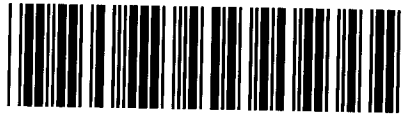


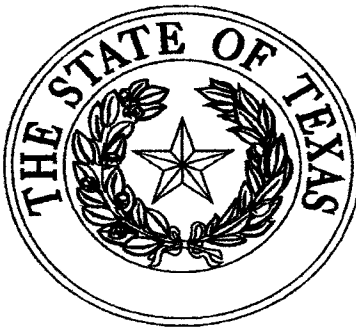


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**CLASS "C" WATER COMPANY
PUC ANNUAL REPORT
OF**

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 HILLS ALEGRE, LLC
List all assumed name(s) or d/b/a names: VILLA ALEGRE, VINTON VILLAGE, VINTON HILLS
2 Certificate of Convenience and Necessity No. 12563 Calendar Year Ending 2015
3 Street Address: 8001 KIELY RD., P.O. Box 428 ANTHONY, N.M. 88021
4 City or Town: VINTON, TEXAS 79821 CCN No.: 12563
5 Email Address: _____
6 County: EL PASO COUNTY Zip Code: 79821
7 TCEQ PWS Number(s) 0710169 + 0760151 + 0710172
8 Water Quality Discharge Permit Number(s) N/A

II. TYPE OF ORGANIZATION AND PRINCIPAL OFFICERS

- 9 Type of Ownership:
Corporation: _____ Partnership: _____ Individual: _____ Other: SINGLE MEMBER LLC
10 If a corporation, list names and titles of the officers. If an individual or partnership, list the name of the individual or each partner and provide the title for each. For partnerships, please provide the percentage of ownership for each partner.
BRUCE BONESTROO MEMBER
11 If the controlling ownership of this utility changed during the last twelve (12) months, state the date of ownership change and the name and address of the prior owner. N/A
12 Date the utility was formed or incorporated: 2007
13 Is the utility under common ownership or control by another corporation? Y (N) If yes, by whom? _____

III. PERSON TO CONTACT REGARDING THE INFORMATION SUPPLIED ON THESE FORMS

- 14 Name and Title: TIM GULLING, CPA
15 Address: 135 S. STATE COLLEGE BLVD., SUITE 300
16 City: BREA, CA. 92821
17 Telephone Number with Area Code: (714) 990-1040 EXT. 106
18 Cell Phone Number with Area Code: _____
19 Fax Number with Area Code: (714) 671-2306
20 e-mail address: tgulling@frazerllp.com
21 If not an officer, owner or employee, give name of firm employed by: FRAZER, LLP

1. Balance Sheet

Name of Utility:

VINTON HILLS ALEGRE, LLC

Line #	ASSETS	End of Year mm/dd/yyyy 12/31/2015	End of Prior Year mm/dd/yyyy 12/31/2014
	<u>UTILITY PLANT</u>		
1	101 Utility Plant in Service	74,221	74,221
2	TOTAL UTILITY PLANT		
3	108 Less: Accumulated Amortization	0	0
4	110 Less: Accumulated Depreciation	50,146	45,589
5	NET UTILITY PLANT	24,075	28,632
6	<u>CURRENT ASSETS</u>	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

LIABILITIES & EQUITY

EQUITY

13	201 Common Stock	0	0
14	211 Other paid in capital	-	-
15	215 Retained Earnings	69,047	55,067
16	218 Proprietary Capital	-	-
17	TOTAL STOCKHOLDERS' EQUITY	69,047	55,067

LONG-TERM DEBT

18	224 Long-term debt (more than 1 year)	0	0
		xxxx	xxxx
		xxxx	xxxx

CURRENT LIABILITIES (less than 1 year)

19	231 Accounts Payable	-	-
20	232 Notes Payable	-	-
21	241.0 Other Current Liabilities	-	-
	TOTAL CURRENT LIABILITIES	0	0
		xxxx	xxxx

OTHER LIABILITIES and DEFERRED CREDITS

22	253 Other Deferred Credits	-	-
23	271-272 Net Contributions in Aid of Construction	-	-
24	TOTAL OTHER LIABILITIES and DEFERRED CREDITS	0	0
25	<u>TOTAL LIABILITIES & EQUITY*</u>	69,047	55,067

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

2. Statements of Income

Name of Utility: VINTON HILLSALEGRE, LLC

Line #

Report Calendar Year 2015

Water Report Year	Sewer Report Year	Total Report Year
A	B	C=A+B
78726	N/A	78726

1	Total Revenue:			
	Operating Expenses:			
2	601 O & M Salaried Labor	12,657	N/A	12,657
3	604 Employee Benefits	-		-
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		15,225
8	635 Testing Expense	1,848		1,848
9	618 Chemicals	-		-
10	656-659 Insurance	2,031		2,031
11	601 General Office Salaries	-		-
12	675 General Office Expenses	-		-
13	632 Contract Accounting	920		920
14	633 Legal	-		-
15	634 Management	7,578		7,578
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		5,883
22	Total Expenses	\$ 64,875 -	\$ -	\$ 64,875 -
23	Net Operating Income	\$ 13,851 -	\$ -	\$ 13,851 -
24	421, 433 Non-Operating Income	0		0
	Non-Operating Deductions:			
25	426 Other	0		0
26	427 Interest	0		0
27	Net Income	\$ 13,851 -	\$ -	\$ 13,851 -

Name of Utility:

VINTON HILLS ALEGRE, LLC

PUC Annual Report
Page 4

Name of Utility:

VINTON HILLS ALEGRE, LLC

PUC Annual Report

Name of Utility:

VINTON HILLS ALEGRE, LLC

5. Affiliated Transactions

Charges by an Affiliate to the Reporting Utility

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)
	N/A			

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)
	N/A			

VINTON HILLS ALEGRE, LLC
(Company Name)

For the Year Ended

2015

VERIFICATION

OATH

(To be made by the officer having control of the accounting of the respondent)

State of New Mexico as:

County of Dona Ana

Bruce Bonastrow makes oath and says that he/she is Member
(Name of affiant) (Official title of affiant)

of Vinton Hills Alegre, LLC
(Exact legal title or name of the respondent)

The signed officer has reviewed the report.

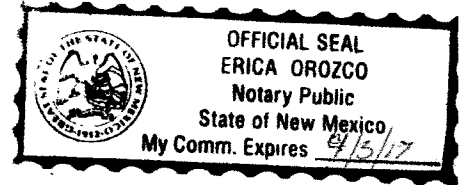
Based on the officer's knowledge, the report does not contain any untrue statements of a material fact or omit to state a material fact necessary in order to make the statements made, in light of the circumstances under which such statements were made, not misleading.

Based on such officer's knowledge, the financial statements, and other financial information included in the report, fairly present in all material respects the financial condition and results of operations of the issuer as of, and for, the periods 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 correct and complete statement of the business and affairs of the above-named respondent during the period of time from and including 1/1/15 to and including 12/31/15

Subscribed and sworn to and before me, a Bruce Bonastrow
in and for the State and County above-named, this 30th day of May 2016.

My commission expires April 3, 2017
(Signature of officer authorized to administer oaths)



(Signature of affiant)

SUPPLEMENTAL OATH

(By the president or other chief officer of the respondent)

State of _____ as:

County of _____

_____ mal _____
(Name of affiant) (Official title of affiant)

of _____
(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 contained in the said report are true, and that the said report is a statement of the business and affairs of the above named respondent during the period of time from and including _____ to and including _____

Subscribed and sworn to before me, a _____
in and for the State and County above-named, this _____ day of _____

My commission expires _____
(Signature of officer authorized to administer oaths)

(Signature of affiant)