATER RE 26	8	18	33	44	56	37	32	23	21	11	8	7	25
627	DWS CUL WATER RE 27	2	8	43	61	65	73	50	25	15	2	2	2	29
645	DWS CUL WATER RE 45	3	3	3	3	3	1	0	0	0	2	0	3	2
702	DWS CUL WATER RE 2 SO.MT	0	17	80	121	91	75	30	25	10	0	0	0	37
703	DWS CUL WATER RE 3 SO.MT	2	16	42	57	55	33	25	34	29	1	0	1	24
704	DWS CUL WATER RE 4 SO.MT	0	6	38	59	51	40	25	17	0	0	0	0	20
705	DWS CUL WATER RE 5 SO.MT	4	2	12	58	80	59	38	27	10	4	4	3	25
706	DWS CUL WATER RE 6 SO.MT	0	33	56	77	55	81	66	30	25	0	0	1	35
709	DWS CUL WATER RE 9 SO.MT	0	5	44	77	82	84	60	28	26	13	0	0	35
720	DWS CUL WATER RE 20 SO.MT	0	12	27	49	55	38	24	6	0	0	0	0	18
745	DWS CUL WATER RE 45 SO.MT	0	0	15	53	57	75	9	0	0	0	0	0	17
748	DWS CUL WATER RE 48 SO.MT	1	1	22	46	51	55	28	9	6	1	1	1	19
803	DWS CUL WATER RE 3 UPPE SO.MT	0	11	71	81	82	117	61	24	26	0	0	0	39
805	DWS CUL WATER RE 5 UPPE SO.MT	0	4	137	210	176	182	146	31	29	0	0	0	76
810	DWS CUL WATER RE 10 UPPE SO.MT	11	20	55	86	88	86	80	44	39	26	9	14	46
1104	COTTAGE COMMUNITIES- FOURPLEX	5	7	23	41	49	40	18	12	15	4	3	7	19
1105	COTTAGE COMMUNITIES SIXPLEX	3	6	32	54	68	53	30	19	28	4	2	4	25
1106	COTTAGE COMMUNITIES SEVENPLEX	2	4	22	40	52	42	16	10	13	2	2	2	17
1107	COTTAGE COMMUNITIES EIGHT PLEX	3	6	28	50	50	17	18	12	14	2	3	4	17
1108	COTTAGE COMMUNITIES NINE PLEX	6	8	50	66	79	61	32	23	32	5	4	5	31
1701	SOUTH MOUNTAIN RESIDENTS	5	8	19	39	43	40	31	13	9	6	5	6	19
4101	COTTAGE COMMUNITIES /RATE 101	8	9	9	11	9	11	11	20	33	24	8	10	14
AVERAGE:		4	8	24	38	41	39	25	17	12	5	4	5	19

Table C. 4 - Users

Month	Dec	Nov	Oct	Sept	August	July	June	May	April	March	Feb	Jan	Yearly Total
Homes	6,531	6,538	6,550	6,536	6,536	6,558	6,541	6,518	6,501	6,500	6,473	6,493	6,523
Multiplexes	796	794	793	792	786	786	780	777	778	781	780	771	785
Compound Meters	2	2	2	2	2	2	2	2	2	2	2	2	2
Commercial	163	163	165	161	162	160	157	153	153	153	151	152	158

Table C. 5 - Water usage by month

Month	Dec	Nov	Oct	Sept	August	July	June	May	April	March	Feb	Jan	Yearly Total
Homes	35,464	45,579	95,022	161,238	171,253	162,509	119,822	71,252	58,672	34,958	33,020	42,063	1,030,852
Multiplexes	8,182	11,337	27,600	46,717	50,723	47,121	35,150	19,905	15,553	9,858	7,146	9,421	288,713
CMPND Meters	538	666	1,422	3,957	3,768	4,340	2,760	1,668	597	516	457	678	21,367
Commercial	8,914	13,133	29,914	47,723	51,175	48,423	32,673	22,483	17,943	9,745	8,534	10,361	301,021

Table C. 6 - Amount billed per month

Month	Dec	Nov	Oct	Sept	August	July	June	May	April	March	Feb	Jan	Yearly Total
Homes	\$ 156,799	\$ 171,233	\$ 262,865	\$409,715	\$437,127	\$415,316	\$309,248	\$216,286	\$193,991	\$154,169	\$151,009	\$165,140	\$ 3,042,898
Multiplexes	\$ 43,448	\$ 48,196	\$ 80,564	\$125,593	\$134,857	\$127,345	\$ 96,331	\$ 63,723	\$ 58,242	\$ 48,233	\$ 40,831	\$ 29,664	\$ 897,027
CMPND Meters	\$ 2,845	\$ 3,018	\$ 4,272	\$ 10,164	\$ 9,672	\$ 11,339	\$ 7,060	\$ 4,775	\$ 2,927	\$ 2,818	\$ 2,737	\$ 3,039	\$ 64,666
Commercial	\$ 37,184	\$ 42,800	\$ 73,409	\$110,753	\$119,386	\$114,155	\$ 78,112	\$ 57,832	\$ 49,918	\$ 36,521	\$ 34,749	\$ 37,995	\$ 792,815

Table C. 7 - Anticipated Water Use

Year	2016	2017	2018
Usage (1000 gal)	2,098,607	2,130,052	2,161,904
Base Usage (1000 gal)	876,657	889,792	903,098
Overage Usage (1000 gal)	1,221,950	1,240,260	1,258,806

Table C. 8 - Projected Billing

Year	2016	2017	2018	
Connections	10,278	10,432	10,588	
Base Sales	\$2,308,742	\$2,343,373	\$2,497,450	42%
Overage Sales	\$3,218,098	\$3,266,369	\$3,481,133	58%

Note 6 - Property Installment Sale

During the year ended December 31, 2014, the Company sold donated land, which was carried at a zero cost basis. During the year ended December 31, 2014, the Company received the first installment of \$1,463,792 in cash proceeds, which was recorded as a gain on sale of property. During the year ended December 31, 2015, the Company received the second and final installment of \$1,020,000 in cash proceeds and \$480,000 in water rights. The total payment of \$1,500,000 was recorded as a gain on sale of property.

Note 7 - Notes Payable

Notes payable at December 31, 2015 and 2014 consists of the following:

	2015	2014
State of Utah, Division of Finance, Water Resources Construction Loan, due in annual principal and interest payments of \$572,997 through 2018, fixed interest rate at 2.3%, secured by assets constructed and water rights.	\$ 1,645,477	\$ 1,645,477
Financial Institution Term Loan, due in monthly principal payments of \$47,515 and monthly interest payments at a variable rate of 2.5% plus the one month LIBOR (4.95% at December 31, 2015) through 2028, secured by assets constructed and water rights.	7,127,428	7,697,608
	8,772,905	9,343,085
Less current maturities	1,105,180	1,105,180
Long-term maturities	\$ 7,667,725	\$ 8,237,905

Future maturities of notes payable are as follows:

Years Ending December 31,	Amount
2016	\$ 1,105,180
2017	1,118,180
2018	1,132,627
2019	570,180
2020	570,180
Thereafter	4,276,558
	\$ 8,772,905

The Company has various operational and financial covenants related to these notes, which it is currently in compliance with.

BALANCE SHEET
(Assets and Other Debits)

(a)	(b)	(c)	(d)
Line No.	Description	NARUC Account Number	Increase or (Decrease) (c - b)
1	ASSETS		
2	<u>Current Assets:</u>		
3	Cash	131	\$ 684,279.00 \$ 1,807,453.00 \$ 1,123,174.00
4	Special Deposits	132	\$ 0.00 \$ 0.00 \$ 0.00
5	Deposits - Reserves for Capital Improvements	234.a	\$ 0.00 \$ 0.00 \$ 0.00
6	Working Funds	134	\$ 0.00 \$ 0.00 \$ 0.00
7	Temporary Cash Investments	135	\$ 0.00 \$ 0.00 \$ 0.00
8	Accounts Receivable	141	\$ 473,388.00 \$ 467,059.00 \$ (6,329.00)
9	Other Accounts Receivable	142	\$ 43,039.00 \$ 25,026.00 \$ (18,013.00)
10	Accumulated Provision for Uncollectible Accounts (CREDIT)	143	\$ 0.00 \$ 0.00 \$ 0.00
11	Notes Receivable	144	\$ 0.00 \$ 0.00 \$ 0.00
12	Accounts Receivable from Associated Companies	145	\$ 0.00 \$ 0.00 \$ 0.00
13	Notes Receivable from Associated Companies	146	\$ 0.00 \$ 0.00 \$ 0.00
14	Plant Material and Supplies	151	\$ 258,611.00 \$ 260,463.00 \$ 1,852.00
15	Merchandise	152	\$ 0.00 \$ 0.00 \$ 0.00
16	Other Material and Supplies	153	\$ 0.00 \$ 0.00 \$ 0.00
17	Stores Expense	161	\$ 0.00 \$ 0.00 \$ 0.00
18	Prepayment	162	\$ 0.00 \$ 0.00 \$ 0.00
19	Accrued Interest and Dividends Receivable	171	\$ 0.00 \$ 0.00 \$ 0.00
20	Rents Receivable	172	\$ 0.00 \$ 0.00 \$ 0.00
21	Accrued Utility Revenues	173	\$ 0.00 \$ 0.00 \$ 0.00
22	Miscellaneous Current and Accrued Assets	174	\$ 0.00 \$ 0.00 \$ 0.00
23	TOTAL CURRENT ASSETS:		\$ 1,459,317.00 \$ 2,560,001.00 \$ 1,100,684.00
24			
25	<u>Long-Term Assets:</u>		
26	Utility Plant in Service	101	\$ 77,551,245.00 \$ 78,493,539.00 \$ 942,294.00
27	LESS: Accumulated Depreciation	108	\$ (19,757,852.00) \$ (21,742,559.00) \$ (1,984,707.00)
28	LESS: Accumulated Amortization	110	\$ 0.00 \$ 0.00 \$ 0.00
29	Contribution in Aid of Construction	271	\$ (20,150,440.00) \$ (20,890,634.00) \$ (740,194.00)
30	Accumulated Amortization of CIAC	272	\$ 4,529,550.00 \$ 4,947,363.00 \$ 417,813.00
31	Utility Plant Leased to Others	102	\$ 0.00 \$ 0.00 \$ 0.00
32	Property Held for Future Use	103	\$ 0.00 \$ 0.00 \$ 0.00
33	Construction Work in Progress	105	\$ 126,759.00 \$ 0.00 \$ (126,759.00)
34	Completed Construction Not Classified	106	\$ 0.00 \$ 0.00 \$ 0.00
35	Utility Plant Acquisition Adjustments	114	\$ 0.00 \$ 0.00 \$ 0.00
36	LESS: Accum. Amort. Utility Plant Acquisition Adjustments	115	\$ 0.00 \$ 0.00 \$ 0.00
37	Other Utility Plant Adjustments	116	\$ 0.00 \$ 0.00 \$ 0.00
38	TOTAL LONG-TERM ASSETS:		\$ 42,299,262.00 \$ 40,807,709.00 \$ (1,491,553.00)
39			
40	<u>Other Property and Investments:</u>		
41	Non-Utility Property	121	\$ 0.00 \$ 0.00 \$ 0.00
42	LESS: Accumulated Depreciation on Non-Utility Property	122	\$ 0.00 \$ 0.00 \$ 0.00
43	Investment in Associated Companies	123	\$ 0.00 \$ 0.00 \$ 0.00
44	Utility Investments	124	\$ 570,200.00 \$ 570,200.00 \$ 0.00
45	Other Investments	125	\$ 5,015,154.00 \$ 4,230,914.00 \$ (784,240.00)
46	Sinking Funds	126	\$ 0.00 \$ 0.00 \$ 0.00
47	Other Special Funds	127	\$ 0.00 \$ 0.00 \$ 0.00
48	Organization	301	\$ 0.00 \$ 0.00 \$ 0.00
49	Franchises	302	\$ 0.00 \$ 0.00 \$ 0.00
50	Land and Land Rights and Water Rights	303	\$ 1,392,817.00 \$ 1,872,817.00 \$ 480,000.00
51	TOTAL OTHER PROPERTY and INVESTMENTS:		\$ 6,978,171.00 \$ 6,673,931.00 \$ (304,240.00)
52			
53	<u>Deferred Debits:</u>		
54	Unamortized Debt Discount and Expense	181	\$ 0.00 \$ 0.00 \$ 0.00
55	Extraordinary Property Losses	182	\$ 0.00 \$ 0.00 \$ 0.00
56	Preliminary Survey and Investigation Charges	183	\$ 0.00 \$ 0.00 \$ 0.00
57	Clearing Accounts	184	\$ 0.00 \$ 0.00 \$ 0.00
58	Temporary Facilities	185	\$ 0.00 \$ 0.00 \$ 0.00
59	Miscellaneous Deferred Debits	186	\$ 0.00 \$ 0.00 \$ 0.00
60	Research and Development Expenditures	187	\$ 0.00 \$ 0.00 \$ 0.00
61	Accumulated Deferred Income Taxes	190	\$ 0.00 \$ 0.00 \$ 0.00
62	TOTAL DEFERRED DEBITS:		\$ 0.00 \$ 0.00 \$ 0.00
63	TOTAL ASSETS:		\$ 50,736,750.00 \$ 50,041,641.00 \$ (695,109.00)

BALANCE SHEET
(Liabilities and Other Credits)

(a)	(b)	(c)	(d)		
Line No.	Description	NARUC Account Number	Previous Year's Dollar Amounts	Report Year's Dollar Amounts	Increase or (Decrease)
64	LIABILITIES				
65	<u>Current Liabilities:</u>				
66	Accounts Payable	231	\$ 855,123.00	\$ 368,810.00	\$ (486,313.00)
67	Notes Payable (Current)	232	\$ 9,343,085.00	\$ 8,772,905.00	\$ (570,180.00)
68	Accounts Payable to Associated Companies	233	\$ 0.00	\$ 0.00	\$ 0.00
69	Deposots - Reserves for Capital Improvements	234	\$ 0.00	\$ 0.00	\$ 0.00
70	Customer Deposits	235	\$ 530,470.00	\$ 622,564.00	\$ 92,094.00
71	Income Taxes Payable	236	\$ 0.00	\$ 0.00	\$ 0.00
72	Interest Payable	237	\$ 0.00	\$ 0.00	\$ 0.00
73	Accrued Dividends	238	\$ 0.00	\$ 0.00	\$ 0.00
74	Matured Long-Term Debt	239	\$ 0.00	\$ 0.00	\$ 0.00
75	Matured Interest	240	\$ 0.00	\$ 0.00	\$ 0.00
76	Miscellaneous Current and Accrued Liabilities	241	\$ 230,903.00	\$ 174,763.00	\$ (56,140.00)
77	TOTAL CURRENT LIABILITIES:		\$ 10,959,581.00	\$ 9,939,042.00	\$ (1,020,539.00)
78					
79	<u>Long-Term Liabilities:</u>				
80	Bonds	221	\$ 0.00	\$ 0.00	\$ 0.00
81	Reacquired Bonds	222	\$ 0.00	\$ 0.00	\$ 0.00
82	Advances from Associated Companies	223	\$ 0.00	\$ 0.00	\$ 0.00
83	Notes Payable (Long-Term)	224	\$ 0.00	\$ 0.00	\$ 0.00
84	TOTAL LONG-TERM LIABILITIES:		\$ 0.00	\$ 0.00	\$ 0.00
85					
86	<u>Deferred Credits:</u>				
87	Unamortized Premium on Debt	251	\$ 0.00	\$ 0.00	\$ 0.00
88	Advances for Construction	252	\$ 0.00	\$ 0.00	\$ 0.00
89	Other Deferred Credits	253	\$ 0.00	\$ 0.00	\$ 0.00
90	Accumulated Deferred Investment Tax Credits	255	\$ 0.00	\$ 0.00	\$ 0.00
91	TOTAL DEFERRED CREDITS:		\$ 0.00	\$ 0.00	\$ 0.00
92					
93	<u>Operating Reserves:</u>				
94	Property Insurance Reserve	261	\$ 0.00	\$ 0.00	\$ 0.00
95	Injuries and Damages Reserve	262	\$ 0.00	\$ 0.00	\$ 0.00
96	Pensions and Benefits Reserve	263	\$ 0.00	\$ 0.00	\$ 0.00
97	Miscellaneous Operating Reserves	265	\$ 0.00	\$ 0.00	\$ 0.00
98	TOTAL OPERATING RESERVES:		\$ 0.00	\$ 0.00	\$ 0.00
99					
100	<u>Accumulated Deferred Income Taxes:</u>				
101	Accumulated Deferred Income Taxes - Accelerated Amortization	281	\$ 0.00	\$ 0.00	\$ 0.00
102	Accumulated Deferred Income Taxes - Liberalized Depreciation	282	\$ 0.00	\$ 0.00	\$ 0.00
103	Accumulated Deferred Income Taxes - Other	283	\$ 0.00	\$ 0.00	\$ 0.00
104	TOTAL ACCUMULATED DEFERRED INCOME TAXES:		\$ 0.00	\$ 0.00	\$ 0.00
105	TOTAL LIABILITIES:		\$ 10,959,581.00	\$ 9,939,042.00	\$ (1,020,539.00)
106					
107					
108	STOCKHOLDERS' EQUITY				
109	<u>Contributed Capital:</u>				
110	Common Stock Issued	201	\$ 483,080.00	\$ 488,530.00	\$ 5,450.00
111	Common Stock Subscribed	202	\$ (2,070.00)	\$ (9,950.00)	\$ (7,880.00)
112	Common Stock Liability for Conversion	203	\$ 0.00	\$ 0.00	\$ 0.00
113	Preferred Stock Issued	204	\$ 0.00	\$ 0.00	\$ 0.00
114	Preferred Stock Subscribed	205	\$ 0.00	\$ 0.00	\$ 0.00
115	Preferred Stock Liability for Conversion	206	\$ 0.00	\$ 0.00	\$ 0.00
116	Premium on Capital Stock	207	\$ 183,269.00	\$ 183,269.00	\$ 0.00
117	Reduction in Par on Stated Value of Capital Stock	209	\$ 0.00	\$ 0.00	\$ 0.00
118	Gain on Resale or Cancellation of Reacquired Capital Stock	210	\$ 0.00	\$ 0.00	\$ 0.00
119	Other Paid-In Capital	211	\$ (1,566,065.00)	\$ (1,505,253.00)	\$ 60,812.00
120	Discount on Capital Stock	212	\$ 0.00	\$ 0.00	\$ 0.00
121	Capital Stock Expense	213	\$ 0.00	\$ 0.00	\$ 0.00
122	Appropriated Retained Earnings	214	\$ 0.00	\$ 0.00	\$ 0.00
123	Unappropriated Retained Earnings	215	\$ 40,678,955.00	\$ 40,946,003.00	\$ 267,048.00
124	Reacquired Capital Stock	216	\$ 0.00	\$ 0.00	\$ 0.00
125	Proprietary Capital (for proprietorships and partnerships)	218	\$ 0.00	\$ 0.00	\$ 0.00
126	TOTAL STOCKHOLDERS' EQUITY:		\$ 39,777,169.00	\$ 40,102,599.00	\$ 325,430.00
127	TOTAL LIABILITIES and STOCKHOLDERS' EQUITY:		\$ 50,736,750.00	\$ 50,041,641.00	\$ (695,109.00)

INCOME STATEMENT

(Profit and Loss)

(a)	(b)	(c)	(d)		
Line No.	Description	NARUC Account Number	Previous Year's Dollar Amounts	Report Year's Dollar Amounts	Increase or (Decrease) (c - b)
1	UTILITY OPERATING REVENUES				
2	<u>Operating Revenues:</u>				
3	Unmetered Water Customers	460	\$ 0.00	\$ 0.00	\$ 0.00
4	Metered Water Customers	461	\$ 5,350,225.00	\$ 5,431,521.00	\$ 81,296.00
5	Fire Protection Customers	462	\$ 10,466.00	\$ 11,113.00	\$ 647.00
6	Other Sales to Public Authorities	464	\$ 0.00	\$ 0.00	\$ 0.00
7	Irrigation Customers	465	\$ 1,285,062.00	\$ 1,165,078.00	\$ (119,984.00)
8	Sales for Resale Customers	466	\$ 0.00	\$ 0.00	\$ 0.00
9	Interdepartmental Sales	467	\$ 0.00	\$ 0.00	\$ 0.00
10	Total Operating Revenues:		\$ 6,645,753.00	\$ 6,607,712.00	\$ (38,041.00)
11					
12	<u>Cost of Goods Sold:</u>				
13	Salaries & Wages - Office Employees	601	\$ 1,428,398.00	\$ 1,559,546.00	\$ 131,148.00
14	Salaries & Wages - Officers, Directors & Stockholders	603	\$ 66,438.00	\$ 66,855.00	\$ 417.00
15	Employee Pensions & Benefits	604	\$ 365,582.00	\$ 516,802.00	\$ 151,220.00
16	Purchased Water	610	\$ 2,916,215.00	\$ 2,588,603.00	\$ (327,612.00)
17	Purchased Power	615	\$ 0.00	\$ 0.00	\$ 0.00
18	Fuel for Power Production	616	\$ 0.00	\$ 0.00	\$ 0.00
19	Chemicals	618	\$ 48,117.00	\$ 75,627.00	\$ 27,510.00
20	Materials and Supplies	620	\$ 174,210.00	\$ 189,631.00	\$ 15,421.00
21	Contractual Services - Engineering	631	\$ 156,972.00	\$ 174,502.00	\$ 17,530.00
22	Contractual Services - Accounting	632	\$ 30,525.00	\$ 31,825.00	\$ 1,300.00
23	Contractual Services - Legal	633	\$ 65,457.00	\$ 83,042.00	\$ 17,585.00
24	Contractual Services - Management Fees	634	\$ 0.00	\$ 0.00	\$ 0.00
25	Contractual Services - Testing & Lab Fees	635a	\$ 103,455.00	\$ 94,374.00	\$ (9,081.00)
26	Contractual Services - Water Sampling	635b	\$ 44,567.00	\$ 40,110.00	\$ (4,457.00)
27	Contractual Services - Water System Maintenance	636	\$ 0.00	\$ 0.00	\$ 0.00
28	Contractual Services - Water System Repairs	637	\$ 0.00	\$ 0.00	\$ 0.00
29	Contractual Services - Connection Expenses	638	\$ 0.00	\$ 0.00	\$ 0.00
30	Contractual Services - Billing	639	\$ 0.00	\$ 0.00	\$ 0.00
31	Contractual Services - Other	640	\$ 0.00	\$ 0.00	\$ 0.00
32	Rental	641	\$ 6,475.00	\$ 5,848.00	\$ (627.00)
33	Rental of Equipment	642	\$ 20,870.00	\$ 19,426.00	\$ (1,444.00)
34	Transportation Expense	650	\$ 105,908.00	\$ 114,713.00	\$ 8,805.00
35	Insurance - Vehicle	656	\$ 0.00	\$ 0.00	\$ 0.00
36	Insurance - General Liability	657	\$ 0.00	\$ 0.00	\$ 0.00
37	Insurance - Worker's Compensation	658	\$ 0.00	\$ 0.00	\$ 0.00
38	Insurance - Other	659	\$ 0.00	\$ 0.00	\$ 0.00
39	Advertising Expenses	660	\$ 6,824.00	\$ 7,111.00	\$ 287.00
40	Regulatory Commission Expense - Amortization of Rate Case Expenses	666	\$ 0.00	\$ 0.00	\$ 0.00
41	Regulatory Commission Expense - Other	667	\$ 17,041.00	\$ 16,931.00	\$ (110.00)
42	Water Resource Conservation Expense	668	\$ 9,737.00	\$ 8,041.00	\$ (1,696.00)
43	Bad Debt Expense	670	\$ 2,633.00	\$ 5,956.00	\$ 3,323.00
44	Miscellaneous Expense	675	\$ 72,601.00	\$ 85,079.00	\$ 12,478.00
45	Total Cost of Good Sold:		\$ 5,642,025.00	\$ 5,684,022.00	\$ 41,997.00
46	GROSS PROFIT / (LOSS):		\$ 1,003,728.00	\$ 923,690.00	\$ (80,038.00)

INCOME STATEMENT

(Profit and Loss)

(a)	(b)	(c)	(d)		
Line No.	Description	NARUC Account Number	Previous Year's Dollar Amounts	Report Year's Dollar Amounts	Increase or (Decrease) (c - b)
47	OTHER EXPENSES AND INCOME				
48	<u>Other Expenses:</u>				
49	Depreciation Expenses	403	\$ 1,797,362.00	\$ 1,984,707.00	\$ 187,345.00
50	Amortization of CIAC Expense	403a	\$ (403,009.00)	\$ (417,813.00)	\$ (14,804.00)
51	Amortization of Utility Plant Acquisition Adjustments	407	\$ 0.00	\$ 0.00	\$ 0.00
52	Taxes Other Than Income	408	\$ 74,880.00	\$ 73,264.00	\$ (1,616.00)
53	Income Taxes	409	\$ 0.00	\$ 0.00	\$ 0.00
54	Provision For Deferred Income Taxes	410	\$ 0.00	\$ 0.00	\$ 0.00
55	Provision For Deferred Income Taxes- (CREDIT)	411	\$ 0.00	\$ 0.00	\$ 0.00
56	Investment Tax Credits	412	\$ 0.00	\$ 0.00	\$ 0.00
57	Allowance for Funds Used During Construction	420	\$ 0.00	\$ 0.00	\$ 0.00
58	Miscellaneous Non-Utility Expenses	426	\$ 0.00	\$ 0.00	\$ 0.00
59	Interest Expense	427	\$ 324,483.00	\$ 426,282.00	\$ 101,799.00
60	Balance Transferred From Income	435	\$ 0.00	\$ 0.00	\$ 0.00
61	Appropriations of Retained Earnings	436	\$ 0.00	\$ 0.00	\$ 0.00
62	Dividends Declared - Preferred Stock	437	\$ 0.00	\$ 0.00	\$ 0.00
63	Dividends Declared - Common Stock	438	\$ 0.00	\$ 0.00	\$ 0.00
64	Adjustments to Retained Earnings	439	\$ 0.00	\$ 0.00	\$ 0.00
65	Total Other Expenses:		\$ 1,793,716.00	\$ 2,066,440.00	\$ 272,724.00
66					
67	<u>Other Income:</u>				
68	Income From Utility Plant Leased to Others	413	\$ 0.00	\$ 0.00	\$ 0.00
69	Gains (Losses) From Disposition of Utility Property	414	\$ 1,460,824.00	\$ 1,500,000.00	\$ 39,176.00
70	Interest and Dividend Income	419	\$ 92,143.00	\$ 61,865.00	\$ (30,278.00)
71	Non-Utility Income	421	\$ 585,703.00	\$ 624,411.00	\$ 38,708.00
72	Guaranteed Revenues	469	\$ 0.00	\$ 0.00	\$ 0.00
73	Forfeited Discounts	470	\$ 0.00	\$ 0.00	\$ 0.00
74	Miscellaneous Service Revenue	471	\$ 0.00	\$ 0.00	\$ 0.00
75	Rents From Water Property	472	\$ 0.00	\$ 0.00	\$ 0.00
76	Interdepartmental Rents	473	\$ 0.00	\$ 0.00	\$ 0.00
77	Other Miscellaneous Water Revenues	474	\$ 815,169.00	\$ 462,707.00	\$ (352,462.00)
78	Total Other Income:		\$ 2,953,839.00	\$ 2,648,983.00	\$ (304,856.00)
79					
80					
81	Total Revenue (income)		\$ 9,599,592.00	\$ 9,256,695.00	\$ (342,897.00)
82	Total Expenses		\$ 7,435,741.00	\$ 7,750,462.00	\$ 314,721.00
83	NET PROFIT / (LOSS):		\$ 2,163,851.00	\$ 1,506,233.00	\$ (657,618.00)

EIDE BAILLY LLP
5 TRIAD CENTER STE 600
SALT LAKE CITY, UT 84180-1128

WATER PRO, INC.
P O BOX 156
DRAPER, UT 84020



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CLIENT'S COPY



CPAs & BUSINESS ADVISORS

February 25, 2015

Water Pro, Inc.
P O Box 156
Draper, UT 84020

Water Pro, Inc.:

Enclosed are your 2014 corporate tax returns, as follows:

2014 U.S. Corporation Income Tax Return

2014 Utah Corporation Income Tax Return

Instructions for filing the above forms are furnished for easy reference.

We prepared the returns from information you furnished us without verification. Upon examination of the returns by taxing authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such an examination.

Many states require legal entities to register with them in order to do business in their state. Please remember to keep your registration active and current for each state that you have business activities. It is also important that the corporate minutes be up to date and include such items as officers' salaries, election of officers and directors, and other important corporate decisions. If you need help in determining what documentation to include in your corporate minutes, please contact our office.

Please advise us if the Internal Revenue Service and/or State Tax Commission makes written or verbal inquiries regarding this return. Internal Revenue Service and/or State Tax Commission correspondence is occasionally incomplete and/or inaccurate. We will assist you in resolving any tax matter upon your request.

Your copy should be retained for your files.

www.eidebailly.com

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax returns.

Sincerely,

Allen C. Jones, CPA

2014 TAX RETURN FILING INSTRUCTIONS

U.S. CORPORATION INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2014

Prepared for	Water Pro, Inc. P O Box 156 Draper, UT 84020
Prepared by	Eide Bailly LLP 5 Triad Center Ste 600 Salt Lake City, UT 84180-1128
To be signed and dated by	The appropriate corporate officer(s).
Amount of tax	Total tax \$ 0 Less: payments and credits \$ 0 Plus: other amount \$ 0 Plus: interest and penalties \$ 0 No pmt required \$
Overpayment	Credited to your estimated tax \$ 0 Other amount \$ 0 Refunded to you \$ 0
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	This return has qualified for electronic filing. After you have reviewed the return for accuracy, please sign, date and return Form 8879-C to our office immediately. Your return will then be electronically filed.
Return must be mailed on or before	Not applicable
Special Instructions	

CORPORATION
Two-Year Comparison

2014

Name WATER PRO, INC.	Employer Identification Number 87-0572672
--------------------------------	-----------------------------------------------------

Description	Prior Year	Current Year	Increase (Decrease)
INCOME:			
GROSS RECEIPTS OR SALES LESS RETURNS AND ALLOWANCES	4,697,793.	4,941,509.	243,716.
COST OF GOODS SOLD	2,033,116.	1,897,926.	-135,190.
GROSS PROFITS	2,664,677.	3,043,583.	378,906.
INTEREST	67,512.	91,850.	24,338.
NET GAIN (LOSS) FROM FORM 4797	0.	-725.	-725.
OTHER INCOME	46,371.	34,607.	-11,764.
TOTAL INCOME	2,778,560.	3,169,315.	390,755.
DEDUCTIONS:			
SALARIES AND WAGES LESS EMPLOYMENT CREDITS	1,166,370.	1,310,688.	144,318.
REPAIRS AND MAINTENANCE	358,298.	394,929.	36,631.
RENTS	24,479.	27,345.	2,866.
TAXES AND LICENSES	164,364.	194,152.	29,788.
INTEREST	60.	0.	-60.
DEPRECIATION	64,148.	31,853.	-32,295.
ADVERTISING	16,353.	6,824.	-9,529.
PENSION, PROFIT-SHARING, ETC., PLANS	48,326.	57,052.	8,726.
OTHER DEDUCTIONS	1,393,814.	1,398,253.	4,439.
TOTAL DEDUCTIONS	3,236,212.	3,421,096.	184,884.
TAXABLE INCOME:			
TAXABLE INCOME BEFORE NOL DEDUCTION AND SPECIAL DEDUCTIONS	-457,652.	-251,781.	205,871.
TAXABLE INCOME	-457,652.	-251,781.	205,871.
TAX COMPUTATION:			
TAX BEFORE CREDITS	0.	0.	0.
TAX AFTER CREDITS	0.	0.	0.
TOTAL TAX	0.	0.	0.
PAYMENTS AND CREDITS:			
ESTIMATED TAX PAYMENTS	92,240.	0.	-92,240.
TOTAL PAYMENTS AND CREDITS	92,240.	0.	-92,240.
BALANCE DUE OR REFUND:			

CORPORATION
Two-Year Comparison

2014

Name WATER PRO, INC.	Employer Identification Number 87-0572672
--------------------------------	-----------------------------------------------------

Description	Prior Year	Current Year	Increase (Decrease)
OVERPAYMENT	92,240.	0.	-92,240.
AMOUNT REFUNDED	92,240.	0.	-92,240.
SCHEDULE M-1:			
NET INCOME (LOSS) PER BOOKS	-577,444.	-284,546.	292,898.
FEDERAL INCOME TAX PER BOOKS	92,217.	0.	-92,217.
BOOK EXPENSES NOT ON RETURN	27,575.	32,765.	5,190.
INCOME PER RETURN	-457,652.	-251,781.	205,871.
SCHEDULE M-2:			
BALANCE AT BEGINNING OF YEAR - UNAPPROPRIATED RETAINED EARNINGS	4,450,543.	3,873,099.	-577,444.
NET INCOME (LOSS) PER BOOKS	-577,444.	-284,546.	292,898.
BALANCE AT END OF YEAR - UNAPPROPRIATED RETAINED EARNINGS	3,873,099.	3,588,553.	-284,546.

Form **8879-C**

IRS e-file Signature Authorization for Form 1120

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

For calendar year 2014, or tax year beginning _____, 2014, ending _____, 20____

2014

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-C and its instructions is at www.irs.gov/form8879c.**

Name of corporation

WATER PRO, INC.

Employer identification number

87-0572672

Part I Tax Return Information (Whole dollars only)

1	Total income (Form 1120, line 11)	1	3,169,315.
2	Taxable income (Form 1120, line 30)	2	-251,781.
3	Total tax (Form 1120, line 31)	3	
4	Amount owed (Form 1120, line 34)	4	
5	Overpayment (Form 1120, line 35)	5	

Part II Declaration and Signature Authorization of Officer (Be sure to get a copy of the corporation's return)

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2014 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize EIDE BAILLY LLP to enter my PIN 20979
ERO firm name do not enter all zeros

as my signature on the corporation's 2014 electronically filed income tax return.

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2014 electronically filed income tax return.

Officer's signature ▶ _____ Date ▶ _____ Title ▶ PRESIDENT

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 87416708196
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS e-file Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form - See Instructions
 Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see instructions.

Form **8879-C** (2014)

LHA

U.S. Corporation Income Tax Return

For calendar year 2014 or tax year

beginning _____, ending _____

2014

Department of the Treasury
Internal Revenue Service

▶ Information about Form 1120 and its separate instructions is at www.irs.gov/form1120.

A Check if: 1a Consolidated return (attach Form 851) <input type="checkbox"/> b Life/nonlife consolidated return <input type="checkbox"/> 2 Personal holding co. (attach Sch. PH) <input type="checkbox"/> 3 Personal service corp. (see instructions) <input type="checkbox"/> 4 Schedule M-3 attached <input type="checkbox"/>	TYPE OR PRINT	Name WATER PRO, INC. Number, street, and room or suite no. If a P.O. box, see instructions. P O BOX 156 City or town, state, or province, country and ZIP or foreign postal code DRAPER, UT 84020	B Employer identification number 87-0572672 C Date incorporated 01/01/1998 D Total assets (see instructions) \$ 4,758,508.
E Check if: (1) <input type="checkbox"/> Initial return (2) <input type="checkbox"/> Final return (3) <input type="checkbox"/> Name change (4) <input type="checkbox"/> Address change			

Income	1a	Gross receipts or sales	1a	4,941,509.	
		b	Returns and allowances	1b	
		c	Balance. Subtract line 1b from line 1a	1c	4,941,509.
		2	Cost of goods sold (attach Form 1125-A)	2	1,897,926.
		3	Gross profit. Subtract line 2 from line 1c	3	3,043,583.
		4	Dividends (Schedule C, line 19)	4	
		5	Interest SEE STATEMENT 1	5	91,850.
		6	Gross rents	6	
		7	Gross royalties	7	
		8	Capital gain net income (attach Schedule D (Form 1120))	8	
		9	Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	9	-725.
	10	Other income (attach statement) SEE STATEMENT 2	10	34,607.	
	11	Total income. Add lines 3 through 10	11	3,169,315.	
Deductions (See instructions for limitations on deductions.)	12	Compensation of officers (attach Form 1125-E)	12		
	13	Salaries and wages (less employment credits)	13	1,310,688.	
	14	Repairs and maintenance	14	394,929.	
	15	Bad debts	15		
	16	Rents	16	27,345.	
	17	Taxes and licenses SEE STATEMENT 3	17	194,152.	
	18	Interest	18		
	19	Charitable contributions SEE STATEMENT 4 AND SEE STATEMENT 5	19	0.	
	20	Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20	31,853.	
	21	Depletion	21		
	22	Advertising	22	6,824.	
	23	Pension, profit-sharing, etc., plans	23	57,052.	
	24	Employee benefit programs	24		
	25	Domestic production activities deduction (attach Form 8903)	25		
	26	Other deductions (attach statement) SEE STATEMENT 6	26	1,398,253.	
	27	Total deductions. Add lines 12 through 26	27	3,421,096.	
	28	Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11	28	-251,781.	
29a	Net operating loss deduction (see instructions) STATEMENT 7		29a	0.	
	b Special deductions (Schedule C, line 20)		29b		
	c Add lines 29a and 29b		29c		
Tax, Refundable Credits, and Payments	30	Taxable income. Subtract line 29c from line 28 (see instructions)	30	-251,781.	
	31	Total tax (Schedule J, Part I, line 11)	31	0.	
	32	Total payments and refundable credits (Schedule J, Part II, line 21)	32		
	33	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	33		
	34	Amount owed. If line 32 is smaller than the total of lines 31 and 33, enter amount owed	34	0.	
	35	Overpayment. If line 32 is larger than the total of lines 31 and 33, enter amount overpaid	35		
36	Enter amount from line 35 you want: Credited to 2015 estimated tax ▶ Refunded ▶	36			

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: _____ Date: _____ Title: **PRESIDENT**

May the IRS discuss this return with the preparer shown below?
 Yes No

Paid	Print/Type preparer's name ALLEN C. JONES, CPA	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00237194
Preparer Use Only	Firm's name ▶ EIDE BAILLY LLP	Firm's EIN ▶ 45-0250958			
	Firm's address ▶ 5 TRIAD CENTER STE 600 SALT LAKE CITY, UT 84180-1128	Phone no. 801-532-2200			

Schedule C Dividends and Special Deductions (see instructions)	(a) Dividends received	(b) %	(c) Special deductions (a) x (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3 Dividends on debt-financed stock of domestic and foreign corporations		see instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Total. Add lines 1 through 8			
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members		100	
12 Dividends from certain FSCs		100	
13 Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12			
14 Income from controlled foreign corporations under subpart F (attach Form(s) 5471)			
15 Foreign dividend gross-up			
16 IC-DISC and former DISC dividends not included on lines 1, 2, or 3			
17 Other dividends			
18 Deduction for dividends paid on certain preferred stock of public utilities			
19 Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4			
20 Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b			

Schedule J Tax Computation and Payment (see instructions)

Part I - Tax Computation

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))			
2	Income tax. Check if a qualified personal service corporation (see instructions)		2	0.
3	Alternative minimum tax (attach Form 4626)		3	
4	Add lines 2 and 3		4	0.
5a	Foreign tax credit (attach Form 1118)	5a		
b	Credit from Form 8834 (see instructions)	5b		
c	General business credit (attach Form 3800)	5c		
d	Credit for prior year minimum tax (attach Form 8827)	5d		
e	Bond credits from Form 8912	5e		
6	Total credits. Add lines 5a through 5e		6	
7	Subtract line 6 from line 4		7	0.
8	Personal holding company tax (attach Schedule PH (Form 1120))		8	
9a	Recapture of investment credit (attach Form 4255)	9a		
b	Recapture of low-income housing credit (attach Form 8611)	9b		
c	Interest due under the look-back method-completed long-term contracts (attach Form 8697)	9c		
d	Interest due under the look-back method-income forecast method (attach Form 8866)	9d		
e	Alternative tax on qualifying shipping activities (attach Form 8902)	9e		
f	Other (see instructions - attach statement)	9f		
10	Total. Add lines 9a through 9f		10	
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31		11	0.

Part II - Payments and Refundable Credits

12	2013 overpayment credited to 2014		12	
13	2014 estimated tax payments		13	
14	2014 refund applied for on Form 4466		14	()
15	Combine lines 12, 13, and 14		15	
16	Tax deposited with Form 7004		16	
17	Withholding (see instructions)		17	
18	Total payments. Add lines 15, 16, and 17		18	
19	Refundable credits from:			
a	Form 2439	19a		
b	Form 4136	19b		
c	Form 8827, line 8c	19c		
d	Other (attach statement - see instructions)	19d		
20	Total credits. Add lines 19a through 19d		20	
21	Total payments and credits. Add lines 18 and 20. Enter here and on page 1, line 32		21	

Schedule K Other Information (see instructions)

1	Check accounting method: a <input type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶	Yes	No
2	See the instructions and enter the:		
a	Business activity code no. ▶ <u>541600</u>		
b	Business activity ▶ <u>MANAGEMENT COMPANY</u>		
c	Product or service ▶ <u>MANAGEMENT SERVICES</u>		
3	Is the corporation a subsidiary in an affiliated group or a parent-subsidary controlled group? If "Yes," enter name and EIN of the parent corporation ▶		X
4	At the end of the tax year:		
a	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G)	X	
b	Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G)		X

Schedule K | **Other Information** continued (see instructions)

	Yes	No
5 At the end of the tax year, did the corporation:		
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851 , Affiliations Schedule? For rules of constructive ownership, see instructions		X
If "Yes," complete (i) through (iv) below.		

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions		X
If "Yes," complete (i) through (iv) below.		

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.)		X
If "Yes," file Form 5452 , Corporate Report of Nondividend Distributions.		
If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.		
7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock?		X
For rules of attribution, see section 318. If "Yes," enter:		
(i) Percentage owned ▶ _____ and (ii) Owner's country ▶ _____		
(c) The corporation may have to file Form 5472 , Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶ _____		
8 Check this box if the corporation issued publicly offered debt instruments with original issue discount	<input type="checkbox"/>	
If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.		
9 Enter the amount of tax-exempt interest received or accrued during the tax year	▶ \$ _____	
10 Enter the number of shareholders at the end of the tax year (if 100 or fewer)	▶ _____	
11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here	<input checked="" type="checkbox"/>	
If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.		
12 Enter the available NOL carryover from prior tax years (do not reduce it by any deduction on line 29a.)	▶ \$ 178,249.	
13 Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the tax year less than \$250,000?		X
If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year. ▶ \$ _____		
14 Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement (see instructions)?		X
If "Yes," complete and attach Schedule UTP.		
15a Did the corporation make any payments in 2014 that would require it to file Form(s) 1099?		X
b If "Yes," did or will the corporation file required Forms 1099? _____		
16 During this tax year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock?		X
17 During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?		X
18 Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?		X

Schedule L Balance Sheets per Books	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		2,306,117.		682,152.
2a Trade notes and accounts receivable			422,143.	
b Less allowance for bad debts	()		()	422,143.
3 Inventories		258,611.		258,611.
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (att. stmt.) STMT 8		249,472.		64,337.
7 Loans to shareholders				
8 Mortgage and real estate loans				
9 Other investments (att. stmt.) STMT 9		3,445,712.		3,034,794.
10a Buildings and other depreciable assets	1,525,278.		1,283,973.	
b Less accumulated depreciation	(1,248,006.)	277,272.	(1,039,279.)	244,694.
11a Depletable assets				
b Less accumulated depletion	()		()	
12 Land (net of any amortization)				
13a Intangible assets (amortizable only)				
b Less accumulated amortization	()		()	
14 Other assets (att. stmt.) STMT 10		35,147.		51,777.
15 Total assets		6,572,331.		4,758,508.
Liabilities and Shareholders' Equity				
16 Accounts payable		1,779,360.		
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (att. stmt.) STMT 11		511,290.		761,373.
19 Loans from shareholders				
20 Mortgages, notes, bonds payable in 1 year or more				
21 Other liabilities (att. stmt.)				
22 Capital stock: a Preferred stock				
b Common stock	200.	200.	200.	200.
23 Additional paid-in capital		408,382.		408,382.
24 Retained earnings - Appropriated (attach statement)				
25 Retained earnings - Unappropriated		3,873,099.		3,588,553.
26 Adjustments to shareholders' equity (attach statement)				
27 Less cost of treasury stock		()		()
28 Total liabilities and shareholders' equity		6,572,331.		4,758,508.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return			
Note: The corporation may be required to file Schedule M-3 (see instructions).			
1 Net income (loss) per books	-284,546.	7 Income recorded on books this year not included on this return (itemize):	
2 Federal income tax per books		Tax-exempt interest \$ _____	
3 Excess of capital losses over capital gains		_____	
4 Income subject to tax not recorded on books this year (itemize): _____		8 Deductions on this return not charged against book income this year (itemize):	
5 Expenses recorded on books this year not deducted on this return (itemize):		a Depreciation \$ _____	
a Depreciation \$ _____		b Charitable contributions \$ _____	
b Charitable contributions \$ 29,248.		9 Add lines 7 and 8	
c Travel and entertainment ... \$ 3,517.		10 Income (page 1, line 28) - line 6 less line 9	-251,781.
_____	32,765.		
6 Add lines 1 through 5	-251,781.		

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)			
1 Balance at beginning of year	3,873,099.	5 Distributions:	
2 Net income (loss) per books	-284,546.	a Cash	
3 Other increases (itemize): _____		b Stock	
_____		c Property	
_____		6 Other decreases (itemize): _____	
4 Add lines 1, 2, and 3	3,588,553.	7 Add lines 5 and 6	
		8 Balance at end of year (line 4 less line 7)	3,588,553.

Cost of Goods Sold

(Rev. December 2012)

▶ Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.

OMB No. 1545-2225

Department of the Treasury
Internal Revenue Service

▶ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

Name **WATER PRO, INC.** Employer Identification number **87-0572672**

1 Inventory at beginning of year	1	258,611.
2 Purchases	2	1,897,926.
3 Cost of labor	3	
4 Additional section 263A costs (attach schedule)	4	
5 Other costs (attach schedule)	5	
6 Total. Add lines 1 through 5	6	2,156,537.
7 Inventory at end of year	7	258,611.
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return (see instructions)	8	1,897,926.

9 a Check all methods used for valuing closing inventory:

(i) Cost

(ii) Lower of cost or market

(iii) Other (Specify method used and attach explanation) ▶ _____

b Check if there was a writedown of subnormal goods ▶

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶

d If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** _____

e If property is produced or acquired for resale, do the rules of Section 263A apply to the corporation? Yes No

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? Yes No
If "Yes," attach explanation.

Information on Certain Persons Owning the Corporation's Voting Stock

▶ Attach to Form 1120.

Name WATER PRO, INC.	Employer identification number (EIN) 87-0572672
------------------------------------	---------------------------------------------------------------

Part I Certain Entities Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4a). Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Percentage Owned in Voting Stock
DRAPER IRRIGATION COMPANY	87-0215969	CORPORATION	UNITED STATES	100.00%

Part II Certain Individuals and Estates Owning the Corporation's Voting Stock. (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Percentage Owned in Voting Stock

Compensation of Officers

(Rev. December 2013)

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.

Department of the Treasury
Internal Revenue Service

▶ Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

Name
WATER PRO, INC.

Employer identification number
87-0572672

Note. Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

(a) Name of officer	(b) Social security number	(c) Percent of time devoted to business	Percent of stock owned		(f) Amount of compensation
			(d) Common	(e) Preferred	
TOM FLOWERS	528-40-1562				
STEPHEN TRIPP	529-54-9176				
RICHARD SKEEN	528-56-2106				
2 Total compensation of officers				2	
3 Compensation of officers claimed on Form 1125-A or elsewhere on return				3	
4 Subtract line 3 from line 2. Enter the result here and on Form 1120, page 1, line 12 or the appropriate line of your tax return				4	0.

For Paperwork Reduction Act Notice, see separate instructions.

Depreciation and Amortization
 (Including Information on Listed Property) **OTHER**

OMB No. 1545-0172

2014
 Attachment
 Sequence No. **179**

▶ Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Name(s) shown on return WATER PRO, INC.		Business or activity to which this form relates OTHER DEPRECIATION	Identifying number 87-0572672
---------------------------------------------------	--	------------------------------------------------------------------------------	-----------------------------------------

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2013 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	46.
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2014	17	29,932.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2014 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year	/	40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	1,875.
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	31,853.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? **Yes** **No** **24b** If "Yes," is the evidence written? **Yes** **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--------------------------------------------------	-------------------------------------	--------------------------------------------------	-------------------------------	--------------------------------------------------------------------	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25**

26 Property used more than 50% in a qualified business use:

GIS TRUCK	101508	100.00 %	27,181.	16,021.5	200DBHY	1,875.
INSPECTIONS TRUCK	101508	100.00 %	22,107.	11,054.5	200DBHY	

27 Property used 50% or less in a qualified business use:

	:	:	%			S/L -	
	:	:	%			S/L -	
	:	:	%			S/L -	

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28** 1,875.

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29**

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year ...												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2014 tax year:					
	:	:			
	:	:			
43 Amortization of costs that began before your 2014 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return.
▶ Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.

Name(s) shown on return

Identifying number

WATER PRO, INC.

87-0572672

1 Enter the gross proceeds from sales or exchanges reported to you for 2014 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)

1

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2						
STATEMENT 12				25,562.	26,287.	-725.
3 Gain, if any, from Form 4684, line 39						3
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37						4
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824						5
6 Gain, if any, from line 32, from other than casualty or theft						6
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:						7
<p>Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.</p> <p>Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.</p>						-725.
8 Nonrecaptured net section 1231 losses from prior years (see instructions) SEE STATEMENT 13						8
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)						9

Part II Ordinary Gains and Losses

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11 Loss, if any, from line 7	11	(725.)
12 Gain, if any, from line 7 or amount from line 8, if applicable	12	
13 Gain, if any, from line 31	13	
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Combine lines 10 through 16	17	-725.
18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:		
<p>a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions</p>		
		18a
<p>b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14</p>		
		18b

JWA For Paperwork Reduction Act Notice, see separate instructions.

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A 510-D JOHN DEERE LOADER	040494	040114
B		
C		
D		

These columns relate to the properties on lines 19A through 19D.		Property A	Property B	Property C	Property D
20	Gross sales price (Note: See line 1 before completing.)	20 0.			
21	Cost or other basis plus expense of sale	21 81,802.			
22	Depreciation (or depletion) allowed or allowable	22 81,802.			
23	Adjusted basis. Subtract line 22 from line 21	23 0.			
24	Total gain. Subtract line 23 from line 20	24 0.			
25	If section 1245 property:				
a	Depreciation allowed or allowable from line 22	25a 81,802.			
b	Enter the smaller of line 24 or 25a	25b			
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.				
a	Additional depreciation after 1975	26a			
b	Applicable percentage multiplied by the smaller of line 24 or line 26a	26b			
c	Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c			
d	Additional depreciation after 1969 and before 1976	26d			
e	Enter the smaller of line 26c or 26d	26e			
f	Section 291 amount (corporations only)	26f			
g	Add lines 26b, 26e, and 26f	26g			
27	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).				
a	Soil, water, and land clearing expenses	27a			
b	Line 27a multiplied by applicable percentage	27b			
c	Enter the smaller of line 24 or 27b	27c			
28	If section 1254 property:				
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion	28a			
b	Enter the smaller of line 24 or 28a	28b			
29	If section 1255 property:				
a	Applicable percentage of payments excluded from income under section 126	29a			
b	Enter the smaller of line 24 or 29a	29b			

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less

(see instructions.)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation (see instructions)	34	
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

Election to Waive the Net Operating Loss Carryback Period

Water Pro, Inc.
P O Box 156
Draper, UT 84020

Employer Identification Number: 87-0572672

For the Year Ending December 31, 2014

Water Pro, Inc. hereby Elects, pursuant to Sec. 172(b)(3) of the Internal Revenue Code, to relinquish the entire carryback period with respect to the net operating loss incurred for the tax year ended December 31, 2014, and will have such loss available for carryforward only.

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Water Pro, Inc.
P O Box 156
Draper, UT 84020

Employer Identification Number: 87-0572672

For the Year Ending December 31, 2014

Water Pro, Inc. is making the de minimis safe harbor election
under Reg. Sec. 1.263(a)-1(f).

FORM 1120	INTEREST INCOME	STATEMENT	1
DESCRIPTION	US	OTHER	
INTEREST INCOME		91,850.	
TOTAL TO FORM 1120, LINE 5		91,850.	

FORM 1120	OTHER INCOME	STATEMENT	2
DESCRIPTION		AMOUNT	
BAD DEBT RECOVERIES		34,607.	
TOTAL TO FORM 1120, LINE 10		34,607.	

FORM 1120	TAXES AND LICENSES	STATEMENT	3
DESCRIPTION		AMOUNT	
PAYROLL TAXES		119,172.	
PROPERTY TAX		74,880.	
STATE TAX		100.	
TOTAL TO FORM 1120, LINE 17		194,152.	

	CURRENT YEAR CONTRIBUTIONS	STATEMENT	4
DESCRIPTION		AMOUNT	
DONATIONS		29,248.	
TOTAL CURRENT YEAR CONTRIBUTIONS		29,248.	

CONTRIBUTIONS

STATEMENT 5

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT

CONTRIBUTION SUBJECT TO LIMITATION:

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2009	2,642
FOR TAX YEAR 2010	11,593
FOR TAX YEAR 2011	18,179
FOR TAX YEAR 2012	
FOR TAX YEAR 2013	22,156

TOTAL CARRYOVER	54,570
CURRENT YEAR CONTRIBUTIONS	29,248

TOTAL CONTRIBUTIONS AVAILABLE	83,818
TAXABLE INCOME LIMITATION AS ADJUSTED	0

EXCESS CONTRIBUTIONS	83,818
----------------------	--------

ALLOWABLE CONTRIBUTIONS DEDUCTION	0
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TOTAL CONTRIBUTION DEDUCTION	0
------------------------------	---

FORM 1120	OTHER DEDUCTIONS	STATEMENT 6
DESCRIPTION		AMOUNT
AUTO AND TRUCK EXPENSE		105,908.
BANK CHARGES/FEES		52,270.
BLUE STAKE EXPENSE		6,313.
COMPANY MEETINGS/FUCTIONS		20,331.
DAMAGE SETTLEMENT/REIMBURSEMNT		3,030.
DIRECTOR EXPENSE		66,438.
EMPLOYEE CONCIL & SAFETY		-863.
INSURANCE		492,298.
JANITORIAL EXPENSE		13,740.
LEGAL AND PROFESSIONAL		325,151.
MAP/SURVEY/CITY PERMIT EXPENSE		10,254.
MEALS AND ENTERTAINMENT		3,517.
MISC. EMPLOYEE EXPENSE		320.
OFFICE EXPENSE		19,701.
OP SAFETY/TOOL EQUIPMENT		257.
OTHER MISCELLANEOUS EXPENSE		842.
POSTAGE EXPENSE		55,517.
PRINTING EXPENSE		19,207.
PROFESSIONAL DUE''S		4,368.
SCADA EXPENSE		81,648.
SECURITY EXPENSE		968.
SUPPLIES		23,186.
TELEPHONE		31,110.
TRAINING/SCHOOL EXPENSE		12,733.
TRAVEL EXPENSE		14,173.
UNIFORM/LINEN EXPENSE		19,728.
UTILITIES		16,108.
TOTAL TO FORM 1120, LINE 26		1,398,253.

NET OPERATING LOSS DEDUCTION				STATEMENT 7
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/13	457,652.	279,403.	178,249.	178,249.
NOL AVAILABLE THIS YEAR			178,249.	178,249.

SCHEDULE L	OTHER CURRENT ASSETS	STATEMENT	8
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR	
EMPLOYEE RECEIVABLE	169,412.	64,337.	
FEDERAL PREPAID TAXES	69,180.	0.	
STATE PREPAID TAXES	10,880.	0.	
TOTAL TO SCHEDULE L, LINE 6	249,472.	64,337.	

SCHEDULE L	OTHER INVESTMENTS	STATEMENT	9
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR	
MERRILL LYNCH ACCOUNT	3,445,712.	3,034,794.	
TOTAL TO SCHEDULE L, LINE 9	3,445,712.	3,034,794.	

SCHEDULE L	OTHER ASSETS	STATEMENT	10
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR	
BEAR CANYON INTAKE BOND	15,510.	15,510.	
CORNER CANYON RESV BOND	9,637.	9,637.	
DRAPER CITY DIGGING BOND	10,000.	10,000.	
LAND DISTURBANCE PERMIT		33,001.	
STOCK PURCHASE		-16,371.	
TOTAL TO SCHEDULE L, LINE 14	35,147.	51,777.	

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT	11
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR	
ACCRUED LIABILITIES	202,594.	230,803.	
BONDS	308,696.	530,470.	
STATE ACCRUED TAXES		100.	
TOTAL TO SCHEDULE L, LINE 18	511,290.	761,373.	

FORM 4797 SALES OF PROPERTY USED IN A TRADE OR BUSINESS STATEMENT 12

DESCRIPTION OF PROPERTY	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR ALLOWED	COST OR BASIS	GAIN OR LOSS
OFFICE FURNITURE	07/01/09	01/01/14		1,580.	1,735.	-155.
2007 DODGE DAKOTA	04/04/07	01/01/14		22,848.	23,366.	-518.
OP MANAGERS OFFICE FURNITURE	07/10/07	01/01/14		1,134.	1,186.	-52.
TOTALS TO FORM 4797, LINE 2				25,562.	26,287.	-725.

FORM 4797	SECTION 1231 LOSSES FROM PRIOR YEARS	STATEMENT	13
	<u>LOSS SUSTAINED</u>	<u>LOSS PREVIOUSLY RECAPTURED</u>	<u>LOSS REMAINING</u>
TAX YEAR 2009			
TAX YEAR 2010			
TAX YEAR 2011	85		85
TAX YEAR 2012	6,533		6,533
TAX YEAR 2013			
TOTAL REMAINING SECTION 1231 LOSSES FROM PRIOR YEARS			<u>6,618</u>

2014 TAX RETURN FILING INSTRUCTIONS

UTAH FORM TC-20

FOR THE YEAR ENDING
December 31, 2014

Prepared for	Water Pro, Inc. P O Box 156 Draper, UT 84020
Prepared by	Eide Bailly LLP 5 Triad Center Ste 600 Salt Lake City, UT 84180-1128
To be signed and dated by	Not applicable
Amount of tax	Total tax \$ 100.00 Less: payments and credits \$ 0.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 Balance due \$ 100.00
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Make check payable to	Utah State Tax Commission
Mail tax return and check (if applicable) to	This return has qualified for electronic filing. Please review your return for completeness and accuracy. We will then transmit your return electronically to the USTC.
Return must be mailed on or before	Not applicable
Special Instructions	Do not mail the paper copy of the return to the USTC. Your payment should be made as instructed below by April 15, 2015. Enclose a check or money order for \$100.00, payable to Utah State Tax Commission. Separately mail TC-559PMT with payment to: Utah State Tax Commission 210 North 1950 West Salt Lake City, UT 84134-0180

481342
05-01-14

CUT HERE

SEPARATE AND RETURN ONLY THE BOTTOM COUPON WITH PAYMENT.

CUT HERE

**Corporation/Partnership
Payment Coupon**

Mail to: Utah State Tax Commission, 210 N 1950 W, SLC UT 84134-0180

TC-559
Rev. 12/11

GCH

Tax year ending (mm/dd/yyyy) 12 31 2014

Estimated payment:

<input type="checkbox"/> 1st qtr.	<input type="checkbox"/> 3rd qtr.	<input type="checkbox"/> Extension payment
<input type="checkbox"/> 2nd qtr.	<input type="checkbox"/> 4th qtr.	<input checked="" type="checkbox"/> Return payment

USTC Use Only

Name of corporation/partnership WATER PRO, INC.	EIN 870572672
-----------------------------------------------------------	-------------------------

Address P O BOX 156		
City DRAPER	State UT	ZIP code 84020

Payment amount enclosed \$ 100 00

Make check or money order payable to the Utah State Tax Commission.
Do not send cash. Do not staple check to coupon. Detach check stub.

C
P
T

32199270260000087057267231231201490340000000000

20401

1019

Utah Corporation Franchise and Income Tax Return

2014 TC-20

For calendar year 2014 or fiscal year (mm/dd/yyyy):
beginning - and ending -

- Amended Return (code 1-4)
- Mark "X" if you filed federal form 8886

Mark "X" if this is a new address:

- Physical address
- Mailing address

Corporation name
WATER PRO, INC.

Address
P O BOX 156

City
DRAPER

Foreign country (if not U.S.)

State ZIP + 4
UT 84020

Telephone number
8015712232

Employer Identification Number
870572672

UT Incorporation/Qualification No.

- 1 If this corporation conducted any Utah business activity during the taxable year, enter "X" • 1 **X**
- 2 If this corporation joined in a federal consolidated return, enter "X" • 2
- 3 Mark "X" (one only) if this return constitutes a:
 - 3a "water's edge" combined report
 - 3b "water's edge" election under UC §59-7-402(2)
 - 3c "worldwide" combined report
- 4 If this corporation made an election for any member of the federal affiliated group during the taxable year, enter "X"
 - 4a IRC Section 338
 - 4b IRC Section 338(h)(10)
 - 4c IRC Section 336(e)
- 5 If this return includes any financial institution defined by Tax Commission Rule R865-6F-32, enter "X" • 5
- 6 Ultimate U.S. parent's name EIN • 6
- 7 Total tax - enter amount from Schedule A, line 26 • 7 **100.**
- 8 Total refundable credits and prepayments - enter amount from Schedule A, line 30 • 8
- 9 **Tax Due** - subtract line 8 from line 7 (not less than zero) • 9 **100.**
- 10 Penalties and interest (see instructions) 10 **0.**
- 11 **Total Due - Pay this amount** - add line 9 and line 10 • 11 **100.**
- 12 **Overpayment** - subtract the sum of line 7 and line 10 from line 8 (not less than zero) 12
- 13 Amount of overpayment on line 12 to be applied to next taxable year • 13
- 14 **Refund** - subtract line 13 from line 12 • 14 **0.**
- 15 Mark "X" for each quarterly estimated prepayment meeting an exception (attach documentation):
 - 1st
 - 2nd
 - 3rd
 - 4th

USTC USE ONLY

Under penalties of perjury, I declare to the best of my knowledge and belief, this return and accompanying schedules are true, correct and complete.

SIGN HERE Signature of officer	Date	Title PRESIDENT	"X" if USTC may discuss this return with preparer below: X
Paid Preparer's Section	Preparer's signature	Date	Preparer's PTIN • P00237194
	Firm's name and address EIDE BAILLY LLP 5 TRIAD CENTER STE 600 SALT LAKE CITY UT 841801128		Preparer's EIN • 450250958

1 Date of incorporation: 01/01/1998 State or country in which incorporated: UTAH
mm/dd/yyyy

2 If this corporation is dissolved or withdrawn, see Dissolution or Withdrawal in the General Instructions.

3 If this corporation at any time during its tax year owned more than 50 percent of the voting stock of another corporation(s), provide the following for each corporation so owned. Attach additional pages if needed.

Name of corporation:

Address:

City, State, ZIP Code:

Percent of stock owned: % Date stock acquired: mm/dd/yyyy

4 If more than 50 percent of the voting stock of this corporation is owned by another corporation, provide the following information about the other corporation.

Name of corporation: DRAPER IRRIGATION COMPANY

Address: 12421 SOUTH 800 EAST

City, State, ZIP Code: DRAPER UT 84020

Percent of stock owned: 100.0000 %

5 Check here if this corporation or its subsidiary(ies) had a change in control or ownership or acquired control or ownership of any other legal entity this year.

6 Enter the location where the corporate books and records are maintained:

7 Enter the state or country of commercial domicile: UTAH

• 8 Enter the year-end date of the last year for which a federal examination has been completed: mm/dd/yyyy

Under separate cover, send a summary and supporting schedules for all federal adjustments and the federal tax liability for each year for which federal audit adjustments have not been reported to the Tax Commission. Include the date of final determination. Send the information to:

Auditing Division, Utah State Tax Commission, 210 North 1950 West, Salt Lake City, UT 84134-2000

• 9 Enter the year-end dates of years with federal examinations now in progress, and/or final determination of past examinations still pending.

mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy

• 10 Enter the year-end dates of years for which extensions for proposing additional assessments of federal tax were agreed to with the Internal Revenue Service.

mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy

Note: Utah Code §59-7-519 extends the Statute of Limitations for tax assessment if federal audit adjustments are not fully reported.

1	Unadjusted income (loss) before NOL and special deductions from federal form 1120, line 28	• 1	-251,781.
2	Additions to unadjusted income from Schedule B, line 15	• 2	
3	Add line 1 and line 2	3	-251,781.
4	Subtractions from unadjusted income from Schedule C, line 16	• 4	
5	Adjusted income (loss) - subtract line 4 from line 3	• 5	-251,781.
6	Utah net nonbusiness income from Schedule H, line 14	• 6	
7	Non-Utah net nonbusiness income from Schedule H, line 28	• 7	
8	Total nonbusiness income net of expenses - add line 6 and line 7	8	
9	Apportionable income (loss) before contributions deduction - subtract line 8 from line 5	• 9	-251,781.
10	Utah contributions deduction from Schedule D, line 6	• 10	
11	Apportionable income (loss) - subtract line 10 from line 9	11	-251,781.
12	Apportionment fraction - enter 1.000000, or Schedule J, line 9, 13 or 14, if applicable	12	1.000000
13	Apportioned income (loss) - multiply line 11 by line 12	• 13	-251,781.
14	Utah net nonbusiness income (from line 6 above)	14	
15	Utah income (loss) before Utah net loss deduction - add line 13 and line 14	• 15	-251,781.
	If line 15 is a loss and you elected to forego the federal net operating loss carryback, do you elect to forego the Utah loss carryback? If no box is checked, the loss must be treated as a carryback. Use form TC-20L to claim a refund of prior year tax for a loss carryback.	• <input checked="" type="checkbox"/> Yes	• <input type="checkbox"/> No
16	Utah net loss carried forward from prior years (attach documentation)	• 16	138,819.
17	Net Utah taxable income (loss) - subtract line 16 from line 15	• 17	-390,600.
18	Calculation of tax (see instructions):		
	a Multiply line 17 by 5% (.05) (not less than zero)	18a	0.
	b Minimum tax - enter \$100 or amount from Schedule M, line b	• 18b	100.
	Tax amount - enter the greater of line 18a or 18b	• 18	100.
19	Interest on installment sales	• 19	
20	Recapture of low-income housing credit	• 20	
21	Total tax - add lines 18 through 20	• 21	100.
	Carry to Schedule A, page 2, line 22		

22 Enter tax from Schedule A, page 1, line 21 22 **100.**

23 Nonrefundable credits (see instructions for two-digit codes)

Code	Amount	Code	Amount
• 23a		• 23b	
• 23c		• 23d	
• 23e		• 23f	

Total nonrefundable credits - add lines 23a through 23f • 23

24 Net tax - subtract line 23 from line 22 (cannot be less than line 18b or less than zero) • 24 **100.**

25 Utah use tax • 25

26 **Total tax** - add line 24 and line 25 • 26 **100.**
 Enter here and on TC-20, line 7

27 Refundable credits (see instructions for two-digit codes)

Code	Amount	Code	Amount
• 27a		• 27b	
• 27c		• 27d	

Total refundable credits - add lines 27a through 27d • 27

28 Prepayments from Schedule E, line 4 • 28

29 Amended return only (see instructions) • 29

30 **Total refundable credits and prepayments** - add lines 27 through 29 • 30
 Enter here and on TC-20, line 8

- 1 Interest from state obligations • 1
- 2 a Income taxes paid to any state • 2a
 - b Franchise or privilege taxes paid to any state • 2b
 - c Corporate stock taxes paid to any state • 2c
 - d Any income, franchise or capital stock taxes imposed by a foreign country • 2d
 - e Business and occupation taxes paid to any state • 2e
- 3 Safe harbor lease adjustments • 3
- 4 Capital loss carryover • 4
- 5 Federal deductions taken previously on a Utah return • 5
- 6 Federal charitable contributions from federal form 1120, line 19 • 6
- 7 Gain (loss) on IRC Sections 338(h)(10) or 336(e) • 7
- 8 Adjustments due to basis difference • 8
- 9 Expenses attributable to 50 percent unitary foreign dividend exclusion • 9
- 10 Installment sales income previously reported for federal but not Utah purposes • 10
- 11 Non-qualified withdrawal from Utah Educational Savings Plan (UESP) 529 account • 11
- 12 Income (loss) from IRC Section 936 corporations • 12
- 13 Foreign income (loss) for worldwide combined filers • 13
- 14 Income (loss) of unitary corporations not included in federal consolidated return • 14
- 15 Total additions - add lines 1 through 14 • 15
Enter here and on Schedule A, line 2

1	Intercompany dividend elimination (see instructions)	• 1
2	Foreign dividend gross-up	• 2
3	Net capital loss	• 3
4	a Federal jobs credit salary reduction	• 4a
	b Federal research and development credit expense reduction	• 4b
	c Federal orphan drug credit clinical testing expense reduction	• 4c
	d Expense reduction for other federal credits (attach schedule)	• 4d
	e Federal qualified tax credit bond credit, income increase	• 4e
	f Federal qualified zone academy bond credit, income increase	• 4f
5	Safe harbor lease adjustments	• 5
6	Federal income previously taxed by Utah	• 6
7	Fifty percent exclusion for dividends from unitary foreign subsidiaries	• 7
8	Fifty percent exclusion for foreign operating company income (loss)	• 8
9	Gain (loss) on stock sale not recognized for federal purposes (but included in taxable income) when IRC Section 338(h)(10) or 336(e) has been elected	• 9
10	Basis adjustments	• 10
11	Interest expense not deducted on federal return under IRC Sections 265(b) or 291(e)	• 11
12	Dividends received from admitted insurance company subsidiaries exempt under UC §59-7-102(1)(c)	• 12
13	Contributions to Utah Educational Savings Plan (UESP) 529 account(s)	• 13
14	Dividends received or deemed received by a member of the unitary group from a captive REIT	• 14
15	IRC Section 857(b)(2)(E) deduction from a captive REIT	• 15
16	Total subtractions - add lines 1 through 15 Enter here and on Schedule A, line 4	• 16

Schedule D - Utah Contributions Deduction
 20407 EIN 87-0572672

**TC-20, Sch. D
 2014**

1	Apportionable income before contributions deduction from Schedule A, line 9 If a loss, no contribution deduction is allowed	• 1	-251,781.
2	Utah contribution limitation - multiply line 1 by 10% (.10) (not less than zero)	2	0.
3	Current year contributions	• 3	29,248.
4	Utah contributions carryforward (attach schedule)	• 4	52,046.
5	Total contributions available - add line 3 and line 4	5	81,294.
6	Utah contributions deduction - lesser of line 2 or line 5 Enter here and on Schedule A, line 10	• 6	0.
7	Contribution carryover to next year - subtract line 6 from line 5	• 7	81,294.

Schedule E - Prepayments of Any Type

TC-20, Sch. E

1	Overpayment applied from prior year	1	
2	Extension prepayment Date: Check no.: Enter the date and amount of any extension prepayment. If paid by check, enter the check number.	2	
3	Other prepayments (attach additional pages if necessary) Enter the date and amount of any prepayment for the filing period. If paid by check, enter the check number.		
	a Date: Check no.: 3a		
	b Date: Check no.: 3b		
	c Date: Check no.: 3c		
	d Date: Check no.: 3d		
	Total of all prepayments - add lines 3a through 3d	3	
4	Total prepayments - add lines 1 through 3 Enter here and on Schedule A, line 28	4	0.

UT TC-20		UTAH NET LOSS CARRIED FORWARD FROM PRIOR YEARS		STATEMENT	1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING		
12/31/13	457,652.	318,833.	138,819.		
NET LOSS CARRYFORWARD AVAILABLE THIS YEAR			138,819.		

UT TC-20		UTAH CONTRIBUTION CARRYFORWARD		STATEMENT	2
FOR FIFTH PRIOR YEAR					
FOR FOURTH PRIOR YEAR					
FOR THIRD PRIOR YEAR			8,768.		
FOR SECOND PRIOR YEAR			21,122.		
FOR FIRST PRIOR YEAR			22,156.		
TOTAL CARRYFORWARD TO FORM TC-20, SCHEDULE D, LINE 4			52,046.		

Department of the Treasury
Internal Revenue Service

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

A For the 2014 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization DRAPER IRRIGATION COMPANY Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 12421 SOUTH 800 EAST; P.O. BOX 156 City or town, state or province, country, and ZIP or foreign postal code DRAPER, UT 84020 F Name and address of principal officer: DARRIN L. JENSEN SAME AS C ABOVE	D Employer identification number 87-0215969 E Telephone number 801 571 2232 G Gross receipts \$ 9,909,271. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (12) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ N/A		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1888 M State of legal domicile: UT

Part I Summary

1	Briefly describe the organization's mission or most significant activities: MUTUAL DITCH OR IRRIGATION COMPANY		
2	Check this box <input type="checkbox"/> 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	7
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8	Contributions and grants (Part VIII, line 1h)	8	0.
9	Program service revenue (Part VIII, line 2g)	9	8,917,602.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	672.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	119,907.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	9,038,181.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13	0.
14	Benefits paid to or for members (Part IX, column (A), line 4)	14	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	1,604,855.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16a	0.
16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.	16b	0.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17	5,681,376.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	7,286,231.
19	Revenue less expenses. Subtract line 18 from line 12	19	1,751,950.
20	Total assets (Part X, line 16)	20	61,523,785.
21	Total liabilities (Part X, line 26)	21	10,477,655.
22	Net assets or fund balances. Subtract line 21 from line 20	22	51,046,130.

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 DARRIN L. JENSEN, CEO Type or print name and title	Date		
Paid Preparer Use Only	Print/Type preparer's name MARK C FURNISS, CPA	Preparer's signature 	Date 	Check if self-employed <input type="checkbox"/> PTIN P00242966
	Firm's name ▶ EIDE BAILLY LLP Firm's address ▶ 5 TRIAD CENTER STE 600 SALT LAKE CITY, UT 84180-1128	Firm's EIN ▶ 45-0250958	Phone no. 801-532-2200	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
MUTUAL DITCH OR IRRIGATION COMPANY

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 \$ _____ including grants of \$ _____) (Revenue \$ _____)
TO PROVIDE CULINARY AND IRRIGATION WATER TO SHAREHOLDERS

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 **▶**

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?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		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 Compliance

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

Input box for Schedule O check

Main table with columns for question number, description, sub-questions (1a-14b), and Yes/No columns. Includes questions about Form 1096, Form W-2G, Form W-3, and various tax compliance items.

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

		Yes	No
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
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?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?		X
11b	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	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
15a	a The organization's CEO, Executive Director, or top management official		X
15b	b Other officers or key employees of the organization		X
	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?		X
16b	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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 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: **DARRIN JENSEN - 801-571-2232**
12421 S 800 E, DRAPER, UT 84020

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

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

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

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) STEPHEN TRIPP PRESIDENT	1.00	X		X				0.	4,870.	0.
(2) GEORGE GREENWOOD DIRECTOR	1.00	X						0.	5,200.	0.
(3) CURTIS DEYOUNG DIRECTOR	1.00	X						0.	1,600.	0.
(4) DALE SMITH DIRECTOR	1.00	X						0.	4,800.	0.
(5) KENT WARE DIRECTOR	1.00	X						0.	5,000.	0.
(6) RYAN DAW SECRETARY	2.00	X		X				0.	5,280.	0.
(7) JAY WEBB DIRECTOR	1.00	X						0.	5,200.	0.
(8) DARRIN L. JENSEN GM/CEO	0.00 45.00			X				0.	180,217.	24,852.
(9) DAVID GARDNER ASST GENERAL MANAGER	0.00 45.00				X			0.	128,021.	20,344.

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			
1b Sub-total							0.	340,188.	45,196.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							0.	340,188.	45,196.	

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 **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
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? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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
NONE		

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 **0**

Part VIII Statement of Revenue

Check 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					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	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						
Program Service Revenue	2 a WATER SALES	Business Code 221000	6,568,033.	6,568,033.			
	b CONNECTION/METER FEES	221000	570,015.	570,015.			
	c SYSTEM RENTAL INCOME	221000	534,960.	534,960.			
	d SYSTEM BUY-IN FEE	221000	166,867.	166,867.			
	e CONSTRUCTION INSPECT FEE	221000	58,579.	58,579.			
	f All other program service revenue	221000	14,325.	14,325.			
	g Total. Add lines 2a-2f		7,912,779.				
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		21,046.			21,046.
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	1,450,000.				
		b Less: cost or other basis and sales expenses		6,961.			
		c Gain or (loss)		1,443,039.			
d Net gain or (loss)			1,443,039.	1,443,039.			
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 MISC INCOME	900099	525,446.	525,446.				
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		525,446.				
12 Total revenue. See instructions.		9,902,310.	9,881,264.	0.	21,046.		

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	1,149,885.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	695,821.			
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	417,919.			
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	46,599.			
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	451,242.			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,696,668.			
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CULINARY WATER EXP	865,106.			
b IRRIGATION WATER EXP	610,665.			
c REPAIRS/MAINTENANCE	554,377.			
d SYSTEM RENTAL EXPENSE	534,960.			
e All other expenses	630,398.			
25 Total functional expenses. Add lines 1 through 24e	7,653,640.			
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 Sheet

Check 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	2,127.	1	2,127.
	2 Savings and temporary cash investments	227,341.	2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	2,002,984.	4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	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		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 77,835,652.		
	b Less: accumulated depreciation	10b 18,254,679.	55,189,640.	10c 59,580,973.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	570,200.	12	570,200.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	3,531,493.	15	3,572,956.
16 Total assets. Add lines 1 through 15 (must equal line 34)	61,523,785.	16	63,726,256.	
Liabilities	17 Accounts payable and accrued expenses	41,006.	17	283,986.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	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		22	
	23 Secured mortgages and notes payable to unrelated third parties	10,436,649.	23	9,343,085.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26 Total liabilities. Add lines 17 through 25	10,477,655.	26	9,627,071.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	-1,129,825.	30	-1,084,855.
	31 Paid-in or capital surplus, or land, building, or equipment fund	591,651.	31	591,651.
	32 Retained earnings, endowment, accumulated income, or other funds	51,584,304.	32	54,592,389.
33 Total net assets or fund balances	51,046,130.	33	54,099,185.	
34 Total liabilities and net assets/fund balances	61,523,785.	34	63,726,256.	

Part XI Reconciliation of Net Assets

Check 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	9,902,310.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,653,640.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,248,670.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	51,046,130.
5	Net unrealized gains (losses) on investments	5	
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	804,385.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	54,099,185.

Part XII Financial Statements and Reporting

Check 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
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:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	X	
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:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
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?		X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
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		

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization **DRAPER IRRIGATION COMPANY** Employer identification number **87-0215969**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
- 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 8/17/06, and not on a historic structure listed in the National Register	2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- Number of states where property subject to conservation easement is located ▶ _____
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
- 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)?
- 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" to Form 990, Part IV, line 8.

- 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.
 - 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 in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____
- 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 in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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" to 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
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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 in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to 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 in 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:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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" to 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		80,000.		80,000.
b Buildings				
c Leasehold improvements				
d Equipment		77,755,652.	18,254,679.	59,500,973.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				59,580,973.

Part VII Investments - Other Securities.

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

(a) Description	(b) Book value
(1) WATER RIGHTS	1,308,317.
(2) INVESTMENT IN SUBSIDIARY	408,582.
(3) NYL INSURANCE CASH SURRENDER VALUE	329,908.
(4) UTAH LAKE WATER USERS	1,526,149.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	3,572,956.

Part X Other Liabilities.

Complete if the organization answered "Yes" to 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

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions. Row 1: Total revenue, gains, and other support per audited financial statements. Row 2: Amounts included on line 1 but not on Form 990, Part VIII, line 12. Row 3: Subtract line 2e from line 1. Row 4: Amounts included on Form 990, Part VIII, line 12, but not on line 1. Row 5: Total revenue. Add lines 3 and 4c.

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and descriptions. Row 1: Total expenses and losses per audited financial statements. Row 2: Amounts included on line 1 but not on Form 990, Part IX, line 25. Row 3: Subtract line 2e from line 1. Row 4: Amounts included on Form 990, Part IX, line 25, but not on line 1. Row 5: Total expenses. Add lines 3 and 4c.

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.

Series of horizontal lines provided for entering supplemental information.

**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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

DRAPER IRRIGATION COMPANY

Employer identification number

87-0215969

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 in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., 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 in 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.

- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in 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 in 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" to line 5a or 5b, describe in Part III.

6 For persons listed in 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" to line 6a or 6b, describe in Part III.

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

8 Were any amounts reported in 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
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) 2014

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DARRIN L. JENSEN GM/CEO	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	180,217.	0.	0.	7,750.	17,102.	205,069.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Multiple horizontal lines for supplemental information.

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.

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

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

DRAPER IRRIGATION COMPANY

Employer identification number

87-0215969

FORM 990, PART VI, SECTION A, LINE 3:

WATERPRO, INC., A WHOLLY OWNED SUBSIDIARY OF DRAPER IRRIGATION, MANAGES THE
OPERATIONS OF DRAPER IRRIGATION.

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

SHAREHOLDERS

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

SHAREHOLDERS

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

THE CEO REVIEW AND SIGNS THE 990

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

A REVIEW IS COMPLETED ON ALL ITEMS IN QUESTION BY THE CEO AND BOARD OF
DIRECTORS.

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

DOCUMENTS ARE AVAILABLE AT SHAREHOLDERS MEETINGS AND ANYTIME A SHAREHOLDER
SENDS A WRITTEN REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CONTRIBUTED INCOME	759,415.
CAPITAL CONTRIBUTION	5,500.
CHANGES IN TREASURY STOCK RECEIVABLE	3,070.
TREASURY STOCK PURCHASE	-81,200.

Name of the organization DRAPER IRRIGATION COMPANY	Employer identification number 87-0215969
-------------------------------------------------------	----------------------------------------------

TREASURY STOCK REISSUED 117,600.

TOTAL TO FORM 990, PART XI, LINE 9 804,385.

Multiple horizontal lines for additional entries.

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.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

2014

Open to Public
Inspection

Name of the organization **DRAPER IRRIGATION COMPANY** Employer identification number **87-0215969**

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

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
WATER PRO INCORPORATED - 87-0572672 12421 SOUTH 800 EAST; P.O. BOX 156 DRAPER, UT 84020	MANAGEMENT	UT	DRAPER IRRIGATION	C CORP	-284,545.	4,758,508.	100%	X	

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) WATER PRO INCORPORATED	K	139,918.	ALLOCATED
(2) WATER PRO INCORPORATED	O	1,827,624.	ALLOCATED
(3) WATER PRO INCORPORATED	P	1,082,127.	ALLOCATED
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Water Pro, Inc.

2015 Tax Return

STATEMENT THAT THIS IS A TAX RETURN NOT A FINANCIAL STATEMENT

The accompanying federal income tax return does **NOT** constitute a financial statement. We have not audited, reviewed or compiled the accompanying income tax return and, accordingly, do not express an opinion or any other form of assurance on it.

An income tax return is not intended to constitute financial statements prepared in accordance with generally accepted accounting principles. Accordingly, it does not necessarily include all financial information or disclosures required by generally accepted accounting principles. If the omitted financial information or disclosures were included with the tax return, they might influence the users' conclusions about the taxpayer's financial position, results of operations and cash flows. Accordingly, this income tax return is not designed to be used in lieu of financial statements.

RECORD RETENTION

Copies of your tax returns are enclosed for your files. It is your responsibility to retain copies of your tax information. We recommend the following guidelines:

- Tax returns – keep indefinitely.
- Supporting documentation – keep for 8 years.
- Records supporting your tax basis in personal, investment and business assets and gift documentation – keep indefinitely.

Please note: Eide Bailly retains copies of tax returns, workpapers and other tax information for a period of eight years. After that, we dispose of all records. If you have questions regarding retention of tax records, please contact us.

EIDE BAILLY LLP
5 TRIAD CENTER STE 600
SALT LAKE CITY, UT 84180-1128

WATER PRO, INC.
P O BOX 156
DRAPER, UT 84020



Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

CLIENT'S COPY



CPAs & BUSINESS ADVISORS

March 2, 2016

Water Pro, Inc.
P O Box 156
Draper, UT 84020

Water Pro, Inc.:

Enclosed are your 2015 corporate tax returns, as follows:

2015 U.S. Corporation Income Tax Return

2015 Utah Corporation Income Tax Return

Instructions for filing the above forms are furnished for easy reference.

We prepared the returns from information you furnished us without verification. Upon examination of the returns by taxing authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such an examination.

Many states require legal entities to register with them in order to do business in their state. Please remember to keep your registration active and current for each state that you have business activities. It is also important that the corporate minutes be up to date and include such items as officers' salaries, election of officers and directors, and other important corporate decisions. If you need help in determining what documentation to include in your corporate minutes, please contact our office.

Please advise us if the Internal Revenue Service and/or State Tax Commission makes written or verbal inquiries regarding this return. Internal Revenue Service and/or State Tax Commission correspondence is occasionally incomplete and/or inaccurate. We will assist you in resolving any tax matter upon your request.

Your copy should be retained for your files.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax

www.eidebailly.com

returns.

Sincerely,

Connie S. Stanger, CPA

2015 TAX RETURN FILING INSTRUCTIONS

U.S. CORPORATION INCOME TAX RETURN

FOR THE YEAR ENDING

December 31, 2015

Prepared for	Water Pro, Inc. P O Box 156 Draper, UT 84020
Prepared by	Eide Bailly LLP 5 Triad Center Ste 600 Salt Lake City, UT 84180-1128
To be signed and dated by	The appropriate corporate officer(s).
Amount of tax	Total tax \$ 0 Less: payments and credits \$ 0 Plus: other amount \$ 0 Plus: interest and penalties \$ 0 No pmt required \$
Overpayment	Credited to your estimated tax \$ 0 Other amount \$ 0 Refunded to you \$ 0
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	This return has qualified for electronic filing. After you have reviewed the return for accuracy, please sign, date and return Form 8879-C to our office immediately. Your return will then be electronically filed.
Return must be mailed on or before	Not applicable
Special Instructions	

CORPORATION
Two-Year Comparison

2015

Name WATER PRO, INC.	Employer Identification Number ** - ***2672
--------------------------------	-------------------------------------------------------

Description	Prior Year	Current Year	Increase (Decrease)
INCOME:			
GROSS RECEIPTS OR SALES LESS RETURNS AND ALLOWANCES	4,941,509.	5,067,570.	126,061.
COST OF GOODS SOLD	1,897,926.	1,693,214.	-204,712.
GROSS PROFITS	3,043,583.	3,374,356.	330,773.
DIVIDENDS	0.	73,493.	73,493.
INTEREST	91,850.	3,050.	-88,800.
NET GAIN (LOSS) FROM FORM 4797	-725.	-1,500.	-775.
OTHER INCOME	34,607.	35,302.	695.
TOTAL INCOME	3,169,315.	3,484,701.	315,386.
DEDUCTIONS:			
COMPENSATION OF OFFICERS	0.	14,570.	14,570.
SALARIES AND WAGES LESS EMPLOYMENT CREDITS	1,310,688.	1,330,971.	20,283.
REPAIRS AND MAINTENANCE	394,929.	114,642.	-280,287.
RENTS	27,345.	25,274.	-2,071.
TAXES AND LICENSES	194,152.	170,975.	-23,177.
DEPRECIATION	31,853.	20,679.	-11,174.
ADVERTISING	6,824.	7,111.	287.
PENSION, PROFIT-SHARING, ETC., PLANS	57,052.	59,097.	2,045.
OTHER DEDUCTIONS	1,398,253.	1,546,576.	148,323.
TOTAL DEDUCTIONS	3,421,096.	3,289,895.	-131,201.
TAXABLE INCOME:			
TAXABLE INCOME BEFORE NOL DEDUCTION AND SPECIAL DEDUCTIONS	-251,781.	194,806.	446,587.
NET OPERATING LOSS DEDUCTION	0.	194,806.	194,806.
TAXABLE INCOME	-251,781.	0.	251,781.
TAX COMPUTATION:			
TAX BEFORE CREDITS	0.	0.	0.
TAX AFTER CREDITS	0.	0.	0.
TOTAL TAX	0.	0.	0.
PAYMENTS AND CREDITS:			
BALANCE DUE OR REFUND:			

CORPORATION
Two-Year Comparison

2015

Name WATER PRO, INC.	Employer Identification Number ** - ***2672
--------------------------------	-------------------------------------------------------

Description	Prior Year	Current Year	Increase (Decrease)
SCHEDULE M-1:			
NET INCOME (LOSS) PER BOOKS	-284,546.	152,848.	437,394.
EXCESS OF CAPITAL LOSSES OVER CAPITAL GAINS	0.	14,677.	14,677.
BOOK EXPENSES NOT ON RETURN	32,765.	27,281.	-5,484.
INCOME PER RETURN	-251,781.	194,806.	446,587.
SCHEDULE M-2:			
BALANCE AT BEGINNING OF YEAR - UNAPPROPRIATED RETAINED EARNINGS	3,873,099.	3,588,553.	-284,546.
NET INCOME (LOSS) PER BOOKS	-284,546.	152,848.	437,394.
BALANCE AT END OF YEAR - UNAPPROPRIATED RETAINED EARNINGS	3,588,553.	3,741,401.	152,848.

Form **8879-C**

IRS e-file Signature Authorization for Form 1120

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service

For calendar year 2015, or tax year beginning _____, 2015, ending _____, 20____

2015

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-C and its instructions is at www.irs.gov/form8879c.**

Name of corporation

WATER PRO, INC.

Employer identification number

**** - *** 2672**

Part I Tax Return Information (Whole dollars only)

1 Total income (Form 1120, line 11)	1	3,484,701.
2 Taxable income (Form 1120, line 30)	2	
3 Total tax (Form 1120, line 31)	3	
4 Amount owed (Form 1120, line 34)	4	
5 Overpayment (Form 1120, line 35)	5	

Part II Declaration and Signature Authorization of Officer (Be sure to get a copy of the corporation's return)

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2015 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **EIDE BAILLY LLP** to enter my PIN **20979** as my signature on the corporation's 2015 electronically filed income tax return.
ERO firm name do not enter all zeros

As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2015 electronically filed income tax return.

Officer's signature ▶ _____ Date ▶ _____ Title ▶ **PRESIDENT**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. **87416708216**
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS *e-file* Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

For Paperwork Reduction Act Notice, see instructions.

Form **8879-C** (2015)

LHA

**Application for Automatic Extension of Time To File
Certain Business Income Tax, Information, and Other Returns**

▶ **File a separate application for each return.**

▶ **Information about Form 7004 and its separate instructions is at www.irs.gov/form7004.**

Print or Type	Name WATER PRO, INC.	Identifying number ** - *** 2672
	Number, street, and room or suite no. (If P.O. box, see instructions.) P O BOX 156	
	City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)). DRAPER, UT 84020	

Note. File request for extension by the due date of the return for which the extension is granted. See instructions before completing this form.

Part I Automatic 5-Month Extension

1a Enter the form code for the return that this application is for (see below)

Application Is For:	Form Code	Application Is For:	Form Code
Form 1065	09	Form 1041 (estate other than a bankruptcy estate)	04
Form 8804	31	Form 1041 (trust)	05

Part II Automatic 6-Month Extension

b Enter the form code for the return that this application is for (see below) 12

Application Is For:	Form Code	Application Is For:	Form Code
Form 706-GS(D)	01	Form 1120-ND (section 4951 taxes)	20
Form 706-GS(T)	02	Form 1120-PC	21
Form 1041 (bankruptcy estate only)	03	Form 1120-POL	22
Form 1041-N	06	Form 1120-REIT	23
Form 1041-QFT	07	Form 1120-RIC	24
Form 1042	08	Form 1120S	25
Form 1065-B	10	Form 1120-SF	26
Form 1066	11	Form 3520-A	27
Form 1120	12	Form 8612	28
Form 1120-C	34	Form 8613	29
Form 1120-F	15	Form 8725	30
Form 1120-FSC	16	Form 8831	32
Form 1120-H	17	Form 8876	33
Form 1120-L	18	Form 8924	35
Form 1120-ND	19	Form 8928	36

2 If the organization is a foreign corporation that does not have an office or place of business in the United States, check here

3 If the organization is a corporation and is the common parent of a group that intends to file a consolidated return, check here
If checked, attach a statement, listing the name, address, and Employer Identification Number (EIN) for each member covered by this application.

Part III All Filers Must Complete This Part

4 If the organization is a corporation or partnership that qualifies under Regulations section 1.6081-5, check here

5a The application is for calendar year 2015, or tax year beginning _____, and ending _____

b Short tax year. If this tax year is less than 12 months, check the reason: Initial return Final return
 Change in accounting period Consolidated return to be filed Other (see instructions-attach explanation)

6 Tentative total tax	6	0.
7 Total payments and credits (see instructions)	7	0.
8 Balance due. Subtract line 7 from line 6 (see instructions)	8	0.

U.S. Corporation Income Tax Return

For calendar year 2015 or tax year

beginning _____, ending _____

2015

Department of the Treasury
Internal Revenue Service

▶ Information about Form 1120 and its separate instructions is at www.irs.gov/form1120.

- A Check if:**
- 1a Consolidated return (attach Form 851)
 - b Life/nonlife consolidated return
 - 2 Personal holding co. (attach Sch. PH)
 - 3 Personal service corp. (see instructions)
 - 4 Schedule M-3 attached

TYPE OR PRINT

Name
WATER PRO, INC.

Number, street, and room or suite no. If a P.O. box, see instructions.
P O BOX 156

City or town, state, or province, country and ZIP or foreign postal code
DRAPER, UT 84020

B Employer identification number
**** - *** 2672**

C Date incorporated
01/01/1998

D Total assets (see instructions)
\$ 4,890,242.

E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change

Income	1a Gross receipts or sales	1a	5,067,570.	
	b Returns and allowances	1b		
	c Balance. Subtract line 1b from line 1a	1c		5,067,570.
	2 Cost of goods sold (attach Form 1125-A)	2		1,693,214.
	3 Gross profit. Subtract line 2 from line 1c	3		3,374,356.
	4 Dividends (Schedule C, line 19)	4		73,493.
	5 Interest SEE STATEMENT 1	5		3,050.
	6 Gross rents	6		
	7 Gross royalties	7		
	8 Capital gain net income (attach Schedule D (Form 1120))	8		
	9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	9		-1,500.
10 Other income (attach statement) SEE STATEMENT 2	10		35,302.	
11 Total income. Add lines 3 through 10	11		3,484,701.	
Deductions (See instructions for limitations on deductions.)	12 Compensation of officers (attach Form 1125-E)	12		14,570.
	13 Salaries and wages (less employment credits)	13		1,330,971.
	14 Repairs and maintenance	14		114,642.
	15 Bad debts	15		
	16 Rents	16		25,274.
	17 Taxes and licenses SEE STATEMENT 3	17		170,975.
	18 Interest	18		
	19 Charitable contributions SEE STATEMENT 4 AND SEE STATEMENT 5	19		0.
	20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20		20,679.
	21 Depletion	21		
	22 Advertising	22		7,111.
	23 Pension, profit-sharing, etc., plans	23		59,097.
	24 Employee benefit programs	24		
	25 Domestic production activities deduction (attach Form 8903)	25		
26 Other deductions (attach statement) SEE STATEMENT 6	26		1,546,576.	
27 Total deductions. Add lines 12 through 26	27		3,289,895.	
28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11	28		194,806.	
29a Net operating loss deduction (see instructions) STATEMENT 7	29a	194,806.		
b Special deductions (Schedule C, line 20)	29b			
c Add lines 29a and 29b	29c		194,806.	
Tax, Refundable Credits, and Payments	30 Taxable income. Subtract line 29c from line 28 (see instructions)	30		0.
	31 Total tax (Schedule J, Part I, line 11)	31		0.
	32 Total payments and refundable credits (Schedule J, Part II, line 21)	32		
	33 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	33		
	34 Amount owed. If line 32 is smaller than the total of lines 31 and 33, enter amount owed	34		0.
	35 Overpayment. If line 32 is larger than the total of lines 31 and 33, enter amount overpaid	35		
36 Enter amount from line 35 you want: Credited to 2016 estimated tax ▶ Refunded ▶	36			

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: _____ Date: _____ **PRESIDENT**

May the IRS discuss this return with the preparer shown below? Yes No

Paid Print/Type preparer's name: **CONNIE S. STANGER, CPA** Preparer's signature: _____ Date: _____ Check if self-employed PTIN: **P01339003**

Preparer Use Only Firm's name: **EIDE BAILLY LLP** Firm's EIN: **** - *** 0958**

Firm's address: **5 TRIAD CENTER STE 600 SALT LAKE CITY, UT 84180-1128** Phone no.: **801-532-2200**

Schedule C Dividends and Special Deductions (see instructions)	(a) Dividends received	(b) %	(c) Special deductions (a) x (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3 Dividends on debt-financed stock of domestic and foreign corporations		see instructions	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Total. Add lines 1 through 8			
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members		100	
12 Dividends from certain FSCs		100	
13 Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12			
14 Income from controlled foreign corporations under subpart F (attach Form(s) 5471)			
15 Foreign dividend gross-up			
16 IC-DISC and former DISC dividends not included on lines 1, 2, or 3			
17 Other dividends STMT 8	73,493.		
18 Deduction for dividends paid on certain preferred stock of public utilities			
19 Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4	73,493.		
20 Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b			

Schedule J Tax Computation and Payment (see instructions)

Part I - Tax Computation

1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120))			
2	Income tax. Check if a qualified personal service corporation (see instructions)		2	0.
3	Alternative minimum tax (attach Form 4626)		3	
4	Add lines 2 and 3		4	0.
5a	Foreign tax credit (attach Form 1118)	5a		
b	Credit from Form 8834 (see instructions)	5b		
c	General business credit (attach Form 3800)	5c		
d	Credit for prior year minimum tax (attach Form 8827)	5d		
e	Bond credits from Form 8912	5e		
6	Total credits. Add lines 5a through 5e		6	
7	Subtract line 6 from line 4		7	0.
8	Personal holding company tax (attach Schedule PH (Form 1120))		8	
9a	Recapture of investment credit (attach Form 4255)	9a		
b	Recapture of low-income housing credit (attach Form 8611)	9b		
c	Interest due under the look-back method-completed long-term contracts (attach Form 8697)	9c		
d	Interest due under the look-back method-income forecast method (attach Form 8866)	9d		
e	Alternative tax on qualifying shipping activities (attach Form 8902)	9e		
f	Other (see instructions - attach statement)	9f		
10	Total. Add lines 9a through 9f		10	
11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31		11	0.

Part II - Payments and Refundable Credits

12	2014 overpayment credited to 2015		12	
13	2015 estimated tax payments		13	
14	2015 refund applied for on Form 4466		14	()
15	Combine lines 12, 13, and 14		15	
16	Tax deposited with Form 7004		16	
17	Withholding (see instructions)		17	
18	Total payments. Add lines 15, 16, and 17		18	
19	Refundable credits from:			
a	Form 2439	19a		
b	Form 4136	19b		
c	Form 8827, line 8c	19c		
d	Other (attach statement - see instructions)	19d		
20	Total credits. Add lines 19a through 19d		20	
21	Total payments and credits. Add lines 18 and 20. Enter here and on page 1, line 32		21	

Schedule K Other Information (see instructions)

1	Check accounting method: a <input type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) ▶	Yes	No
2	See the instructions and enter the:		
a	Business activity code no. ▶ <u>541600</u>		
b	Business activity ▶ <u>MANAGEMENT COMPANY</u>		
c	Product or service ▶ <u>MANAGEMENT SERVICES</u>		
3	Is the corporation a subsidiary in an affiliated group or a parent-subsidary controlled group? If "Yes," enter name and EIN of the parent corporation ▶		X
4	At the end of the tax year:		
a	Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G)	X	
b	Did any individual or estate own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part II of Schedule G (Form 1120) (attach Schedule G)		X

Schedule K Other Information continued (see instructions)

	Yes	No
5 At the end of the tax year, did the corporation:		
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation not included on Form 851 , Affiliations Schedule? For rules of constructive ownership, see instructions		X
If "Yes," complete (i) through (iv) below.		

(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock

b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions		X
If "Yes," complete (i) through (iv) below.		

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Country of Organization	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.)		X
If "Yes," file Form 5452 , Corporate Report of Nondividend Distributions.		
If this is a consolidated return, answer here for the parent corporation and on Form 851 for each subsidiary.		

7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of the corporation's stock entitled to vote or (b) the total value of all classes of the corporation's stock?		X
For rules of attribution, see section 318. If "Yes," enter:		
(i) Percentage owned ▶ _____ and (ii) Owner's country ▶ _____		
(c) The corporation may have to file Form 5472 , Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter the number of Forms 5472 attached ▶ _____		

8 Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ <input type="checkbox"/>		
If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.		

9 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ _____		
------------------------------------------------------------------------------------------------------------	--	--

10 Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ _____		
--------------------------------------------------------------------------------------------------------	--	--

11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here ▶ <input type="checkbox"/>		
If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3) must be attached or the election will not be valid.		

12 Enter the available NOL carryover from prior tax years (do not reduce it by any deduction on line 29a.) ▶ \$ 413,545.		
-----------------------------------------------------------------------------------------------------------------------------------------------	--	--

13 Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year and its total assets at the end of the tax year less than \$250,000?		X
If "Yes," the corporation is not required to complete Schedules L, M-1, and M-2. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year. ▶ \$ _____		

14 Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement (see instructions)?		X
If "Yes," complete and attach Schedule UTP.		

15a Did the corporation make any payments in 2015 that would require it to file Form(s) 1099?	X	
------------------------------------------------------------------------------------------------------	----------	--

b If "Yes," did or will the corporation file required Forms 1099?	X	
--------------------------------------------------------------------------	----------	--

16 During this tax year, did the corporation have an 80% or more change in ownership, including a change due to redemption of its own stock?		X
-----------------------------------------------------------------------------------------------------------------------------------------------------	--	----------

17 During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?		X
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	----------

18 Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?		X
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	----------

Schedule L Balance Sheets per Books	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		682,152.		1,805,324.
2a Trade notes and accounts receivable	422,143.		183,001.	
b Less allowance for bad debts	()	422,143.	()	183,001.
3 Inventories		258,611.		260,463.
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (att. stmt.) STMT 9		64,337.		61,533.
7 Loans to shareholders				
8 Mortgage and real estate loans				
9 Other investments (att. stmt.) STMT 10		3,034,794.		2,294,236.
10a Buildings and other depreciable assets	1,283,973.		1,258,313.	
b Less accumulated depreciation	(1,039,279.)	244,694.	(1,040,776.)	217,537.
11a Depletable assets				
b Less accumulated depletion	()		()	
12 Land (net of any amortization)				
13a Intangible assets (amortizable only)				
b Less accumulated amortization	()		()	
14 Other assets (att. stmt.) STMT 11		51,777.		68,148.
15 Total assets		4,758,508.		4,890,242.
Liabilities and Shareholders' Equity				
16 Accounts payable				
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (att. stmt.) STMT 12		761,373.		740,259.
19 Loans from shareholders				
20 Mortgages, notes, bonds payable in 1 year or more				
21 Other liabilities (att. stmt.)				
22 Capital stock: a Preferred stock				
b Common stock	200.	200.	200.	200.
23 Additional paid-in capital		408,382.		408,382.
24 Retained earnings - Appropriated (attach statement)				
25 Retained earnings - Unappropriated		3,588,553.		3,741,401.
26 Adjustments to shareholders' equity (attach statement)				
27 Less cost of treasury stock		()		()
28 Total liabilities and shareholders' equity		4,758,508.		4,890,242.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

Note: The corporation may be required to file Schedule M-3 (see instructions).

1 Net income (loss) per books	152,848.	7 Income recorded on books this year not included on this return (itemize):	
2 Federal income tax per books		Tax-exempt interest \$ _____	
3 Excess of capital losses over capital gains	14,677.	_____	
4 Income subject to tax not recorded on books this year (itemize): _____		8 Deductions on this return not charged against book income this year (itemize):	
5 Expenses recorded on books this year not deducted on this return (itemize):		a Depreciation \$ _____	
a Depreciation \$ _____		b Charitable contributions \$ _____	
b Charitable contributions \$ 23,620.		_____	
c Travel and entertainment ... \$ 3,661.		9 Add lines 7 and 8	
_____	27,281.	10 Income (page 1, line 28) - line 6 less line 9	194,806.
6 Add lines 1 through 5	194,806.		

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1 Balance at beginning of year	3,588,553.	5 Distributions:	
2 Net income (loss) per books	152,848.	a Cash	
3 Other increases (itemize): _____		b Stock	
_____		c Property	
_____		6 Other decreases (itemize): _____	
4 Add lines 1, 2, and 3	3,741,401.	7 Add lines 5 and 6	
		8 Balance at end of year (line 4 less line 7)	3,741,401.

Capital Gains and Losses

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
▶ Information about Schedule D (Form 1120) and its separate instructions is at www.irs.gov/form1120.

2015

Name WATER PRO, INC.	Employer identification number ** - *** 2672
------------------------------------	------------------------------------------------------------

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less				
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked	3.	3.		
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37			4	
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computation)			6	(15,096.)
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h			7	-15,096.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year				
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	349,897.	358,114.	116.	-8,101.
9 Totals for all transactions reported on Form(s) 8949 with Box E checked	150,100.	157,165.	489.	-6,576.
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Enter gain from Form 4797, line 7 or 9			11	
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824			13	
14 Capital gain distributions			14	
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h			15	-14,677.

Part III Summary of Parts I and II		
16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16	
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17	
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns	18	

Note: If losses exceed gains, see **Capital losses** in the instructions.

Cost of Goods Sold

(Rev. December 2012)

▶ Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.

OMB No. 1545-2225

Department of the Treasury
Internal Revenue Service

▶ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

Name **WATER PRO, INC.** Employer Identification number ****-***2672**

1 Inventory at beginning of year	1	258,611.
2 Purchases	2	1,695,066.
3 Cost of labor	3	
4 Additional section 263A costs (attach schedule)	4	
5 Other costs (attach schedule)	5	
6 Total. Add lines 1 through 5	6	1,953,677.
7 Inventory at end of year	7	260,463.
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return (see instructions)	8	1,693,214.

- 9 a** Check all methods used for valuing closing inventory:
- (i) Cost
 - (ii) Lower of cost or market
 - (iii) Other (Specify method used and attach explanation) ▶ _____
- b** Check if there was a writedown of subnormal goods ▶
- c** Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) ▶
- d** If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO **9d** _____
- e** If property is produced or acquired for resale, do the rules of Section 263A apply to the corporation? Yes No
- f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? Yes No
If "Yes," attach explanation.

Information on Certain Persons Owning the Corporation's Voting Stock

▶ Attach to Form 1120.

Name WATER PRO, INC.	Employer identification number (EIN) **-***2672
------------------------------------	---------------------------------------------------------------

Part I **Certain Entities Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4a). Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Percentage Owned in Voting Stock
DRAPER IRRIGATION COMPANY	** - ***5969	CORPORATION	UNITED STATES	100.00%

Part II **Certain Individuals and Estates Owning the Corporation's Voting Stock.** (Form 1120, Schedule K, Question 4b). Complete columns (i) through (iv) below for any individual or estate that owns directly 20% or more, or owns, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Percentage Owned in Voting Stock

Compensation of Officers

(Rev. December 2013)

▶ **Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.**

Department of the Treasury
Internal Revenue Service

▶ **Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.**

Name WATER PRO, INC.	Employer Identification number **-***2672
--------------------------------	-----------------------------------------------------

Note. Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

(a) Name of officer	(b) Social security number	(c) Percent of time devoted to business	Percent of stock owned		(f) Amount of compensation	
			(d) Common	(e) Preferred		
KENT WARE	***-**-2988				4,600.	
STEPHEN TRIPP	***-**-9176				4,690.	
RYAN DAW	***-**-4300				5,280.	
2 Total compensation of officers					2	14,570.
3 Compensation of officers claimed on Form 1125-A or elsewhere on return					3	
4 Subtract line 3 from line 2. Enter the result here and on Form 1120, page 1, line 12 or the appropriate line of your tax return					4	14,570.

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property) OTHER

OMB No. 1545-0172

2015

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Attachment
Sequence No. 179

Name(s) shown on return

Business or activity to which this form relates

Identifying number

WATER PRO, INC.

OTHER DEPRECIATION

**** - ***2672**

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2014 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	760.
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	46.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2015	17	19,353.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B - Assets Placed in Service During 2015 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property	707.	5	HY	200DB	141.
c	7-year property	53.	7	HY	200DB	8.
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property	/	27.5 yrs.	MM	S/L	
		/	27.5 yrs.	MM	S/L	
i	Nonresidential real property	/	39 yrs.	MM	S/L	
		/		MM	S/L	

Section C - Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year	/	40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	371.
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	20,679.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? **Yes** **No** **24b** If "Yes," is the evidence written? **Yes** **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--------------------------------------------------	-------------------------------------	--------------------------------------------------	-------------------------------	--------------------------------------------------------------------	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25**

26 Property used more than 50% in a qualified business use:

GIS TRUCK	101508	100.00 %	27,181.	16,021.5	200DBHY	371.
INSPECTIONS TRUCK	101508	100.00 %	22,107.	11,054.5	200DBHY	

27 Property used 50% or less in a qualified business use:

		%			S/L -	
		%			S/L -	
		%			S/L -	

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28** 371.

29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29**

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year ...												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2015 tax year:					
43 Amortization of costs that began before your 2015 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

▶ **Attach to your tax return.**
▶ **Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.**

Name(s) shown on return

Identifying number

WATER PRO, INC.

**** - *** 2672**

1 Enter the gross proceeds from sales or exchanges reported to you for 2015 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions)

1

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
GIS TRUCK	101508	010115	6,500.	19,181.	27,181.	-1,500.

3 Gain, if any, from Form 4684, line 39	3	
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4	
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5	
6 Gain, if any, from line 32, from other than casualty or theft	6	
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows:	7	-1,500.
<p>Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.</p> <p>Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.</p>		
8 Nonrecaptured net section 1231 losses from prior years (see instructions) SEE STATEMENT 14	8	
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)	9	

Part II Ordinary Gains and Losses

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

(a) Description of property	(b) Date acquired	(c) Date sold	(d) Gross sales price	(e) Depreciation allowed	(f) Cost or other basis	(g) Gain or (loss)

11 Loss, if any, from line 7	11	(1,500.)
12 Gain, if any, from line 7 or amount from line 8, if applicable	12	
13 Gain, if any, from line 31	13	
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17 Combine lines 10 through 16	17	-1,500.
<p>18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below:</p> <p>a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions</p> <p>b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14</p>		
18a		
18b		

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A		
B		
C		
D		

These columns relate to the properties on lines 19A through 19D.		Property A	Property B	Property C	Property D
20	Gross sales price (Note: See line 1 before completing.)	20			
21	Cost or other basis plus expense of sale	21			
22	Depreciation (or depletion) allowed or allowable	22			
23	Adjusted basis. Subtract line 22 from line 21	23			
24	Total gain. Subtract line 23 from line 20	24			
25	If section 1245 property:				
a	Depreciation allowed or allowable from line 22	25a			
b	Enter the smaller of line 24 or 25a	25b			
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.				
a	Additional depreciation after 1975	26a			
b	Applicable percentage multiplied by the smaller of line 24 or line 26a	26b			
c	Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c			
d	Additional depreciation after 1969 and before 1976	26d			
e	Enter the smaller of line 26c or 26d	26e			
f	Section 291 amount (corporations only)	26f			
g	Add lines 26b, 26e, and 26f	26g			
27	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).				
a	Soil, water, and land clearing expenses	27a			
b	Line 27a multiplied by applicable percentage	27b			
c	Enter the smaller of line 24 or 27b	27c			
28	If section 1254 property:				
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion	28a			
b	Enter the smaller of line 24 or 28a	28b			
29	If section 1255 property:				
a	Applicable percentage of payments excluded from income under section 126	29a			
b	Enter the smaller of line 24 or 29a	29b			

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less

(see instructions.)

	(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33
34	Recomputed depreciation (see instructions)	34
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

2015
 Attachment
 Sequence No. **12A**

Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.
File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

WATER PRO, INC.

Social security number or taxpayer identification no.
 ** - *** 2672

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (B)** Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- (C)** Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	LORD ABBETT	02/27/15	03/25/15	1.	1.			0.
	PIMCO LOW	02/27/15	03/25/15	2.	2.			0.

2 Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) **▶**

	3.	3.		
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Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification no.

WATER PRO, INC.

**** - *** 2672**

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- (E)** Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- (F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See instructions.		(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						(f) Code(s)	(g) Amount of adjustment	
	PIMCO LOW	VARIOUS	03/25/15	349,897.	358,114.	W	116.	<8,101.>
2 Totals.	Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶			349,897.	358,114.		116.	<8,101.>

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

Social security number or taxpayer identification no. ** - *** 2672

WATER PRO, INC.

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1. Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
(X) (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
(F) Long-term transactions not reported to you on Form 1099-B

Table with columns: 1, (a) Description of property, (b) Date acquired, (c) Date sold or disposed of, (d) Proceeds (sales price), (e) Cost or other basis, (f) Code(s), (g) Amount of adjustment, (h) Gain or (loss). Includes rows for LORD ABBETT and PIMCO LOW, and a Totals row at the bottom.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Water Pro, Inc.
P O Box 156
Draper, UT 84020

Employer Identification Number: 87-0572672

For the Year Ending December 31, 2015

Water Pro, Inc. is making the de minimis safe harbor election under Reg. Sec. 1.263(a)-1(f).

FORM 1120	INTEREST INCOME	STATEMENT	1
DESCRIPTION	US	OTHER	
INTEREST INCOME		3,050.	
TOTAL TO FORM 1120, LINE 5		3,050.	

FORM 1120	OTHER INCOME	STATEMENT	2
DESCRIPTION		AMOUNT	
BAD DEBT RECOVERIES		35,302.	
TOTAL TO FORM 1120, LINE 10		35,302.	

FORM 1120	TAXES AND LICENSES	STATEMENT	3
DESCRIPTION		AMOUNT	
PAYROLL TAXES		97,611.	
PROPERTY TAX		73,264.	
STATE TAX		100.	
TOTAL TO FORM 1120, LINE 17		170,975.	

	CURRENT YEAR CONTRIBUTIONS	STATEMENT	4
DESCRIPTION		AMOUNT	
DONATIONS		23,620.	
TOTAL CURRENT YEAR CONTRIBUTIONS		23,620.	

CONTRIBUTIONS

STATEMENT 5

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT

CONTRIBUTION SUBJECT TO LIMITATION:

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2010	11,593
FOR TAX YEAR 2011	18,179
FOR TAX YEAR 2012	
FOR TAX YEAR 2013	22,156
FOR TAX YEAR 2014	29,248

TOTAL CARRYOVER	81,176
CURRENT YEAR CONTRIBUTIONS	23,620

TOTAL CONTRIBUTIONS AVAILABLE	104,796
TAXABLE INCOME LIMITATION AS ADJUSTED	0

EXCESS CONTRIBUTIONS	104,796
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ALLOWABLE CONTRIBUTIONS DEDUCTION	0
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TOTAL CONTRIBUTION DEDUCTION	0
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FORM 1120	OTHER DEDUCTIONS	STATEMENT 6
DESCRIPTION		AMOUNT
AUTO AND TRUCK EXPENSE		114,713.
BANK CHARGES		56,886.
BLUE STAKE EXPENSE		9,390.
COMPANY MEETINGS/FUNCTIONS		28,193.
DAMAGE SETTLEMENT		6,709.
DIRECTOR EXPENSE		66,855.
DUES AND SUBSCRIPTIONS		4,049.
INSURANCE		517,496.
JANITORIAL		10,536.
LEGAL AND PROFESSIONAL		351,509.
MAP/SURVEY/CITY PERMIT EXPENSE		28,610.
MEALS AND ENTERTAINMENT		3,661.
MISC EMPLOYEE EXP		350.
OFFICE EXPENSE		11,325.
OTHER EXPENSES		121,775.
POSTAGE		54,001.
PRINTING		20,014.
SCADA EXPENSE		19,270.
SECURITY		2,424.
SUPPLIES		29,121.
TELEPHONE		29,845.
TOOLS		64.
TRAINING/SCHOOL		11,467.
TRAVEL		10,176.
UNIFORMS		22,059.
UTILITIES		16,078.
TOTAL TO FORM 1120, LINE 26		1,546,576.

NET OPERATING LOSS DEDUCTION				STATEMENT 7
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/13	457,652.	279,403.	178,249.	178,249.
12/31/14	235,296.		235,296.	235,296.
NOL AVAILABLE THIS YEAR			413,545.	413,545.

SCHEDULE C	OTHER DIVIDENDS	STATEMENT	8
DESCRIPTION		AMOUNT	
MERRILL LYNCH			73,493.
TOTAL TO SCHEDULE C, LINE 17			73,493.

SCHEDULE L	OTHER CURRENT ASSETS	STATEMENT	9
DESCRIPTION		BEGINNING OF TAX YEAR	END OF TAX YEAR
EMPLOYEE RECEIVABLE		64,337.	61,533.
TOTAL TO SCHEDULE L, LINE 6		64,337.	61,533.

SCHEDULE L	OTHER INVESTMENTS	STATEMENT	10
DESCRIPTION		BEGINNING OF TAX YEAR	END OF TAX YEAR
MERRILL LYNCH ACCOUNT		3,034,794.	2,294,236.
TOTAL TO SCHEDULE L, LINE 9		3,034,794.	2,294,236.

SCHEDULE L	OTHER ASSETS	STATEMENT	11
DESCRIPTION		BEGINNING OF TAX YEAR	END OF TAX YEAR
BEAR CANYON INTAKE BOND		15,510.	15,510.
CORNER CANYON RESV BOND		9,637.	9,637.
DRAPER CITY DIGGING BOND		10,000.	10,000.
LAND DISTURBANCE PERMIT		33,001.	33,001.
STOCK PURCHASE		-16,371.	0.
TOTAL TO SCHEDULE L, LINE 14		51,777.	68,148.

SCHEDULE L	OTHER CURRENT LIABILITIES	STATEMENT 12	
DESCRIPTION		BEGINNING OF TAX YEAR	END OF TAX YEAR
ACCRUED LIABILITIES		230,803.	117,595.
BONDS		530,470.	622,564.
STATE ACCRUED TAXES		100.	100.
TOTAL TO SCHEDULE L, LINE 18		761,373.	740,259.

UNUSED CAPITAL LOSS DEDUCTION			STATEMENT 13	
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	
12/31/14	15,096.	0.	15,096.	
UNUSED CAPITAL LOSS AVAILABLE THIS YEAR			15,096.	

FORM 4797	SECTION 1231 LOSSES FROM PRIOR YEARS		STATEMENT 14
	LOSS SUSTAINED	LOSS PREVIOUSLY RECAPTURED	LOSS REMAINING
TAX YEAR 2010			
TAX YEAR 2011	85		85
TAX YEAR 2012	6,533		6,533
TAX YEAR 2013			
TAX YEAR 2014	725		725
TOTAL REMAINING SECTION 1231 LOSSES FROM PRIOR YEARS			7,343

2015 TAX RETURN FILING INSTRUCTIONS

UTAH FORM TC-20

FOR THE YEAR ENDING
December 31, 2015

Prepared for	Water Pro, Inc. P O Box 156 Draper, UT 84020
Prepared by	Eide Bailly LLP 5 Triad Center Ste 600 Salt Lake City, UT 84180-1128
To be signed and dated by	Not applicable
Amount of tax	Total tax \$ 100.00 Less: payments and credits \$ 100.00 Plus: other amount \$ 0.00 Plus: interest and penalties \$ 0.00 No pmt required \$
Overpayment	Credited to your estimated tax \$ 0.00 Other amount \$ 0.00 Refunded to you \$ 0.00
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	This return has qualified for electronic filing. Please review your return for completeness and accuracy. We will then transmit your return electronically to the USTC.
Return must be mailed on or before	Not applicable
Special Instructions	Do not mail the paper copy of the return to the USTC.

581342
04-01-15

CUT HERE

SEPARATE AND RETURN ONLY THE BOTTOM COUPON WITH PAYMENT.

CUT HERE

**Corporation/Partnership
Payment Coupon**

Mail to: Utah State Tax Commission, 210 N 1950 W, SLC UT 84134-0180

TC-559
Rev. 12/11

GCH

Tax year ending (mm/dd/yyyy) 12 31 2015

Estimated payment:

<input type="checkbox"/> 1st qtr.	<input type="checkbox"/> 3rd qtr.	<input checked="" type="checkbox"/> Extension payment
<input type="checkbox"/> 2nd qtr.	<input type="checkbox"/> 4th qtr.	<input type="checkbox"/> Return payment

USTC Use Only

Name of corporation/partnership WATER PRO, INC.	EIN *****2672
-----------------------------------------------------------	-------------------------

Address P O BOX 156	
-------------------------------	--

City DRAPER	State UT	ZIP code 84020
-----------------------	--------------------	--------------------------

Payment amount enclosed \$ 100 00

**Make check or money order payable to the Utah State Tax Commission.
Do not send cash. Do not staple check to coupon. Detach check stub.**

**C
P
T**

20501 [REDACTED]
 1019 [REDACTED]

Utah Corporation Franchise and Income Tax Return

**2015
TC-20**

For calendar year 2015 or fiscal year (mm/dd/yyyy):
beginning - and ending -

- Amended Return (code 1-4)
- Mark "X" if you filed federal form 8886

Mark "X" if this is a new address:

- Physical address
- Mailing address

Corporation name
WATER PRO, INC.

Address
P O BOX 156

City
DRAPER

Foreign country (if not U.S.)

State ZIP + 4
UT 84020

Telephone number
8015712232

Employer Identification Number
*******2672**

UT Incorporation/Qualification No.

- 1 If this corporation conducted any Utah business activity during the taxable year, enter "X" • 1 **X**
- 2 If this corporation joined in a federal consolidated return, enter "X" • 2
- 3 Mark "X" (one only) if this return constitutes a:
 - 3a "water's edge" combined report
 - 3b "water's edge" election under UC §59-7-402(2)
 - 3c "worldwide" combined report
- 4 If this corporation made an election for any member of the federal affiliated group during the taxable year, enter "X"
 - 4a IRC Section 338
 - 4b IRC Section 338(h)(10)
 - 4c IRC Section 336(e)
- 5 If this return includes any financial institution defined by Tax Commission Rule R865-6F-32, enter "X" • 5
- 6 Ultimate U.S. parent's name EIN • 6
- 7 Total tax - enter amount from Schedule A, line 26 • 7 **100.**
- 8 Total refundable credits and prepayments - enter amount from Schedule A, line 30 • 8 **100.**
- 9 **Tax Due** - subtract line 8 from line 7 (not less than zero) • 9
- 10 Penalties and interest (see instructions) 10 **0.**
- 11 **Total Due - Pay this amount** - add line 9 and line 10 • 11 **0.**
- 12 **Overpayment** - subtract the sum of line 7 and line 10 from line 8 (not less than zero) 12
- 13 Amount of overpayment on line 12 to be applied to next taxable year • 13
- 14 **Refund** - subtract line 13 from line 12 • 14 **0.**
- 15 Mark "X" for each quarterly estimated prepayment meeting an exception (attach documentation):
 - 1st
 - 2nd
 - 3rd
 - 4th

USTC USE ONLY

Under penalties of perjury, I declare to the best of my knowledge and belief, this return and accompanying schedules are true, correct and complete.

SIGN HERE Signature of officer	Date	Title PRESIDENT	"X" if USTC may discuss this return with preparer below: X
Paid Preparer's Section	Preparer's signature	Date	Preparer's PTIN • P01339003
	Firm's name and address EIDE BAILLY LLP 5 TRIAD CENTER STE 600 SALT LAKE CITY UT 841801128		Preparer's EIN • *****0958

1 Date of incorporation: 01/01/1998 State or country in which incorporated: UTAH
mm/dd/yyyy

2 If this corporation is dissolved or withdrawn, see Dissolution or Withdrawal in the General Instructions.

3 If this corporation at any time during its tax year owned more than 50 percent of the voting stock of another corporation(s), provide the following for each corporation so owned. Attach additional pages if needed.

Name of corporation:

Address:

City, State, ZIP Code:

Percent of stock owned: % Date stock acquired: mm/dd/yyyy

4 If more than 50 percent of the voting stock of this corporation is owned by another corporation, provide the following information about the other corporation.

Name of corporation: DRAPER IRRIGATION COMPANY

Address: 12421 SOUTH 800 EAST

City, State, ZIP Code: DRAPER UT 84020

Percent of stock owned: 100.0000 %

5 Check here if this corporation or its subsidiary(ies) had a change in control or ownership or acquired control or ownership of any other legal entity this year.

6 Enter the location where the corporate books and records are maintained:

7 Enter the state or country of commercial domicile: UTAH

• 8 Enter the year-end date of the last year for which a federal examination has been completed: mm/dd/yyyy

Under separate cover, send a summary and supporting schedules for all federal adjustments and the federal tax liability for each year for which federal audit adjustments have not been reported to the Tax Commission. Include the date of final determination. Send the information to:

Auditing Division, Utah State Tax Commission, 210 North 1950 West, Salt Lake City, UT 84134-2000

• 9 Enter the year-end dates of years with federal examinations now in progress, and/or final determination of past examinations still pending.

mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy

• 10 Enter the year-end dates of years for which extensions for proposing additional assessments of federal tax were agreed to with the Internal Revenue Service.

mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy mm/dd/yyyy

Note: Utah Code §59-7-519 extends the Statute of Limitations for tax assessment if federal audit adjustments are not fully reported.

1	Unadjusted income (loss) before NOL and special deductions from federal form 1120, line 28	• 1	194,806.
2	Additions to unadjusted income from Schedule B, line 15	• 2	
3	Add line 1 and line 2	3	194,806.
4	Subtractions from unadjusted income from Schedule C, line 16	• 4	14,677.
5	Adjusted income (loss) - subtract line 4 from line 3	• 5	180,129.
6	Utah net nonbusiness income from Schedule H, line 14	• 6	
7	Non-Utah net nonbusiness income from Schedule H, line 28	• 7	
8	Total nonbusiness income net of expenses - add line 6 and line 7	8	
9	Apportionable income (loss) before contributions deduction - subtract line 8 from line 5	• 9	180,129.
10	Utah contributions deduction from Schedule D, line 6	• 10	18,013.
11	Apportionable income (loss) - subtract line 10 from line 9	11	162,116.
12	Apportionment fraction - enter 1.000000, or Schedule J, line 9, 13 or 14, if applicable	12	1.000000
13	Apportioned income (loss) - multiply line 11 by line 12	• 13	162,116.
14	Utah net nonbusiness income (from line 6 above)	14	
15	Utah income (loss) before Utah net loss deduction - add line 13 and line 14	• 15	162,116.
	If line 15 is a loss and you elected to forego the federal net operating loss carryback, do you elect to forego the Utah loss carryback? If no box is checked, the loss must be treated as a carryback. Use form TC-20L to claim a refund of prior year tax for a loss carryback.	•	Yes • No
16	Utah net loss carried forward from prior years (attach documentation)	• 16	389,212.
17	Net Utah taxable income (loss) - subtract line 16 from line 15	• 17	-227,096.
18	Calculation of tax (see instructions):		
	a Multiply line 17 by 5% (.05) (not less than zero)	18a	0.
	b Minimum tax - enter \$100 or amount from Schedule M, line b	• 18b	100.
	Tax amount - enter the greater of line 18a or line 18b	• 18	100.
19	Interest on installment sales	• 19	
20	Recapture of low-income housing credit	• 20	
21	Total tax - add lines 18 through 20	• 21	100.
	Carry to Schedule A, page 2, line 22		

22	Enter tax from Schedule A, page 1, line 21			22	100.
23	Nonrefundable credits (see instructions for two-digit codes)				
	Code	Amount	Code	Amount	
	• 23a		• 23b		
	• 23c		• 23d		
	• 23e		• 23f		
	Total nonrefundable credits - add lines 23a through 23f			• 23	
24	Net tax - subtract line 23 from line 22 (cannot be less than line 18b or less than zero)			• 24	100.
25	Utah use tax			• 25	
26	Total tax - add line 24 and line 25 Enter here and on TC-20, line 7			• 26	100.
27	Refundable credits (see instructions for two-digit codes)				
	Code	Amount	Code	Amount	
	• 27a		• 27b		
	• 27c		• 27d		
	Total refundable credits - add lines 27a through 27d			• 27	
28	Prepayments from Schedule E, line 4			• 28	100.
29	Amended return only (see instructions)			• 29	
30	Total refundable credits and prepayments - add lines 27 through 29 Enter here and on TC-20, line 8			• 30	100.

1	Interest from state obligations	• 1
2	a Income taxes paid to any state	• 2a
	b Franchise or privilege taxes paid to any state	• 2b
	c Corporate stock taxes paid to any state	• 2c
	d Any income, franchise or capital stock taxes imposed by a foreign country	• 2d
	e Business and occupation taxes paid to any state	• 2e
3	Safe harbor lease adjustments	• 3
4	Capital loss carryover	• 4
5	Federal deductions taken previously on a Utah return	• 5
6	Federal charitable contributions from federal form 1120, line 19	• 6
7	Gain (loss) on IRC Sections 338(h)(10) or 336(e)	• 7
8	Adjustments due to basis difference	• 8
9	Expenses attributable to 50 percent unitary foreign dividend exclusion	• 9
10	Installment sales income previously reported for federal but not Utah purposes	• 10
11	Non-qualified withdrawal from Utah Educational Savings Plan (UESP) 529 account	• 11
12	Income (loss) from IRC Section 936 corporations	• 12
13	Foreign income (loss) for worldwide combined filers	• 13
14	Income (loss) of unitary corporations not included in federal consolidated return	• 14
15	Total additions - add lines 1 through 14 Enter here and on Schedule A, line 2	• 15

1	Intercompany dividend elimination (see instructions)	• 1	
2	Foreign dividend gross-up	• 2	
3	Net capital loss	• 3	14,677.
4	a Federal jobs credit salary reduction	• 4a	
	b Federal research and development credit expense reduction	• 4b	
	c Federal orphan drug credit clinical testing expense reduction	• 4c	
	d Expense reduction for other federal credits (attach schedule)	• 4d	
	e Federal qualified tax credit bond credit, income increase	• 4e	
	f Federal qualified zone academy bond credit, income increase	• 4f	
5	Safe harbor lease adjustments	• 5	
6	Federal income previously taxed by Utah	• 6	
7	Fifty percent exclusion for dividends from unitary foreign subsidiaries	• 7	
8	Fifty percent exclusion for foreign operating company income (loss)	• 8	
9	Gain (loss) on stock sale not recognized for federal purposes (but included in taxable income) when IRC Section 338(h)(10) or 336(e) has been elected	• 9	
10	Basis adjustments	• 10	
11	Interest expense not deducted on federal return under IRC Sections 265(b) or 291(e)	• 11	
12	Dividends received from admitted insurance company subsidiaries exempt under UC §59-7-102(1)(c)	• 12	
13	Contributions to Utah Educational Savings Plan (UESP) 529 account(s)	• 13	
14	Dividends received or deemed received by a member of the unitary group from a captive REIT	• 14	
15	IRC Section 857(b)(2)(E) deduction from a captive REIT	• 15	
16	Total subtractions - add lines 1 through 15 Enter here and on Schedule A, line 4	• 16	14,677.

20507 **Schedule D - Utah Contributions Deduction**
 EIN ** - *** 2672

TC-20, Sch. D
 2015

1	Apportionable income before contributions deduction from Schedule A, line 9 If a loss, no contribution deduction is allowed	• 1	180,129.
2	Utah contribution limitation - multiply line 1 by 10% (.10) (not less than zero)	2	18,013.
3	Current year contributions	• 3	23,620.
4	Utah contributions carryforward (attach schedule)	• 4	81,294.
5	Total contributions available - add line 3 and line 4	5	104,914.
6	Utah contributions deduction - lesser of line 2 or line 4 Enter here and on Schedule A, line 10	• 6	18,013.
7	Contribution carryover to next year - subtract line 6 from line 5	• 7	86,901.

Schedule E - Prepayments of Any Type

TC-20, Sch. E

1	Overpayment applied from prior year	1	
2	Extension prepayment Date: Check no.: Enter the date and amount of any extension prepayment. If paid by check, enter the check number.	2	100.
3	Other prepayments (attach additional pages if necessary) Enter the date and amount of any prepayment for the filing period. If paid by check, enter the check number.		
	a Date: Check no.: 3a		
	b Date: Check no.: 3b		
	c Date: Check no.: 3c		
	d Date: Check no.: 3d		
	Total of all prepayments - add lines 3a through 3d	3	
4	Total prepayments - add lines 1 through 3 Enter here and on Schedule A, line 28	4	100.

UT TC-20		UTAH NET LOSS CARRIED FORWARD FROM PRIOR YEARS		STATEMENT	1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING		
12/31/13	457,652.	318,833.	138,819.		
12/31/14	250,393.	0.	250,393.		
NET LOSS CARRYFORWARD AVAILABLE THIS YEAR			389,212.		

UT TC-20		UTAH CONTRIBUTION CARRYFORWARD		STATEMENT	2
FOR FIFTH PRIOR YEAR					
FOR FOURTH PRIOR YEAR			8,768.		
FOR THIRD PRIOR YEAR			21,122.		
FOR SECOND PRIOR YEAR			22,156.		
FOR FIRST PRIOR YEAR			29,248.		
TOTAL CARRYFORWARD TO FORM TC-20, SCHEDULE D, LINE 4			81,294.		

Draper Irrigation Company 2015 Tax Return

STATEMENT THAT THIS IS A TAX RETURN NOT A FINANCIAL STATEMENT

The accompanying federal income tax return does **NOT** constitute a financial statement. We have not audited, reviewed or compiled the accompanying income tax return and, accordingly, do not express an opinion or any other form of assurance on it.

An income tax return is not intended to constitute financial statements prepared in accordance with generally accepted accounting principles. Accordingly, it does not necessarily include all financial information or disclosures required by generally accepted accounting principles. If the omitted financial information or disclosures were included with the tax return, they might influence the users' conclusions about the taxpayer's financial position, results of operations and cash flows. Accordingly, this income tax return is not designed to be used in lieu of financial statements.

RECORD RETENTION

Copies of your tax returns are enclosed for your files. It is your responsibility to retain copies of your tax information. We recommend the following guidelines:

- Tax returns – keep indefinitely.
- Supporting documentation – keep for 8 years.
- Records supporting your tax basis in personal, investment and business assets and gift documentation – keep indefinitely.

Please note: Eide Bailly retains copies of tax returns, workpapers and other tax information for a period of eight years. After that, we dispose of all records. If you have questions regarding retention of tax records, please contact us.

EIDE BAILLY LLP
5 TRIAD CENTER STE 600
SALT LAKE CITY, UT 84180-1128

DRAPER IRRIGATION COMPANY
12421 SOUTH 800 EAST; P.O. BOX 156
DRAPER, UT 84020



Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to paper size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "Page Scaling" selection box in the Adobe "Print" dialog.

CLIENT'S COPY



CPAs & BUSINESS ADVISORS

March 7, 2016

Draper Irrigation Company
12421 South 800 East; P.O. Box 156
Draper, UT 84020

Draper Irrigation Company:

Enclosed is the 2015 Exempt Organization return, as follows...

2015 Form 990

2015 irs e-file signature authorization for an exempt organization (form 8879-eo)

Please review the return for completeness and accuracy.

In addition, we have included a public disclosure copy of the Form 990 and Form 990-T (if applicable). All exempt organizations are required to have a copy of its current year Form 990 and two prior year returns available for public inspection. If the Form 990 includes a Schedule of Contributors (Schedule B), we have removed the names and addresses of contributors from this return, as this information is not open to public inspection. Only organizations exempt under 501(c)(3) must make the current year Form 990-T and two prior year returns available. You should sign the copy of these returns and keep them available at your primary office location.

We recommend that you use certified mail with post marked receipt for proof of timely filing.

We have prepared the return from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

www.eidebailly.com

Many states require legal entities to register with them in order to do business in their state. Please remember to keep your registration active and current for each state that you have business activities.

Sincerely,

Connie S. Stanger, CPA

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING
December 31, 2015

Prepared for	Draper Irrigation Company 12421 South 800 East; P.O. Box 156 Draper, UT 84020
Prepared by	Eide Bailly LLP 5 Triad Center Ste 600 Salt Lake City, UT 84180-1128
Amount due or refund	Not applicable
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-EO to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-EO to us by May 16, 2016.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2015, or fiscal year beginning _____, 2015, and ending _____, 20____

2015

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**

▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**

Name of exempt organization

Employer identification number

DRAPER IRRIGATION COMPANY

87-0215969

Name and title of officer

DARRIN L JENSEN

CEO

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b <u>9,740,490.</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2015 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize EIDE BAILLY LLP to enter my PIN 22640
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

87416708216

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

A For the 2015 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization DRAPER IRRIGATION COMPANY Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 12421 SOUTH 800 EAST; P.O. BOX 156 City or town, state or province, country, and ZIP or foreign postal code DRAPER, UT 84020 F Name and address of principal officer: DARRIN L. JENSEN SAME AS C ABOVE	D Employer identification number 87-0215969 E Telephone number 801 571 2232 G Gross receipts \$ 9,740,490. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (12) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ N/A		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
L Year of formation: 1888		M State of legal domicile: UT

Part I Summary

1	Briefly describe the organization's mission or most significant activities: MUTUAL DITCH OR IRRIGATION COMPANY		
2	Check this box <input type="checkbox"/> 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	7
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
8	Contributions and grants (Part VIII, line 1h)	8	0.
9	Program service revenue (Part VIII, line 2g)	9	7,912,779.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	1,464,085.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	525,446.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	9,902,310.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13	0.
14	Benefits paid to or for members (Part IX, column (A), line 4)	14	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	1,845,706.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16a	0.
16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.	16b	0.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	17	5,807,934.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	7,653,640.
19	Revenue less expenses. Subtract line 18 from line 12	19	2,248,670.
20	Total assets (Part X, line 16)	20	63,726,256.
21	Total liabilities (Part X, line 26)	21	9,627,071.
22	Net assets or fund balances. Subtract line 21 from line 20	22	54,099,185.

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 DARRIN L. JENSEN, CEO Type or print name and title	Date			
Paid Preparer Use Only	Print/Type preparer's name CONNIE S. STANGER, CPA	Preparer's signature 	Date 	Check if self-employed <input type="checkbox"/>	PTIN P01339003
	Firm's name ▶ EIDE BAILLY LLP	Firm's EIN ▶ 45-0250958			
	Firm's address ▶ 5 TRIAD CENTER STE 600 SALT LAKE CITY, UT 84180-1128		Phone no. 801-532-2200		

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III []

1 Briefly describe the organization's mission:
MUTUAL DITCH OR IRRIGATION COMPANY

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 [X] 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 [X] 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 \$ including grants of \$) (Revenue \$)
TO PROVIDE CULINARY AND IRRIGATION WATER TO SHAREHOLDERS

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

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Main table with columns for question number, description, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, and charitable contributions.

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

		Yes	No
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
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?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?		X
11b	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	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
15a	a The organization's CEO, Executive Director, or top management official		X
15b	b Other officers or key employees of the organization		X
	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?		X
16b	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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 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: **DARRIN JENSEN - 801-571-2232**
12421 S 800 E, DRAPER, UT 84020

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

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

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

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) STEPHEN TRIPP PRESIDENT	1.00	X		X				0.	4,690.	0.
(2) GEORGE GREENWOOD DIRECTOR	1.00	X						0.	4,800.	0.
(3) GREG MATIS DIRECTOR	1.00	X						0.	4,800.	0.
(4) DALE SMITH DIRECTOR	1.00	X						0.	4,800.	0.
(5) KENT WARE VICE PRESIDENT	1.00	X		X				0.	4,600.	0.
(6) RYAN DAW SECRETARY	2.00	X		X				0.	5,280.	0.
(7) JAY WEBB DIRECTOR	1.00	X						0.	4,800.	0.
(8) DARRIN L. JENSEN GM/CEO	1.00 50.00			X				0.	180,161.	25,675.
(9) DAVID GARDNER ASST GENERAL MANAGER	1.00 50.00					X		0.	139,747.	21,564.

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			
1b Sub-total							0.	353,678.	47,239.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							0.	353,678.	47,239.	

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 **0**

	Yes	No
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		X
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	X	
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		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
NONE		

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 **0**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	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					
Program Service Revenue	2 a WATER SALES	Business Code 221000	6,618,412.	6,618,412.		
	b CONNECTION/METER FEES	221000	626,700.	626,700.		
	c SYSTEM RENTAL INCOME	221000	534,960.	534,960.		
	d SYSTEM BUY-IN FEE	221000	183,060.	183,060.		
	e CONSTRUCTION INSPECT FEE	221000	73,245.	73,245.		
	f All other program service revenue	221000	17,325.	17,325.		
	g Total. Add lines 2a-2f		8,053,702.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)				
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	1,500,000.			
		b Less: cost or other basis and sales expenses		0.		
		c Gain or (loss)	1,500,000.			
d Net gain or (loss)			1,500,000.	1,500,000.		
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 MISC INCOME	900099	186,788.	186,788.			
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		186,788.			
12 Total revenue. See instructions.		9,740,490.	9,740,490.	0.	0.	

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	1,177,322.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	516,802.			
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	452,413.			
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	44,736.			
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	299,523.			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,865,243.			
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CULINARY WATER EXP	1,260,010.			
b REPAIRS/MAINTENANCE	728,463.			
c SYSTEM RENTAL EXPENSE	534,960.			
d IRRIGATION WATER EXP	338,265.			
e All other expenses	467,026.			
25 Total functional expenses. Add lines 1 through 24e	7,684,763.			
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 Sheet

Check 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	2,127.	1	2,127.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net		4	472,609.	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	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		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges		9		
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 80,765,001.			
	b Less: accumulated depreciation	10b 20,119,922.	59,580,973.	10c	60,645,079.
	11 Investments - publicly traded securities		11		
	12 Investments - other securities. See Part IV, line 11	570,200.	12	570,200.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	3,572,956.	15	4,133,577.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	63,726,256.	16	65,823,592.		
Liabilities	17 Accounts payable and accrued expenses	283,986.	17	44,109.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	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		22		
	23 Secured mortgages and notes payable to unrelated third parties	9,343,085.	23	8,772,905.	
	24 Unsecured notes and loans payable to unrelated third parties		24		
	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	53,090.	
	26 Total liabilities. Add lines 17 through 25	9,627,071.	26	8,870,104.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets		27		
	28 Temporarily restricted net assets		28		
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds	-1,084,855.	30	-1,026,473.	
	31 Paid-in or capital surplus, or land, building, or equipment fund	591,651.	31	591,651.	
	32 Retained earnings, endowment, accumulated income, or other funds	54,592,389.	32	57,388,310.	
33 Total net assets or fund balances	54,099,185.	33	56,953,488.		
34 Total liabilities and net assets/fund balances	63,726,256.	34	65,823,592.		

Part XI Reconciliation of Net Assets

Check 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	9,740,490.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,684,763.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,055,727.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	54,099,185.
5	Net unrealized gains (losses) on investments	5	
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	798,576.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	56,953,488.

Part XII Financial Statements and Reporting

Check 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
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:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	X	
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:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
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?		X
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
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		

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.**

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization DRAPER IRRIGATION COMPANY **Employer identification number** 87-0215969

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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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 8/17/06, 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?

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)?

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

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
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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		80,000.		80,000.
b Buildings				
c Leasehold improvements				
d Equipment		80,685,001.	20,119,922.	60,565,079.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				60,645,079.

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) WATER RIGHTS	1,788,317.
(2) INVESTMENT IN SUBSIDIARY	408,582.
(3) NYL INSURANCE CASH SURRENDER VALUE	410,529.
(4) UTAH LAKE WATER USERS	1,526,149.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	4,133,577.

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) ACCRUED INTEREST	53,090.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	53,090.

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

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
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
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
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

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

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

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

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, 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.

**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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

DRAPER IRRIGATION COMPANY

Employer identification number

87-0215969

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.

- | | |
|--------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., 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 in 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.

- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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" to 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 non-fixed 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
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) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DARRIN L. JENSEN GM/CEO	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	155,078.	25,083.	0.	7,769.	17,906.	205,836.	0.
(2) DAVID GARDNER ASST GENERAL MANAGER	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	129,613.	10,134.	0.	6,491.	15,073.	161,311.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Multiple horizontal lines for supplemental information.

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.

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

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization DRAPER IRRIGATION COMPANY	Employer identification number 87-0215969
--------------------------------------------------------------	-----------------------------------------------------

FORM 990, PART VI, SECTION A, LINE 3:

WATERPRO, INC., A WHOLLY OWNED SUBSIDIARY OF DRAPER IRRIGATION, MANAGES THE OPERATIONS OF DRAPER IRRIGATION.

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

SHAREHOLDERS

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

SHAREHOLDERS

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

THE CEO REVIEW AND SIGNS THE 990

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

A REVIEW IS COMPLETED ON ALL ITEMS IN QUESTION BY THE CEO AND BOARD OF DIRECTORS.

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

DOCUMENTS ARE AVAILABLE AT SHAREHOLDERS MEETINGS AND ANYTIME A SHAREHOLDER SENDS A WRITTEN REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CONTRIBUTED INCOME	740,194.
CAPITAL CONTRIBUTION	5,450.
CHANGES IN TREASURY STOCK RECEIVABLE	-7,880.
TREASURY STOCK PURCHASE	-70,700.

**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.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

**Open to Public
Inspection**

Name of the organization **DRAPER IRRIGATION COMPANY** Employer identification number **87-0215969**

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

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
WATER PRO INCORPORATED - 87-0572672 12421 SOUTH 800 EAST; P.O. BOX 156 DRAPER, UT 84020	MANAGEMENT	UT	DRAPER IRRIGATION	C CORP	152,848.	4,890,242.	100%	X	

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.

	Yes	No
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?		
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) WATER PRO INCORPORATED	K	143,183.	ALLOCATED
(2) WATER PRO INCORPORATED	O	1,837,184.	ALLOCATED
(3) WATER PRO INCORPORATED	P	1,415,498.	ALLOCATED
(4)			
(5)			
(6)			



Consolidated Financial Statements
December 31, 2015 and 2014

Draper Irrigation Company and Subsidiary

Draper Irrigation Company and Subsidiary

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December 31, 2015 and 2014

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Independent Auditor's Report

To the Shareholders
Draper Irrigation Company
Draper, Utah

Report on the Financial Statements

We have audited the accompanying consolidated financial statements (financial statements) of Draper Irrigation Company (a nonprofit organization) and subsidiary, which comprise the balance sheets – income tax basis as of December 31, 2015 and 2014, and the related statements of operations – income tax basis, stockholders' equity – income tax basis, and cash flows – income tax basis for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the income tax basis of accounting described in Note 1 to the financial statements; this includes determining that the income tax basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Draper Irrigation Company and subsidiary as of December 31, 2015 and 2014, and the results of its operations and its cash flows for the years then ended on the basis of accounting described below.

Basis of Accounting

We draw attention to Note 1 of the financial statements, which describes the basis of accounting used in the preparation of the financial statements. The financial statements are prepared on the accrual method of accounting used for federal income tax purposes, which is a comprehensive basis of accounting other than generally accepted accounting principles. Accordingly, the accompanying financial statements are not intended to present financial position and results of operations in conformity with generally accepted accounting principles. In addition, as discussed in Note 1 to the financial statements, the useful lives of property and equipment follow the State of Utah Public Service Commission guidelines, which is a departure from the income-tax basis of accounting. Our opinion is not modified with respect to this matter.

Report on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental consolidating balance sheet – income tax basis as of December 31, 2015 and consolidating statement of income – income tax basis for the year ended December 31, 2015 are presented for the purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. Management has elected to present intercompany elimination entries within the balances of the respective entities, rather than to present the respective entity financial statement amounts in accordance with the income tax basis of accounting and a separate presentation of the elimination entries. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.



Salt Lake City, Utah
March 17, 2016

Draper Irrigation Company and Subsidiary
Consolidated Balance Sheets – Income Tax Basis
December 31, 2015 and 2014

	2015	2014
Assets		
Current Assets		
Cash and cash equivalents	\$ 1,807,453	\$ 684,279
Investment in securities	2,864,436	3,604,994
Accounts receivable	472,585	481,577
Related party receivable	61,533	64,337
Inventory	260,463	258,611
Total current assets	5,466,470	5,093,798
Property, Plant and Equipment	82,023,386	79,246,456
Less: accumulated depreciation	(21,160,698)	(19,296,273)
Net property, plant and equipment	60,862,688	59,950,183
Other Assets		
Water rights	1,788,317	1,308,317
Cash surrender value of life insurance policies	410,529	329,908
Investment in Utah Lake Water Users Association	1,526,149	1,526,149
Other	68,148	51,777
Total other assets	3,793,143	3,216,151
	\$ 70,122,301	\$ 68,260,132

Draper Irrigation Company and Subsidiary
Consolidated Balance Sheets – Income Tax Basis
December 31, 2015 and 2014

	2015	2014
Liabilities		
Current Liabilities		
Accounts payable	\$ 368,808	\$ 855,120
Accrued expenses	797,327	761,373
Current maturities of notes payable	1,105,180	1,105,180
Total current liabilities	2,271,315	2,721,673
Long-Term Liabilities		
Notes payable, net of current maturities	7,667,725	8,237,905
Total liabilities	9,939,040	10,959,578
Stockholders' Equity		
Class A common stock; \$6 par value; 20,000 shares authorized; 17,874 shares issued and outstanding at December 31, 2015 and 2014, respectively	106,380	106,380
Class B common stock; \$50 par value; 12,000 shares authorized; 7,643 and 7,534 issued and outstanding at December 31, 2015 and 2014, respectively	382,150	376,700
Paid-in capital	183,270	183,270
Treasury stock at cost, 1,690 and 1,776, at December 31, 2015 and 2014, respectively	(1,505,253)	(1,566,065)
Receivable related to treasury stock	(9,950)	(2,070)
Retained earnings	61,026,664	58,202,339
Total stockholders' equity	60,183,261	57,300,554
	\$ 70,122,301	\$ 68,260,132

Draper Irrigation Company and Subsidiary
Consolidated Statements of Income – Income Tax Basis
Years Ended December 31, 2015 and 2014

	2015	2014
Revenue and Sales		
Base sales	\$ 6,607,712	\$ 6,557,033
Wholesale culinary sales	10,700	11,000
Connection fees	258,594	209,758
	6,877,006	6,777,791
Costs and Expenses		
Direct costs	1,634,454	1,730,163
Direct professional expenses	469,018	426,541
Contract operating expenses	2,768,404	3,157,783
Depreciation	1,883,235	1,728,521
	6,755,111	7,043,008
Income (loss) from Operations	121,895	(265,217)
Other Income and (Expenses)		
Interest income	61,865	92,143
Interest expense	(426,282)	(324,483)
Contributed water distribution lines	740,194	759,415
Income tax	-	(100)
Gain on sale of property and equipment	1,498,129	1,460,824
Other income	204,113	605,411
Reservoir reserve	528,178	495,432
System buy-in fees	96,233	90,271
	2,702,430	3,178,913
Net Income	\$ 2,824,325	\$ 2,913,696

Draper Irrigation Company and Subsidiary
Consolidated Statements of Stockholders' Equity – Income Tax Basis
Years Ended December 31, 2015 and 2014

	Common Stock				Paid-in Capital	Treasury Stock	Receivable Related to Treasury Stock	Retained Earnings	Total Stockholders' Equity
	Class A Shares	Amount	Class B Shares	Amount					
Balance - December 31, 2013	17,874	\$ 106,380	7,424	\$ 371,200	\$ 183,270	\$ (1,602,465)	\$ (5,140)	\$ 55,288,643	\$ 54,341,888
Issuance of 110 shares of Class B common shares for new connections	-	-	110	5,500	-	-	-	-	5,500
Purchase of 116 shares of Treasury Stock	-	-	-	-	-	(81,200)	-	-	(81,200)
Sale of 168 shares of Treasury Stock for cash	-	-	-	-	-	114,100	-	-	114,100
Sale of 5 shares of Treasury Stock for receivables	-	-	-	-	-	3,500	(3,500)	-	-
Cash collected on Receivable issued for Treasury Stock	-	-	-	-	-	-	6,570	-	6,570
Net income	-	-	-	-	-	-	-	2,913,696	2,913,696
Balance - December 31, 2014	17,874	106,380	7,534	376,700	183,270	(1,566,065)	(2,070)	58,202,339	57,300,554
Issuance of 109 shares of Class B common shares for new connections	-	-	109	5,450	-	-	-	-	5,450
Purchase of 101 shares of Treasury Stock and 26 shares leased shares returned to Treasury Stock	-	-	-	-	-	(70,700)	-	-	(70,700)
Sale of 188 shares of Treasury Stock for cash	-	-	-	-	-	116,112	-	-	116,112
Sale of 22 shares of Treasury Stock for receivables	-	-	-	-	-	15,400	(15,400)	-	-
Cash collected on Receivable issued for Treasury Stock	-	-	-	-	-	-	7,520	-	7,520
Net income	-	-	-	-	-	-	-	2,824,325	2,824,325
Balance - December 31, 2015	17,874	\$ 106,380	7,643	\$ 382,150	\$ 183,270	\$ (1,505,253)	\$ (9,950)	\$ 61,026,664	\$ 60,183,261

Draper Irrigation Company and Subsidiary
Consolidated Statements of Cash Flows – Income Tax Basis
Years Ended December 31, 2015 and 2014

	2015	2014
Operating Activities		
Net income	\$ 2,824,325	\$ 2,913,696
Adjustments to reconcile net income to net cash provided by operating activities		
Depreciation	1,883,235	1,728,521
Contributed lines	(740,194)	(759,415)
Gain on disposal of property and equipment	(1,498,129)	(1,460,824)
Changes in certain assets and liabilities:		
Accounts receivable	8,992	4,002
Inventory	(1,852)	-
Other assets	(16,371)	(41,205)
Accounts payable	(486,312)	137,661
Accrued expenses	35,954	167,383
Cash Flows from (used for) Operating Activities	2,009,648	2,689,819
Investing Activities		
Proceeds from maturity of certificates of deposits	-	227,341
Cash surrender value of life insurance policies	(80,621)	(41,547)
Proceeds from the sale of property and equipment	1,026,500	1,460,824
Issuance of related party receivable	(25,466)	(39,800)
Proceeds received on related party receivable	28,270	169,450
Purchase of property and equipment	(2,063,917)	(5,452,376)
Proceeds from sale of securities	740,558	410,918
Cash Flows from (used for) Investing Activities	(374,676)	(3,265,190)
Financing Activities		
Principal payments on long-term debt	(570,180)	(1,093,564)
Issuance of Class B common stock at par	5,450	5,500
Purchase of treasury stock	(70,700)	(81,200)
Proceeds from issuance of treasury stock	116,112	114,100
Payments received on receivable related to treasury stock	7,520	6,570
Cash Flows from (used for) Financing Activities	(511,798)	(1,048,594)
Net Change In Cash and Cash Equivalents	1,123,174	(1,623,965)
Cash and Cash Equivalents, Beginning of Year	684,279	2,308,244
Cash and Cash Equivalents, End of Year	\$ 1,807,453	\$ 684,279
Supplemental Disclosure of Cash Flow Information		
Cash paid during the year for interest, including \$0 and \$126,759, respectively, of capitalized interest	\$ 412,359	\$ 451,242
Supplemental Disclosure of Non-cash Investing and Financing Activity		
Sale of land for water rights	\$ 480,000	\$ -
Sale of 22 and 5 shares of treasury stock for receivables	\$ 15,400	\$ 3,500

Note 1 - Summary of Significant Accounting Policies

Reporting Entity

Draper Irrigation Company (the “Company”) was established in 1888 when its founding members contributed their flow rights to five mountain streams for the benefit of all members. The Company was later incorporated under the laws of the State of Utah and is a mutual irrigation company under Section 501(c)(12) of the Internal Revenue Code. The Company provides pressure irrigation water and culinary water to its members located in the southeastern portion of Salt Lake County, Utah. The consolidated financial statements include the accounts of the Company and its wholly owned subsidiary, WaterPro, Inc. Intercompany accounts and transactions have been eliminated. WaterPro is a for-profit entity subject to income tax, and provides management services to Draper Irrigation Company.

The Company operates as a mutual irrigation company whereby it provides water services to its members. Members are also stockholders in the Company. Revenue derived from members is exempt from income tax.

Basis of Accounting

The accompanying consolidated financial statements (financial statements) present financial results on the accrual basis of accounting used for federal income tax reporting which is a comprehensive basis of accounting other than generally accepted accounting principles. This basis differs from generally accepted accounting principles primarily because no gain is recognized on like-kind exchanges, marketable securities are recorded at cost rather than fair value and there is no allowance for bad debts but accounts receivable are written off when there is no ability to collect.

Concentrations of Credit Risk

The Company maintains its cash accounts in various deposit accounts, the balances of which are periodically in excess of federally insured limits.

Cash and Cash Equivalents

Cash and cash equivalents consists of highly liquid investments with an original maturity of three months or less.

Accounts Receivable and Credit Risk

Accounts receivables are principally from members, construction contractors, and developers. The Company strives to limit credit risk through evaluation of customers’ credit status, limitations on the amount of credit granted to a particular customer and collection efforts. The Company currently has a shut off policy that states if any account is over 90 days it is subject to being shut off. Because the Company reports on an income tax basis, accounts receivable are written off directly to bad debt expense when management determines that collection efforts are no longer successful. No allowance for bad debt is recorded. Bad debt expense for the years ended December 31, 2015 and 2014 was \$6,453 and \$2,633, respectively.

Revenue Recognition

Revenue for base water fee services and wholesale culinary fee services are recognized on a monthly basis as services are provided. Any additional fee for excess usage is billed to customers on a monthly basis upon consumption. Connection fee revenue is recognized when the connection is approved and builder pays the fee. Contributed water distribution lines are recognized in other income when contractors complete a subdivision and deed the lines to the Company as discussed below.

Property and Equipment

Property and equipment is recorded at cost. Expenditures for renewals and improvements that significantly add to the productive capacity or extend the useful life of an asset are capitalized. Expenditures for maintenance and repairs are charged to expense. When equipment is retired or sold, the cost and related accumulated depreciation are eliminated from the accounts and the resultant gain or loss is reflected in income. The Company receives significant contribution of property from contractors as new subdivisions are completed. The developers install the facilities for new subdivisions and deed the assets to the Company when the subdivision is complete. The donated assets are recorded at the estimated cost of construction.

The stipulated depreciation for certain items has been provided using the straight-line method over their estimated service lives by type of asset as directed by the State of Utah Public Service Commission as follows:

Distribution pipes	50 years
Building and improvements	35 years
Wells	25 years
Equipment and vehicles	5-15 years

Depreciation expense was \$1,883,235 and \$1,728,521 for the years ended December 31, 2015 and 2014, respectively.

Inventory

Inventory consists of supplies used for meter and hydrant installations, as well as for emergency repairs and system maintenance. Inventory is stated at the lower of cost, determined on a first in, first out basis, or market value.

Investments in Securities

The Company records its investments in securities at cost.

Estimates

The preparation of the financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Reclassifications

Certain reclassifications of amounts previously reported have been made to the accompanying financial statements to maintain consistency between periods presented. The reclassifications had no impact on net income or stockholders' equity.

Water Rights

The Company records water rights at their historical cost. The water rights do not have a determinable life, therefore they are not amortized.

Income Taxes

Draper Irrigation Company is exempt from federal income taxes under Section 501(c)(12) of the Internal Revenue Code. The Company's subsidiary, WaterPro, Inc., is a for profit company. Income taxes relate only to WaterPro, Inc. WaterPro is subject to U.S. federal tax examinations for tax years beginning and including December 31, 2012. The Company has identified no uncertain tax positions for its net operating losses as of December 31, 2015.

Reservoir Reserve

A reservoir reserve is collected in conjunction with new connections to the system. This amount is collected for the purpose of funding current and future expansion of the system. As of December 31, 2015 and 2014, all reservoir reserve amounts collected have been expended for purposes intended.

Subsequent Events

The Company has evaluated subsequent events through March 17, 2016, the date the financial statements were available to be issued.

Note 2 - Investment in Securities Available for Sale

The Company's investments consist of shares of East Jordan Irrigation Company ("East Jordan") and mutual funds.

East Jordan Shares — During 2015 and 2014, the Company owned a total of 218.25 shares with a historical cost of \$570,200 at December 31, 2015 and 2014, respectively.

Mutual Funds — At December 31, 2015 and 2014, the Company held mutual funds at cost of \$2,294,236 and \$3,034,794 respectively. Investments in mutual funds are presented on the cost basis.

Note 3 - Investment in Association

During the year ended December 31, 2011, the Company purchased a 6.89% ownership in the Utah Lake Water Users Association ("Association"), which gives the Company one vote in management decisions of the Association for cash of \$348,149. The Company made additional contributions for the construction of new equipment in the amount of \$78,000 and \$1,100,000 as of December 31, 2012 and 2011, respectively, which

increased the Company's basis; however the capital contribution did not change its ownership percentage. The investment is being accounted for on the cost method. As of December 31, 2015 and 2014 the amount of the investment was \$1,526,149. The investment is shown on the Balance Sheet as Other Assets - Investment in Utah Lake Water Users Association.

Note 4 - Related Party Receivable

The Company has advanced funds to employees throughout the year. Employee receivables are repaid through the employee's payroll on terms agreed to by the individual and the Company. There was \$61,533 and \$64,337 related to these advances as of December 31, 2015 and 2014, respectively.

Note 5 - Property, Plant and Equipment

Property and equipment at December 31, 2015 and 2014 consists of the following:

	2015	2014
Reservoir	\$ 5,558,154	\$ 5,558,154
Well improvements	15,605,330	15,540,516
Pump stations	2,039,239	2,018,501
Treatment plant	11,915,964	11,799,694
Water distribution lines	44,163,857	41,597,282
Auto and trucks	632,229	625,217
Heavy equipment	356,878	356,878
Computer equipment	188,088	186,674
Office furniture	3,331	3,223
Buildings	1,480,316	1,480,317
	81,943,386	79,166,456
Less accumulated depreciation	(21,160,698)	(19,296,273)
	60,782,688	59,870,183
Land	80,000	80,000
	\$ 60,862,688	\$ 59,950,183

Note 6 - Property Installment Sale

During the year ended December 31, 2014, the Company sold donated land, which was carried at a zero cost basis. During the year ended December 31, 2014, the Company received the first installment of \$1,463,792 in cash proceeds, which was recorded as a gain on sale of property. During the year ended December 31, 2015, the Company received the second and final installment of \$1,020,000 in cash proceeds and \$480,000 in water rights. The total payment of \$1,500,000 was recorded as a gain on sale of property.

Note 7 - Notes Payable

Notes payable at December 31, 2015 and 2014 consists of the following:

	2015	2014
State of Utah, Division of Finance, Water Resources Construction Loan, due in annual principal and interest payments of \$572,997 through 2018, fixed interest rate at 2.3%, secured by assets constructed and water rights.	\$ 1,645,477	\$ 1,645,477
Financial Institution Term Loan, due in monthly principal payments of \$47,515 and monthly interest payments at a variable rate of 2.5% plus the one month LIBOR (4.95% at December 31, 2015) through 2028, secured by assets constructed and water rights.	7,127,428	7,697,608
	8,772,905	9,343,085
Less current maturities	1,105,180	1,105,180
Long-term maturities	\$ 7,667,725	\$ 8,237,905

Future maturities of notes payable are as follows:

Years Ending December 31,	Amount
2016	\$ 1,105,180
2017	1,118,180
2018	1,132,627
2019	570,180
2020	570,180
Thereafter	4,276,558
	\$ 8,772,905

The Company has various operational and financial covenants related to these notes, which it is currently in compliance with.

Note 8 - Retirement Plan

The Company has a 401(k) retirement plan covering substantially all full-time employees. Contributions cannot exceed 15% of each covered employee's salary. The Company is required to make a matching contribution on behalf of eligible participants in the 401(k) feature, equal to 100% of the employee's deferred income not to exceed 5% of compensation. Employer matching contribution amounts are decided by the Board of Directors each year. Total employer contributions under the plan were made in the amounts of \$59,097 and \$57,052 for the years ended December 31, 2015 and 2014, respectively. The participants vest in the employer's contribution immediately. The employer may terminate the 401(k) retirement plan at any time. The Company funds retirement plan costs as incurred.

During the year ended December 31, 2008, the Company adopted a nonqualified deferred compensation plan, the Executive Income Continuation Plan (the "Plan"). Based on the number of years of service, upon retirement, the participating employee will receive up to \$250,000, payable in equal monthly installments over ten years. Upon the death of the employee, the benefit will be paid to the employees' beneficiary under the agreement, in equal monthly installments. In order to fund the Plan, the Company purchased life insurance policies for the employees covered under the Plan for \$250,000 each. The Company is the beneficiary of the policies. Premiums paid by the Company were \$51,103 during the years ended December 31, 2015 and 2014 and the cash surrender value of the policies were \$410,529 and \$329,908, respectively.



Supplemental Schedules
December 31, 2015

Draper Irrigation Company and Subsidiary

Draper Irrigation Company and Subsidiary
Consolidating Balance Sheet – Income Tax Basis
December 31, 2015

	Draper Irrigation Company		Water Pro	Consolidated
	Irrigation	Culinary		
Assets				
Current Assets				
Cash and cash equivalents	\$ 2,127	\$ -	\$ 1,805,326	\$ 1,807,453
Investment in securities	570,200	-	2,294,236	2,864,436
Accounts receivable	72,768	395,882	3,935	472,585
Related party receivable	-	-	61,533	61,533
Inventory	-	-	260,463	260,463
Intercompany receivable (payable)	380,168	24,362	(404,530)	-
Total current assets	1,025,263	420,244	4,020,963	5,466,470
Property, Plant and Equipment	80,765,001	-	1,258,385	82,023,386
Less: accumulated depreciation	(20,119,922)	-	(1,040,776)	(21,160,698)
Net property, plant and equipment	60,645,079	-	217,609	60,862,688
Other Assets				
Water rights	1,788,317	-	-	1,788,317
Cash surrender value of life insurance policies	410,529	-	-	410,529
Investment in Utah Lake Water Users Association	1,526,149	-	-	1,526,149
Other	-	-	68,148	68,148
Total other assets	3,724,995	-	68,148	3,793,143
	\$ 65,395,337	\$ 420,244	\$ 4,306,720	\$ 70,122,301

Draper Irrigation Company and Subsidiary
Consolidating Balance Sheet – Income Tax Basis
December 31, 2015

	Draper Irrigation Company		Water Pro	Consolidated
	Irrigation	Culinary		
Liabilities				
Current Liabilities				
Accounts payable	\$ -	\$ 34,116	\$ 334,692	\$ 368,808
Accrued expenses	53,090	3,978	740,259	797,327
Current maturities of notes payable	<u>1,105,180</u>	<u>-</u>	<u>-</u>	<u>1,105,180</u>
Total Current Liabilities	1,158,270	38,094	1,074,951	2,271,315
Long-term Debt				
Notes payable, net of current maturities	<u>7,667,725</u>	<u>-</u>	<u>-</u>	<u>7,667,725</u>
Total Liabilities	<u>8,825,995</u>	<u>38,094</u>	<u>1,074,951</u>	<u>9,939,040</u>
Stockholder's Equity				
Class A common stock	106,380	-	-	106,380
Class B common stock	-	382,150	-	382,150
Class A paid-in capital	129,221	-	-	129,221
Class B paid-in capital	54,049	-	-	54,049
Treasury stock at cost	(1,505,253)	-	-	(1,505,253)
Receivable related to treasury stock	(9,950)	-	-	(9,950)
Retained earnings	<u>57,794,895</u>	<u>-</u>	<u>3,231,769</u>	<u>61,026,664</u>
Total Stockholders' Equity	<u>56,569,342</u>	<u>382,150</u>	<u>3,231,769</u>	<u>60,183,261</u>
	<u>\$ 65,395,337</u>	<u>\$ 420,244</u>	<u>\$ 4,306,720</u>	<u>\$ 70,122,301</u>

Draper Irrigation Company and Subsidiary
Consolidating Statement of Income - Income Tax Basis
Year Ended December 31, 2015

	Draper Irrigation Company		Water Pro	Consolidated
	Irrigation	Culinary		
Revenue and Sales				
Base sales	\$ 1,183,032	\$ 5,424,680	\$ -	\$ 6,607,712
Wholesale culinary	-	10,700	-	10,700
Connection fees	97,028	161,566	-	258,594
Total revenue and sales	<u>1,280,060</u>	<u>5,596,946</u>	<u>-</u>	<u>6,877,006</u>
Costs and Expenses				
Direct costs	375,924	1,258,530	-	1,634,454
Direct professional expenses	107,874	361,144	-	469,018
Contract operating expenses	636,733	2,131,671	-	2,768,404
Depreciation	429,006	1,436,237	17,992	1,883,235
Total costs and expenses	<u>1,549,537</u>	<u>5,187,582</u>	<u>17,992</u>	<u>6,755,111</u>
Income (Loss) from Operations	<u>(269,477)</u>	<u>409,364</u>	<u>(17,992)</u>	<u>121,895</u>
Other Income and Expenses				
Interest income	-	-	61,865	61,865
Interest expense	(426,282)	-	-	(426,282)
Contributed water distribution lines	740,194	-	-	740,194
Gain (loss) on disposal of property and equipment	1,500,000	-	(1,871)	1,498,129
System rental income (expense)	534,960	(534,960)	-	-
Other income	80,186	123,927	-	204,113
Reservoir reserve	-	528,178	-	528,178
System buy-in fees	-	96,233	-	96,233
Net other income and expenses	<u>2,429,058</u>	<u>213,378</u>	<u>59,994</u>	<u>2,702,430</u>
Net Income (Loss)	<u>\$ 2,159,581</u>	<u>\$ 622,742</u>	<u>\$ 42,002</u>	<u>\$ 2,824,325</u>