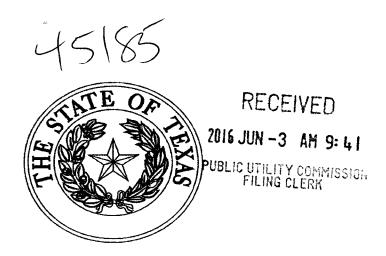


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# CLASS "C" WATER COMPANY PUC ANNUAL REPORT OF

**CCN Number** 

12563

Official Company Name:

VINTON HILLS ALEGRE, LLC

D/B/A Name(s)

VILLA ALEGRE, VINTON VILLAGE, & VINTON HILLS ESTATES

## TO THE PUBLIC UTILITY COMMISSION OF TEXAS

For the Year Ended \_\_\_\_\_\_2015

121

## Annual Report for Class C Water and/or Sewer Utilities

PUBLIC UTILITY COMMISSION OF TEXAS 1701 N. CONGRESS AVE., PO BOX 13326, AUSTIN, TX 78711-3326 pursuant to TWC § 13.136

## I. NAME OF UTILITY, OFFICE MAILING ADDRESS AND AREA SERVED

1	Utility Name:	VINTON HIUS ALEGRE, LLC						
	List all assumed n	name(s) or d/b/a names: VILLA ALEGRE, VINTON VILLAGE, VINTON HILLS						
2		evenience and Necessity No. 12563 Calendar Year Ending 2015						
3	Street Address:	8001 KIELYRD., P.O. BOX 428 ANTHONY, N.M. 88	 ()Z					
4	City or Town:	VINTON: TEXAS 79821 CCN No.: 1256=	— 3					
5	Email Address							
6	County:	EL PASO COUNTY Zip Code: 79821						
7	TCEQ PWS Num	ber(s) $0710169 + 07(0151 + 0710172$						
8	Water Quality Dic	charge Permit Number(s) \(\sigma/A\)						
	II. TYPE OF ORGANIZATION AND PRINCIPAL OFFICERS							
9	Type of Ownershi Corporation:	ip:Partnership:Individual:Other: XMEMBE	= 3₹_					
10	name of the indivi	ist names and titles of the officers. If an individual or partnership, list the idual or each partner and provide the title for each. For parterships, please provide ownership for each partner.  BRUCE BOVESTROO MEMBER						
11		ownership of this utility changed during the last twelve (12) months, where where the name and address of the prior owner.						
12 13		as formed or incorporated: r common ownership or control by another corporation? Y N If yes, by whom?						
14	III. PE Name and Title:	RSON TO CONTACT REGARDING THE INFORMATION SUPPLIED ON THESE FORMS  TIME GUN LING, CPA						
15	Address:	135 S. STATE COLLEGE BUD. SUITE 300						
16	City:	BREA, CA. 92821						
17	Telephone Numbe	er with Area Code: (714) 990 · 1040 EXT. 106						
18	Cell Phone Number	er with Area Code:						
19	Fax Number with	Area Code: (714) 671 - 2306						
20	e-mail address:	taulling efrazer 11p. com						
21	If not an officer, o	wner or employee, give name of firm employed by:						
		FRAZER LLP						

## 1. Balance Sheet

_	Name of Utility: VINTON HILLS AL	EGRE, LLC	
Line		End of Year	End of Prior Year
<b>.</b> #	<u>ASSETS</u>	mm/dd/yyyy	mm/dd/yyyy
]	UTILITY PLANT	12/31/2015	12/21/2014
1	101 Utility Plant in Service	74,221	74,221
2	TOTAL UTILITY PLANT	· /1001	1,7001
3	108 Less: Accumulated Amortization	φ	0
4	110 Less: Accumulated Depreciation	50.146	45589
5	NET UTILITY PLANT	-24 075	28,632
6	CURRENT ASSETS	xxxx	xxxx
7	131-135 Cash	44,972	26,435
8	141-143 Accounts Receivable	_	
9	151 Plant Materials and Supplies (not previously expensed)		
10	171-174 Other Current Assets		
11	TOTAL CURRENT ASSETS		
12	<u>TOTAL ASSETS*</u>	69.047	55,067
13	EQUITY 201 Common Stock	Ø	de
	<b>.</b>	φ	4
14 15	211 Other paid in capital 215 Retained Earnings	CONIC	<u> </u>
16	218 Proprietary Capital	. 67,047	35,061
17	TOTAL STOCKHOLDERS' EQUITY	10000	65 0/0
	LONG-TERM DEBT	<u>69.047</u> xxxx	55,067
18	224 Long-term debt (more than 1 year)	d	XXXX
10	22. Bong term dest (more than 1 year)	XXXX	xxxx
(	CURRENT LIABILITIES (less than 1 year)	XXXX	xxxx
19	231 Accounts Payable		-
20	232 Notes Payable	<del></del>	
21	241.0 Other Current Liabilities	-	-,
	TOTAL CURRENT LIABILITIES	d	Ø
		XXXX	XXXX
9	OTHER LIABILITIES and DEFERRED CREDITS	- Nagarant	~-
22	253 Other Deferred Credits	-	: Joseph .
23	271-272 Net Contributions in Aid of Construction		-
24 ′	TOTAL OTHER LIABILITIES and DEFERRED CREDITS	4	d
25	TOTAL LIABILITIES & EQUITY*	69.047	55,067

Add NARUC accounts as needed, and if not shown above.

## 2. Statements of Income

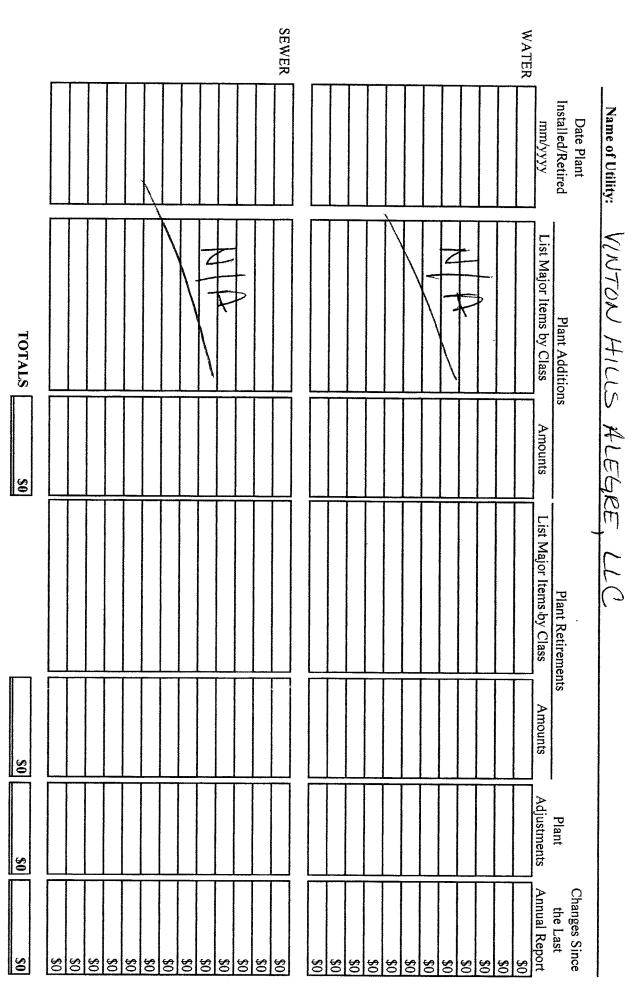
Name of Utility: VINTON HILLSALEGRE, LLC

		Water	Sewer	Total
Line#		Report Year	Report Year	Report Year
	Report Calendar Year 2015	-		
	•	Α	В	C=A+B
1	Total Revenue:	78726	N/A.	18726
	Operating Expenses:			
2	601 O & M Salaried Labor	12,657	NIA	12657
3	604 Employee Benefits	\	ì	
4	631, 635, 636 O & M Contract labor	_		
5	620 Operating/Maint Supplies	13,941		13,941
6	610 Purchased Water	~_		-
7	615 Purchased Power	15,225		15,205
8	635 Testing Expense	1.848		1,848
9	618 Chemicals	<i>'</i>		
10	656-659 Insurance	2,031		2,031
11	601 General Office Salaries	-		/ <del></del>
12	675 General Office Expenses			-
13	632 Contract Accounting	920		920
14	633 Legal			
15	634 Management	7.578		7578
16	666 Amortization- Rate Case Expense			
17	403 Depreciation Expense	4,686		4.686
18	667-675 Other Misc. Expenses	106		106
	Taxes:	xxxx	xxxx	xxxx
19	409 Federal Income Taxes	-		
20	409.0 State Franchise Taxes/Reg Assess.	-		-
21	408 All Other Taxes	5,883		5883
22	Total Expenses	\$64.875-	\$ -	\$ 64875 -
23	Net Operating Income	\$ 13,857 -	\$ -	\$13857 -
				•
24	421, 433 Non-Operating Income			<u>d</u>
	Non-Operating Deductions:			
25	426 Other	Ø		<b>d</b>
	427 Interest	\$		$\phi$
27	Net Income	\$ 13,851 -	\$ -	\$ 13851 -

# 3. Water Plant-in-Service - changes since the last Annual Report

							*																		mm/yyyy	Date Plant Installed/Retired		Name of Utility:
TOTALS																							NONE		List Major Items by Class	Plant Additions		VINTON HILLS ALEGRE
Ø 80																									Amounts	IS		S ALEC
																							NONE	Ý	List Major Items by Class	Plant Retirements	7	RE, LLC
0s <i>i</i>				¥																			7		Amounts	nts		
<b>₩</b> 80																							NONE		Adjustments	Plant		
Q 50	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	7 \$0	\$0		Total Change the Last		

3-S. Sewer Plant-in-Service - Changes since the last Annual Report



Name of Utility:

VINTON HILLS ALEGRE, LLC

## 4. Other Operating Information

			<b>End of Prior</b>	Comment of the second of	End of Year	End of Prior				
	Connection information	End of Year	Year	Connection information	mm/dd/yyyy	Year				
	WATER:	mm/dd/yyyy	mm/dd/yyyy	SEWER:	1					
	1 Number of active water connections	282	276	Number of active sewer connections	M/n	11/4				
	5/8" or 3/4"	518-314	5/8+3/4	Residential	17/74	4/11				
	3/4"			Non-residential						
	1"				1					
	1 1/2"		i							
	2"									
	List all additional meter sizes:	6	Φ	List all additional meter sizes:						
	Unmetered water connections	8	d	Unmetered water connections						
	2 Number of inactive water connections	7	11	Number of inactive water connections						
	5/8" or 3/4"	5/8+3/4	5/8 -3/4	1						
	3/4"		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1						
	1"									
	1 1/2"				<del>                                     </del>					
	2"									
	List all additional meter sizes:	NONE	NONE	List all additional meter sizes:	<del>                                     </del>					
	Dist till detailional motor billos.	140100	100100		<del>                                     </del>					
	Unmetered, inactive connections	NONE	NONE	Unmetered, inactive connections	<del>                                     </del>					
	Onnecered, mactive connections	NONE	100100	Omiciered, maenve connections	1.	1 10				
	3 Number of active sewer connections	NIA	NIA	Number of active sewer connections	NA	<del>  W   H  </del>				
	4 Number of inactive sewer connections	NIA	10/14	Number of inactive sewer connections	<u> </u>	NIA				
	4 Pulliber of mactive sewer connections	NIA	10/17	Jivaniber of macrive sewer connections	10/1-	<del>-/4/</del>				
	5 Total gallons purchased									
	6 Total gallons pumped	3.7803000			<del>                                     </del>					
	Total Water Produced	10.012			<del>                                     </del>					
	7 Total gallons sold	33 358 350	,		/					
	8 Gallons unaccounted for	43007		•	NIA					
		17111011		Total amount of sewer treated (gallons	XVIA					
	Management and Operations			Yes or No	<del></del>	L				
1	Do you have an Application form or forma	l process for ne	ew customers?	VES						
	Do you have a copy of your approved tarif									
	drought contingency plan for customer rev		•	VES	₹ .	₩ -24 •.				
3	Do you have written operating procedures		rations?	VES						
	4. Do you have a written emergency action plans?									
	5. Do you have written personnel policies and procedures?									
	6. Do you have risk management and safety procedures?									
	7. Do you have customer service policies (including billing and collection)? YES									
8.	Do you prepare an annual written budget f	or financial pla	nning purposes	?_ <b>N</b> O						
9.	Provide a list of all affiliates and entities u	nder Common	Control (if any)	). <b>%</b>						
	10. If you purchase wholesale water or sewer services, please list the name(s) of the wholesaler N/A									
	and december the state of the company of the state of the	om onah								

and describe the service(s) purchased from each.

11. If you have a current capital improvement/replacement plan, please attach a copy.

Name of Utility:	VINTON HILLS ALEGRE	LLC

## 5. Affiliated Transactions

## Charges by an Affiliate to the Reporting Utility

Name of Affiliated company:

NAR	UC Account and/or type of service	Total Affiliated Company	Total Texas	Total for reporting entity
Account #	Account name or type of service	(Dollars transacted)	(Dollars transacted)	(Dollars transacted)
	NA			

## **Charges by an Reporting Utility to Affiliates**

Name of Affiliated company:

NARUC Account and/or type of service	Total Affiliated Company	Total Texas	Total for reporting entity		
Account # Account name or type of service	(Dollars transacted)	(Dollars transacted)	(Dollars transacted)		
W/A					

VINTON HILLS ALEGRE, LCC For the Year Ended
(Company Name)

(Signature of officer authorized to administer oaths)

My commission expires

### **VERIFICATION**

OATH	
(To be made by the officer having control of the accounting of the	he respondent)
State of New Mexico	
County of Donn Line as:	
Three Bonostroo makes oath and says that he/she is	
(Name of affiant)	(Official title of affiant)
of Vindon Hills Heggo (Exact legal title or name of the respondent)	
The signed officer has reviewed the report.	
Based on the officer's knowledge, the report does not contain any untrue statements of a material fact of a material fact necessary in order to make the statements made, in light of the circumstances under whis statements were made, not misleading.	ich such  Notary Public State of New Mexi
Based on such officer's knowledge, the financial statements, and other financial information included i present in all material respects the financial condition and results of operations of the issuer as of, and presented in the report.	
He/she swears that all other statements contained in the said report are true, and that the said report is a above-named respondent during the period of time from and including	a correct and complete statement of the business and affairs of t to and including 17/31/15
Subscribed and sworn to and before me, a Subscribed and sworn to and before me, a	
in and for the State and County above-named, this 30th day of May 2016.	For the second of the second o
My commission expires  (Signature of officer authorized to administer oaths)	(Signature of affiant)
SUPPLEMENTAL OATH	
State of State of	lent)
as:	
County of	
mal	(Official title of affiant)
(Name of affiant)	(Official title of affiant)
(Exact legal title or name of the respondent) that he/she has carefully examined the foregoing report; that he/she swears that all statements of fact of statement of the business and affairs of the above named respondent during the period of time from an to and including	
Subscribed and sworn to before me, a	-
in and for the State and County above-named, thisday of	
	(Signature of affiant)