



Control Number: 47091



Item Number: 60

Addendum StartPage: 0



TEXAS WATER SYSTEMS Inc

June 15, 2017

Public Utility Commission of Texas
Filing Clerk
1701 N Congress
Austin, Texas 78711

RECEIVED
2017 JUN 23 AM 9:17
PUBLIC UTILITY COMMISSION
FILING CLERK

Re: Class B Rate/Tariff Change Application for Texas Water System Docket No. 47091
Response to Commission Staff's first request for information to Texas Water Systems, Inc.
Question Nos. Staff 1-3 through Staff 1-4.

**Staff 1-3 Reference page 25, line 19, of the application. Please answer the following:
line 6, of the application. Please answer the following:**

- a. Explain the reason for the increase in insurance expense from \$5,371 in 2015 to \$12,276 in 2016.**

Response: (i) Our worker's comp insurance has been relatively volatile over the past several years based on insurance audit adjustments of forecast to actual. The amount in 2015 was reduced significantly based on a 2014 audit. The 2016 amount should be relatively accurate. (ii) newer vehicles were acquired during 2016 which also increased insurance premiums. Appendix A

- b. Was a new vehicle bought or did an accident occur on site? Please provide invoices for the vehicle.**

Response: No accidents occurred. 2016 Dodge and a 2016 Ford Expedition .Appendix B

- c. Was any vehicle claimed in the application used for personal use or business other than Texas Water Systems' operations? Please provide written evidence of the percentage used for Texas Water Systems operation, such as a mileage log or written operating procedures with regard to the vehicle.**

Response: Two vehicles are used solely for TWS Management. The remainder are used primarily for Texas Water Systems

- d. Provide invoices and copies of policies for all insurance claimed in the application**

Response: Appendix A

Staff 1-4 Reference Schedule III-2, page 31, of the application:

a. Provide a total for all customer deposits held by the applicant.

Response: Appendix C

b. Provide a copy of the most current tax return which included the applicant's operations.

Response: A copy of the 2016 Federal Tax Return for TWS Holding Corp is provided in Appendix [D]. Texas Water Systems, Inc. is a wholly owned subsidiary of TWS Holding Corp and a tax return is filled on a consolidated basis for the affiliated entities.

Has the applicant or pass-through entity of the applicant for tax purposes taken accelerated depreciation on assets claimed in the application on the tax return?

Response: Yes, Texas Water Systems, Inc has taken accelerated depreciation on assets claimed in the application for federal tax purposes. Such accelerated depreciation is applicable ONLY to the tax basis of the assets. For the purposes of rate making and the utility rate basis, no accelerated depreciation has been taken.

c. If the answer to c. is yes, provide applicant's calculation for income taxes deferred due to accelerated depreciation taken on the tax return reflecting Texas Water System's operations or any pass-through entity for tax purposes.

Response: The entity does not carry any balances of deferred income taxes. And since the utility's test case includes no profits, no income taxes are included, thus the tax effect of accelerated depreciation is excluded. The depreciation expense used in the test year submission includes ONLY current/future ACTUAL depreciation which can reasonably be determined.

This document is prepared under oath and the name of witness who can sponsor the answers is Belinda Tompkins, Office Administrator.

Original and three copies have been provided as requested

Appendix A



State Farm Mutual Automobile Insurance Company

PO Box 799100
Dallas TX 75379

15605-7-A

MUTL VOL FLEET

DECLARATIONS PAGE

NAMED INSURED

43-7907-7 A A

000002 0065

AMERI-TEX DRILLING INC; TEXAS
PUMP & WATER INC; TEXAS WATER
SYSTEMS INC
7891 HWY 271
TYLER TX 75708-4002



POLICY NUMBER 115 4009-C26-43I

POLICY PERIOD SEP 26 2016 to SEP 26 2017
12:01 A.M. Standard Time

STATE FARM PAYMENT PLAN NUMBER
1054897608

AGENT

RJ COLLINS JR
106 VAN ST
LINDALE, TX 75771-6209

**DO NOT PAY PREMIUMS SHOWN ON THIS PAGE.
IF AN AMOUNT IS DUE, THEN A SEPARATE STATEMENT IS ENCLOSED.**

PHONE: (903)882-7583 or (903)882-5609

FORM OF BUSINESS: ☐ CORPORATION ☐ PARTNERSHIP ☐ INDIVIDUAL ☒ OTHER

YOUR CAR

YEAR	MAKE	MODEL	BODY STYLE	VEHICLE ID NUMBER	CLASS
------	------	-------	------------	-------------------	-------

Total premium for SEP 26 2016 to SEP 26 2017

\$11,956.35

This is not a bill.

IMPORTANT MESSAGES

Replaced policy number 1154009-43H.

New Policy Form

EXCEPTIONS, POLICY BOOKLET & ENDORSEMENTS (See policy booklet & individual endorsements for coverage details.)

SEE VEHICLE SCHEDULE

Date: SEP 27 2016 AMERI-TEX DRILLING INC; TEXAS

Agent/AFO: 7907/AEB Page 2

Attached to and forming a part of Policy No.: 115 4009-C26-431

Policy Period: SEP 26 2016 TO SEP 26 2017

CAR	YEAR, MAKE, MODEL, CYL., VIN	CLASS	EFFECTIVE DATE	COVERAGE AND PREMIUM TO RENEWAL DATE	COVERAGE AND PREMIUM ANNUAL
005	2005 FORD F350 PICKUP 1FDWF36P45EC75908	COMRCL GRG 020/ DRG 020	TERR 043		A \$673.00, P2500 \$18.68, D1000 \$100.21, G1000 \$138.15, U \$97.59 \$1027.63
035	2009 FORD F150 PICKUP 1FTRX12W19KC54876	COMRCL GRG 019/ DRG 019	TERR 043		A \$589.01, P2500 \$22.31, D1000 \$96.13, G1000 \$175.31, U \$97.59 \$980.35
037	2007 TOYOTA TACOMA PICKUP 5TENX22N27Z365067	COMRCL GRG 013/ DRG 013	TERR 043		A \$582.95, P2500 \$22.31, D1000 \$57.23, G1000 \$97.04, U \$97.59 \$857.12
038	1999 INTERNATL SWEAL TRUCK 1HTSCAAM3XH630424	COMRCL GRG 023/ DRG 023	TERR 043		A \$670.08, P2500 \$16.25, D1000 \$91.09, G1000 \$135.32, U \$97.59 \$1010.33
039	2002 FORD F350 PU 1FTWW33F52ED55584	COMRCL GRG 020/ DRG 020	TERR 043		A \$605.75, P2500 \$20.53, D1000 \$104.49, G1000 \$137.78, U \$97.59 \$966.14
040	2011 CHEVROLET SILVERADO PI 1GC4KZC87BF199629	COMRCL GRG 023/ DRG 023	TERR 043		A \$595.10, P2500 \$22.31, U \$97.59 \$715.00
041	2011 CHEVROLET SILVERADO PI 1GC0CVCG1BF169182	COMRCL GRG 021/ DRG 021	TERR 043		A \$595.10, P2500-\$22.31, D1000 \$100.70, G1000 \$212.67, U \$97.59 \$1028.37

Date: SEP 27 2016 AMERI-TEX DRILLING INC; TEXAS

Agent/AFO: 7907/AEB Page 3

Attached to and forming a part of Policy No.: 115 4009-C26-431

Policy Period: SEP 26 2016 TO SEP 26 2017

CAR	YEAR, MAKE, MODEL, CYL., VIN	CLASS	EFFECTIVE DATE	COVERAGE AND PREMIUM TO RENEWAL DATE	COVERAGE AND PREMIUM ANNUAL
042	2003 GMC SIERRA PICKUP 1GTEC14X03Z357074	COMRCL GRG 015/ DRG 015	TERR 043		A \$576.87, P2500 \$22.31, D1000 \$61.62, G1000 \$102.70, U \$97.59 \$861.09
043	2016 FORD LARIAT 250 PICKUP 1FT7W2B62GEA37204	COMRCL GRG 022/ DRG 022	TERR 043		A \$696.99, P2500 \$25.36, D1000 \$202.74, G1000 \$343.17, U \$97.59 \$1365.85
044	2005 CHEVROLET SILVERADO PI 1GCEC14X55Z337969	COMRCL GRG 016/ DRG 016	TERR 043		A \$576.87, P2500 \$22.31, D1000 \$72.20, G1000 \$123.52, U \$97.59 \$892.49
045	2003 CHEVROLET 1500 PICKUP 1GCEC14XX3Z249092	COMRCL GRG 015/ DRG 015	TERR 043		A \$576.87, P2500 \$22.31, D1000 \$61.62, G1000 \$102.70, U \$97.59 \$861.09
046	2016 DODGE 2500 PICKUP. 3C6MR5AL2GG119839	COMRCL GRG 022/ DRG 022	TERR 043		A \$607.24, P2500 \$22.31, D1000 \$178.41, G1000 \$302.01, U \$97.59 \$1207.56
100	NONOWNED AUTO	6700EH000 GRG 000/ DRG 000	TERR 043		A \$37.03, P2500 \$7.70, D500 \$61.60, G500 \$61.60, U \$15.40 \$183.33

4080A VEHICLE SCHEDULE (Continued)

Date: SEP 27 2016 AMERI-TEX DRILLING INC; TEXAS Agent/AFO: 7907/AEB Page 4
Attached to and forming a part of Policy No.: 115 4009-C26-431 Policy Period: SEP 26 2016 TO SEP 26 2017

Exceptions and Endorsements

APPLIES TO ALL VEHICLES - 4031A ANNUAL POLICY PERIOD
APPLIES TO ALL VEHICLES - 4044A UNINSURED/UNDERINSURED MOTORISTS COVERAGE
APPLIES TO ALL VEHICLES - 4820A PERSONAL INJURY PROTECTION COVERAGE
APPLIES TO VEHICLES 100 - 4164A HIRED CAR LIABILITY COVERAGE
APPLIES TO VEHICLES 100 - 4166A HIRED CAR COMPREHENSIVE COVERAGE AND COLLISION COVERAGE \$100,000
LIMIT, \$500 DEDUCTIBLE
APPLIES TO VEHICLES 5,39 -01-FINANCED GLADEWATER NATIONAL BANK PO BOX 1749 GLADEWATER TX 75647-1749
APPLIES TO VEHICLES 35,37 -01-FINANCED-22143 SOUTHSIDE BANK PO BOX 1079 TYLER TX 75710-1079
APPLIES TO VEHICLES 46 -01-FINANCED-61861 SUNTRUST BANK PO BOX 791144 BALTIMORE MD 21279-1144
APPLIES TO VEHICLES 35,41,42,43,44,45,46 - ANTI-THEFT DEVICE 10%

**Service Lloyds**

INSURANCE COMPANY

PO BOX 26850 * AUSTIN, TEXAS * 78755-0850

WORKERS COMPENSATION REPORT OF AUDIT

TEXAS PUMP & WATER SYSTEMS, INC.
 7891 HIGHWAY 271
 TYLER, TX 75708-4002

800 Hilliard Box Insurance

PAGE: 01

DATE	POLICY NUMBER	PERIOD BEGINNING		PERIOD ENDING	
4/23/15	SRZF21987-14	4/13/14		4/13/15	
CLASSIFICATIONS	CLASS CODE	PAYROLL	RATE	PREMIUM	
WATER SOFTENING SYSTEMS INSTAL- LATION & SERVICE & DRIVERS	5183	233,654	5.27	12,314	
WATERWORKS OPERATION & DRIVERS	7520	104,084	5.55	5,777	
CLERICAL OFFICE EMPLOYEES NOC	8810	65,764	.30	197	
SALESPERSONS, COLLECTORS OR MESSENGERS - OUTSIDE	8742	30,632	.50	153	
EXECUTIVE OFFICERS NOC-PERFORMING CLERICAL OR OUTSIDE SALES DUT. ONLY	8809	9,807	.36	35	
Coverage C - Employers Liability	9812			370	
Increased Limits Charge					
Sub Total				18,846	
Negotiated Modifier .90					
Calculated Modifier .92					
Modified Premium				16,961	
Schedule Rating Modification -40%	9887			-6,784	
Medical Network Credit	9874			-1,221	
Total Standard Premium				8,956	
Premium Discount 10.0%	0063			-896	
Net Standard Premium				8,060	
Expense Constant	0032			200	
TRIPRA Surcharge	9740			107	
		TOTAL PAYROLL =>	443,941	AUDIT PREMIUM =>	8,367

Current Premium 8,486
 Credit Premium 119

THIS IS NOT A BILL. IMPORTANT PREMIUM CALCULATION. PLEASE RETAIN FOR YOUR RECORDS.FOR QUESTIONS REGARDING THE REPORT OF AUDIT PLEASE CALL OUR AUDIT DEPARTMENT AT 800-299-6977 ext. 3886 OR EMAIL TO audit@servicelloyds.com



Service Lloyds

INSURANCE COMPANY

PO BOX 26850 * AUSTIN, TEXAS * 78755-0850

WORKERS COMPENSATION REPORT OF AUDIT

TEXAS PUMP & WATER SYSTEMS, INC.
7891 HIGHWAY 271
TYLER, TX 75708-4002

800 Hilliard Box Insurance

PAGE: 01

DATE	POLICY NUMBER	PERIOD-BEGINNING	PERIOD ENDING	
7/08/16	SRZG21987-15	4/13/15	4/13/16	
CLASSIFICATIONS	CLASS CODE	PAYROLL	RATE	PREMIUM
WATER SOFTENING SYSTEMS INSTAL-	5183	142,744	3.95	5,638
LATION & SERVICE & DRIVERS				
WATERWORKS OPERATION & DRIVERS	7520	241,229	4.16	10,035
CLERICAL OFFICE EMPLOYEES NOC	8810	54,631	.23	126
SALESPERSONS, COLLECTORS OR	8742	If Any	.38	0
MESSENGERS - OUTSIDE				
EXECUTIVE OFFICERS NOC-PERFORMING	8809	16,345	.27	44
CLERICAL OR OUTSIDE SALES DUT. ONLY				
Coverage C - Employers Liability	9812			174
Increased Limits Charge				
Sub Total				16,017
Experience Modifier .86				
Modified Premium				13,775
Schedule Rating Modification -19%	9887			-2,617
Medical Network Credit	9874			-1,339
Total Standard Premium				9,819
Premium Discount 4.7%	0063			-461
Net Standard Premium				9,358
Expense Constant	0032			200
	TOTAL PAYROLL =>	454,949	AUDIT PREMIUM =>	9,558

Current Premium PD 8,540
Additional Premium - owe 1,018

THIS IS NOT A BILL. IMPORTANT PREMIUM CALCULATION. PLEASE RETAIN FOR YOUR RECORDS.

FOR QUESTIONS REGARDING THE REPORT OF AUDIT PLEASE CALL OUR AUDIT DEPARTMENT AT 800-299-6977 ext. 3886 OR EMAIL TO audit@servicelloyds.com

SERVICE LLOYDS INSURANCE COMPANY
P.O. Box 26850 Austin, Texas 78755-0850

Carrier Code: 21075

WORKERS' COMPENSATION GENERAL CHANGE ENDORSEMENT

Policy Number: SRZH21987-16 Policy Effective Date: 4/13/16 to 4/13/17

ITEM 1 - INSURED NAME & MAILING ADDRESS

TEXAS PUMP & WATER SYSTEMS, INC.
7891 HIGHWAY 271
TYLER, TX 75708-4002

Effective 4/13/16, it is hereby agreed that item #4 is amended to read:

CLASSIFICATION OF OPERATIONS	CODE NO.	PREMIUM BASIS	RATES	EST. ANNUAL PREMIUM
WATERWORKS OPERATION & DRIVERS	7520	217,726	4.15	9,036
CLERICAL OFFICE EMPLOYEES NOC	8810	86,000	.20	172
EXECUTIVE OFFICERS NOC-PERFORMING CLERICAL OR OUTSIDE SALES DUT. ONLY	8809	39,231	.23	90
WATER SOFTENING SYSTEMS INSTAL- LATION & SERVICE & DRIVERS	5183	if any	3.92	to be determined
SALESPERSONS, COLLECTORS OR MESSENGERS - OUTSIDE	8742	if any	.33	to be determined
Coverage C - Employers Liability	9812	if any		150
Increased Limits Charge				
Sub-Total				9,448
Experience Modifier: .94				
Modified Premium				8,881
Scheduled Rating Modification: 28%	9887			2,487-
Med Health Network Discount	9874			767-
Total Estimated Standard Premium				5,627
Premium Discount: 1.1%	0063			62-
Total Estimated Net Standard Premium				5,565
Expense Constant	0900			200
Revised Total Estimated Annual Premium				5,765
Revised Premium				5,765
- Prior Premium				8,257
Premium Change				-2,492

Endorsement #11
99 00 02
7/01/16/LL
21987 ZH11


Authorized Representative

WORKERS COMPENSATION AND EMPLOYERS' LIABILITY INSURANCE POLICY
SERVICE LLOYDS INSURANCE COMPANY

6907 CAPITAL OF TEXAS HIGHWAY
AUSTIN, TEXAS 78731

SRZH21987-16

POLICY NUMBER

SRZG21987-15

RENEWAL OF NUMBER

ITEM INFORMATION PAGE:

1. Insured's Name & Mailing Address:

TEXAS PUMP & WATER SYSTEMS, INC.

(SEE END. #06)

7891 HIGHWAY 271

TYLER, TX 75708-4002

FEIN: 75-2711853

Other Work Places:

Insured is Corporation

2. The Policy period is from 4/13/16 to 4/13/17 at 12:01 AM standard time at the insured's mailing address.

3. A. Workers' Compensation Insurance: Part One of the policy applies to the Workers' Compensation Law of the states listed here: TEXAS

B. Employers' Liability Insurance: Part Two of the policy applies to work in each state listed in Item 3: A.

The limits of our liability under Part Two are:	Bodily Injury by Accident:	\$1,000,000	each accident
	Bodily Injury by Disease:	\$1,000,000	policy limit
	Bodily Injury by Disease:	\$1,000,000	each employee

C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here: NONE

4. The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans.

All information required below is subject to verification and change by audit.

Classifications	Code No.	Premium Basis	Rate Per	Estimated
		Total Estimated Annual Remuneration	\$100 of Remuneration	Annual Premium
See Next Page				

Minimum Premium 250

This policy includes these endorsements and schedules:

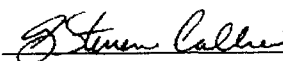
WC 42 03 01 G, WC 00 04 14, WC 00 04 22 B, WC 42 03 10, WC 42 03 08, WC 99 00 01,
WC 00 04 06, WC 42 04 08 A, WC 42 04 07, WC 99 00 12,

Pursuant to Texas Labor Code ss411.066, Service Lloyds Insurance Company is required to notify its policyholders that accident prevention services are available from Service Lloyds Insurance Company at no additional charge. These services may include surveys, recommendations, training programs, consultations, analyses of accident causes, industrial hygiene, and industrial health services. Service Lloyds Insurance Company is also required to provide return-to-work coordination services as required by Texas Labor Code ss413.021 and to notify you of the availability of the return-to-work reimbursement program for employers under Texas Labor Code ss413.022. If you would like more information, contact Service Lloyds Insurance Company at 800-299-6977 and ssloan@servicelloyds.com for accident prevention services or 800-299-6977 and ssloan@servicelloyds.com for return-to-work coordination services. For more information about these requirement call the Texas Department of Insurance, Division of Worker's Compensation (TDI-DWC) at 1-800-687-7080 or for information about the return-to-work reimbursement program for employers call the TDI-DWC at (512) 804-5000. If Service Lloyds Insurance Company fails to respond to your request for accident prevention services or return-to-work coordination services, you may file a complaint with the TDI-DWC in writing at <http://www.tdi.texas.gov> or by mail to Texas Department of Insurance, Division of Workers' Compensation, MS-8, at 7551 Metro Center Drive, Austin, Texas 78744-1645.

21987 ZH00

4/08/16

Countersigned By



SERVICE LLOYDS INSURANCE COMPANY

Effective Date: 4/13/16

Policy Number: SRZH21987-16

Insured Name and Mailing Address:

Page 2

TEXAS PUMP & WATER SYSTEMS, INC.
 7891 HIGHWAY 271
 TYLER, TX 75708-4002

Classifications	Code No.	Total Est. Annual Remuneration	Rate	Estimated Annual Premium
WATER SOFTENING SYSTEMS INSTAL- LATION & SERVICE & DRIVERS	5183	179,186	3.92	7,024
WATERWORKS OPERATION & DRIVERS	7520	152,124	4.15	6,313
CLERICAL OFFICE EMPLOYEES NOC	8810	120,496	.20	241
SALESPERSONS, COLLECTORS OR MESSENGERS - OUTSIDE	8742	60,522	.33	200
EXECUTIVE OFFICERS NOC-PERFORMING CLERICAL OR OUTSIDE SALES DUT. ONLY	8809	39,231	.23	90
Coverage C - Employers Liability	9812			194
Increased Limits Charge				
Sub-Total				14,062
Experience Modifier: .94				
Modified Premium				13,218
Schedule Rating Modification -28%	9887			-3,701
Med Health Network Discount	9874			-1,142
Total Estimated Standard Premium				8,375
Premium Discount 3.8%	0063			-318
Total Estimated Net Standard Premium				8,057
Expense Constant	0900			200
TRIPRA Surcharge	-9740			0
Total Estimated Annual Premium				8,257

TEXAS AMENDATORY ENDORSEMENT

This endorsement applies only to the insurance provided by the policy because Texas is shown in Item 3 A. of the Information Page

GENERAL SECTION

B. **Who Is Insured** is amended to read:

You are insured if you are an employer named in Item 1 of the Information Page. If that employer is a partnership or joint venture, and if you are one of its partners or members, you are insured, but only in your capacity as an employer of the partnership's or joint venture's employees

D. **State** is amended to read:

State means any state or territory of the United States of America, and the District of Columbia.

PART ONE—WORKERS COMPENSATION INSURANCE

E. **Other Insurance** is amended by adding this sentence:

This Section only applies if you have other insurance or are self-insured for the same loss.

F. **Payments You Must Make**

This Section is amended by deleting the words "workers compensation" from number 4

H. **Statutory Provisions**

This Section is amended by deleting the words "after an injury occurs" from number 2.

PART TWO—EMPLOYERS LIABILITY INSURANCE

C. **Exclusions**

Sections 2 and 3 are amended to add:

This exclusion does not apply unless the violation of law caused or contributed to the bodily injury.

Section 6 is amended to read:

6. bodily injury occurring outside the United States of America, its territories or possessions, and Canada. This exclusion does not apply to bodily injury to a citizen or resident of the United States of America, Mexico or Canada who is temporarily outside these countries.

D. **We Will Defend**

This Section is amended by deleting the last sentence.

PART FOUR—YOUR DUTIES IF INJURY OCCURS

Number 6 of this part is amended to read:

6. Texas law allows you to make weekly payments to an injured employee in certain instances. Unless authorized by law, do not voluntarily make payments, assume obligations or incur expenses, except at your own cost

PART FIVE—PREMIUM**A. Our Manuals** is amended by adding this sentence:

In this part, "our manuals" means manuals approved or prescribed by the Texas Department of Insurance.

C. Remuneration

Number 2 is amended to read.

- 2 All other persons engaged in work that would make us liable under Part One (Workers Compensation Insurance) of this policy. This paragraph 2 will not apply if you give us proof that the employers of these persons lawfully secured workers compensation insurance.

E. Final Premium

Number 2 is amended to read.

- 2 If you cancel, final premium will be calculated pro rata based on the time this policy was in force. Final premium will not be less than the pro rata share of the minimum premium.

PART SIX—CONDITIONS**A. Inspection** is amended by adding this sentence.

Your failure to comply with the safety recommendations made as a result of an inspection may cause the policy to be canceled by us.

C. Transfer of Your Rights and Duties is amended to read:

Your rights and duties under this policy may not be transferred without our written consent. If you die, coverage will be provided for your surviving spouse or your legal representative. This applies only with respect to their acting in the capacity as an employer and only for the workplaces listed in Items 1 and 4 on the Information Page.

D. Cancellation is amended to read:

1. You may cancel this policy. You must mail or deliver advance notice to us stating when the cancellation is to take effect.
2. We may cancel this policy. We may also decline to renew it. We must give you written notice of cancellation or nonrenewal. That notice will be sent certified mail or delivered to you in person. A copy of the written notice will be sent to the Texas Department of Insurance—Division of Workers' Compensation.
3. Notice of cancellation or nonrenewal must be sent to you not later than the 30th day before the date on which the cancellation or nonrenewal becomes effective, except that we may send the notice not later than the 10th day before the date on which the cancellation or nonrenewal becomes effective if we cancel or do not renew because of:
 - a. Fraud in obtaining coverage,
 - b. Misrepresentation of the amount of payroll for purposes of premium calculation;
 - c. Failure to pay a premium when payment was due;
 - d. An increase in the hazard for which you seek coverage that results from an action or omission and that would produce an increase in the rate, including an increase because of failure to comply with reasonable recommendations for loss control or to comply within a reasonable period with recommendations designed to reduce a hazard that is under your control;
 - e. A determination by the Commissioner of Insurance that the continuation of the policy would place us in violation of the law, or would be hazardous to the interests of subscribers, creditors, or the general public.
4. If another insurance company notifies the Texas Department of Insurance—Division of Workers' Compensation that it is insuring you as an employer, such notice shall be a cancellation of this policy effective when the other policy starts.

PART SEVEN—OUR DUTY TO YOU FOR CLAIM NOTIFICATION**A. Claims Notification**

We are required to notify you of any claim that is filed against your policy. Thereafter we shall notify you of any proposal to settle a claim or, on receipt of a written request from you, of any administrative or judicial proceeding relating to the resolution of a claim, including a benefit review conference conducted by the Texas Department of Insurance—Division of Workers' Compensation. You may, in writing, elect to waive this notification requirement.

We shall, on the written request from you, provide you with a list of claims charged against your policy, payments made and reserves established on each claim, and a statement explaining the effect of claims on your premium rates. We must furnish the requested information to you in writing no later than the 30th day after the date we receive your request. The information is considered to be provided on the date the information is received by the United States Postal Service or is personally delivered.

COMPLAINT NOTICE: SHOULD ANY DISPUTE ARISE ABOUT YOUR PREMIUM OR ABOUT A CLAIM THAT YOU HAVE FILED, CONTACT THE AGENT OR WRITE TO THE COMPANY THAT ISSUED THE POLICY. IF THE PROBLEM IS NOT RESOLVED, YOU MAY ALSO WRITE THE TEXAS DEPARTMENT OF INSURANCE, CONSUMER PROTECTION (111-1A), P.O. BOX 149091, AUSTIN, TEXAS 78714-9091, FAX # (512) 475-1771. THIS NOTICE OF COMPLAINT PROCEDURE IS FOR INFORMATION ONLY AND DOES NOT BECOME A PART OR CONDITION OF THIS POLICY.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

Endorsement Effective: 4/13/16 Policy No. SRZH21987-16 End. No. 01
Insured: TEXAS PUMP & WATER SYSTEMS, INC. Carrier Code: 21075
Insurance Company: Service Lloyds Ins. Co.

Countersigned by



NOTIFICATION OF CHANGE IN OWNERSHIP ENDORSEMENT

Experience rating is mandatory for all eligible insureds. The experience rating modification factor, if any, applicable to this policy, may change if there is a change in your ownership or in that of one or more of the entities eligible to be combined with you for experience rating purposes. Change in ownership includes sales, purchases, other transfers, mergers, consolidations, dissolutions, formations of a new entity and other changes provided for in the applicable experience rating plan manual.

You must report any change in ownership to us in writing within 90 days of such change. Failure to report such changes within this period may result in revision of the experience rating modification factor used to determine your premium.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

Endorsement Effective: 4/13/16 Policy No. SRZH21987-16 End. No. 02
Insured: TEXAS PUMP & WATER SYSTEMS, INC. Carrier Code: 21075
Insurance Company: Service Lloyds Ins. Co.

Countersigned by



TERRORISM RISK INSURANCE PROGRAM REAUTHORIZATION ACT DISCLOSURE ENDORSEMENT

This endorsement addresses the requirements of the Terrorism Risk Insurance Act of 2002 as amended and extended by the Terrorism Risk Insurance Program Reauthorization Act of 2015. It serves to notify you of certain limitations under the Act, and that your insurance carrier is charging premium for losses that may occur in the event of an Act of Terrorism.

Your policy provides coverage for workers compensation losses caused by Acts of Terrorism, including workers compensation benefit obligations dictated by state law. Coverage for such losses is still subject to all terms, definitions, exclusions, and conditions in your policy, and any applicable federal and/or state laws, rules, or regulations.

Definitions

The definitions provided in this endorsement are based on and have the same meaning as the definitions in the Act. If words or phrases not defined in this endorsement are defined in the Act, the definitions in the Act will apply.

"Act" means the Terrorism Risk Insurance Act of 2002, which took effect on November 26, 2002, and any amendments thereto, including any amendments resulting from the Terrorism Risk Insurance Program Reauthorization Act of 2015.

"Act of Terrorism" means any act that is certified by the Secretary of the Treasury, in consultation with the Secretary of Homeland Security, and the Attorney General of the United States as meeting all of the following requirements:

- a. The act is an act of terrorism.
- b. The act is violent or dangerous to human life, property or infrastructure.
- c. The act resulted in damage within the United States, or outside of the United States in the case of the premises of United States missions or certain air carriers or vessels.
- d. The act has been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

"Insured Loss" means any loss resulting from an act of terrorism (and, except for Pennsylvania, including an act of war, in the case of workers compensation) that is covered by primary or excess property and casualty insurance issued by an insurer if the loss occurs in the United States or at the premises of United States missions or to certain air carriers or vessels.

"Insurer Deductible" means, for the period beginning on January 1, 2015, and ending on December 31, 2020, an amount equal to 20% of our direct earned premiums, during the immediately preceding calendar year.

Limitation of Liability

The Act limits our liability to you under this policy. If aggregate Insured Losses exceed \$100,000,000,000 in a calendar year and if we have met our Insurer Deductible, we are not liable for the payment of any portion of the amount of Insured Losses that exceeds \$100,000,000,000; and for aggregate Insured Losses up to \$100,000,000,000, we will pay only a pro rata share of such Insured Losses as determined by the Secretary of the Treasury.

Policyholder Disclosure Notice

1. Insured Losses would be partially reimbursed by the United States Government. If the aggregate industry Insured Losses exceed:
 - a. \$100,000,000, with respect to such Insured Losses occurring in calendar year 2015, the United States Government would pay 85% of our Insured Losses that exceed our Insurer Deductible.
 - b. \$120,000,000, with respect to such Insured Losses occurring in calendar year 2016, the United States Government would pay 84% of our Insured Losses that exceed our Insurer Deductible.
 - c. \$140,000,000, with respect to such Insured Losses occurring in calendar year 2017, the United States Government would pay 83% of our Insured Losses that exceed our Insurer Deductible.
 - d. \$160,000,000, with respect to such Insured Losses occurring in calendar year 2018, the United States Government would pay 82% of our Insured Losses that exceed our Insurer Deductible.
 - e. \$180,000,000, with respect to such Insured Losses occurring in calendar year 2019, the United States Government would pay 81% of our Insured Losses that exceed our Insurer Deductible.
 - f. \$200,000,000, with respect to such Insured Losses occurring in calendar year 2020, the United States Government would pay 80% of our Insured Losses that exceed our Insurer Deductible.

(Ed. 1-15)

2. Notwithstanding item 1 above, the United States Government will not make any payment under the Act for any portion of Insured Losses that exceed \$100,000,000,000.
3. The premium charge for the coverage your policy provides for Insured Losses is included in the amount shown in Item 4 of the Information Page or in the Schedule below.

Schedule		
State	Rate	Premium
TX	.000	

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

Endorsement Effective: 4/13/16 Policy No. SRZH21987-16 End. No. 03
Insured: TEXAS PUMP & WATER SYSTEMS, INC. Carrier Code: 21075
Insurance Company: Service Lloyds Ins. Co.

Countersigned by



WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

SOLE PROPRIETORS, PARTNERS, OFFICERS AND OTHERS COVERAGE ENDORSEMENT

Pursuant to Section 406.097, Labor Code, sole proprietors, partner(s) or corporate executive, officer(s) of the named insured are covered under this workers' compensation policy, unless specifically excluded from coverage through an endorsement to the policy. Such persons may be named in the Schedule below and the premium basis for the policy shall include their remuneration.

For employees excluded from workers' compensation coverage by law, an election has been made by or on behalf of each person described in "Others" in the Schedule to be subject to the workers' compensation law of the state named in the Schedule. Such persons shall be named in the Schedule below and the premium basis for the policy shall include their remuneration.

Schedule

	Persons	State
Officers:	JAMES "RED" BROWN PRESIDENT/SECRETARY	Texas

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

Endorsement Effective: 4/13/16 Policy No. SRZH21987-16 End. No. 04
Insured: TEXAS PUMP & WATER SYSTEMS, INC. Carrier Code: 21075
Insurance Company: Service Lloyds Ins. Co.
Countersigned by *J. Steven Calhoun*

WC 42 03 10
Effective January 1, 1997

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

PARTNERS, OFFICERS AND OTHERS EXCLUSION ENDORSEMENT

The policy does not cover bodily injury to any person described in the Schedule.

The premium basis for the policy does not include the remuneration of such persons.

You will reimburse us for any payment we must make because of bodily injury to such persons.

Schedule

Partners

Officers

Others

HUDSON WHITE
VICE PRESIDENT

Sole Proprietor

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated

Endorsement Effective: 4/13/16 Policy No. SRZH21987-16 End. No. 05
Insured: TEXAS PUMP & WATER SYSTEMS, INC. Carrier Code: 21075
Insurance Company: Service Lloyds Ins. Co.

Countersigned by



WC 42 03 08

Effective January 1, 1997

SERVICE LLOYDS INSURANCE COMPANY
P.O. Box 26850 Austin, Texas 78755-0850

Carrier Code: 21075 .

WORKERS' COMPENSATION GENERAL CHANGE ENDORSEMENT

Policy Number: SRZH21987-16 Policy Effective Date: 4/13/16 to 4/13/17

ITEM 1 - INSURED NAME & MAILING ADDRESS

TEXAS PUMP & WATER SYSTEMS, INC.
7891 HIGHWAY 271
TYLER, TX 75708-4002

Effective 4/13/16, it is hereby agreed that item #1, named
insured and address, is completed to read:

TEXAS PUMP & WATER SYSTEMS, INC. FEIN:75-2711853
7891 HIGHWAY 271
TYLER, TX 75708-4002

TEXAS WATER SYSTEMS, INC. FEIN:75-2253588
7891 HIGHWAY 271
TYLER, TX 75708-4002

TWS HOLDINGS, INC. FEIN:20-2030004
7891 HIGHWAY 271
TYLER, TX 75708-4002

TWS MANAGEMENT, INC. FEIN:20-2029907
7891 HIGHWAY 271
TYLER, TX 75708-4002

Endorsement #06
99 00 01
4/08/16/LL
21987 ZH6


Authorized Representative

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

PREMIUM DISCOUNT ENDORSEMENT

The premium for this policy and the policies, if any, listed in Item 3 of the Schedule may be eligible for a discount. This endorsement shows your estimated discount in Item 1 or 2 of the Schedule. The final calculation of premium discount will be determined by our manuals and your premium basis as determined by audit. Premium subject to retrospective rating is not subject to premium discount.

Schedule

Estimated Eligible Premium

- | | First | Next | Next | |
|--|---------|----------|-----------|---------|
| 1. <u>State</u> | \$5,000 | \$95,000 | \$400,000 | Balance |
| 2. Average Percentage Discount: <u>3.8%</u> | | | | |
| 3. Other Policies: | | | | |
| 4. If there are no entries in Items 1,2 and 3 of the schedule see the Premium Discount Endorsement attached to your policy number. | | | | |

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated

Endorsement Effective: 4/13/16 Policy No. SRZH21987-16 End. No. 07
Insured: TEXAS PUMP & WATER SYSTEMS, INC. Carrier Code: 21075
Insurance Company: Service Lloyds Ins. Co.

Countersigned by



WC 00 04 06

Effective January 1, 1987

Copyright 1984,1985 National Council on Compensation Insurance

TEXAS HEALTH CARE NETWORK ENDORSEMENT

This endorsement indicates that you have elected under this policy to provide workers compensation health care services to your injured employees through a certified workers compensation health care network that we have either established or contracted with, as provided in Chapter 1305 of the Texas Insurance Code and in Title 28, Chapter 10 of the Texas Administrative Code

We will provide you with information concerning the use of our certified workers compensation health care network(s) in our service area(s) and your rights and responsibilities as a participant in our network program. This includes information describing the service area(s) applicable to you and your injured employees as required in NCCI's **Basic Manual for Workers Compensation and Employers Liability Insurance**. In accordance with Chapter 1305 Texas Insurance Code and Title 28, Chapter 10 of the Texas Administrative Code, we will also provide you with information that is required to be given to your employees, including an employee's notice of network requirements and an employee acknowledgement form

Your premium may have been reduced because you have agreed to participate in our certified workers compensation health care network. The amount of the premium reduction is shown on the Information Page of this policy. The reduction is estimated at the policy inception and adjusted at final audit of the policy. The reduction may be pro-rated if you elect to participate in a certified workers compensation health care network during the policy year or if you terminate your participation in our certified workers compensation health care network before the policy expires. The premium reduction you received may be forfeited if we determine that you have failed to provide the notice of network requirements and employee acknowledgement form to your employees in accordance with Chapter 1305 005(d) and 1305.451 Texas Insurance Code and Title 28, Chapter 10 of the Texas Administrative Code.

Minimum premium policies are not eligible for this premium reduction.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

Endorsement Effective: 4/13/16 Policy No. SRZH21987-16 End. No. 08
Insured: TEXAS PUMP & WATER SYSTEMS, INC. Carrier Code: 21075
Insurance Company: Service Lloyds Ins. Co.

Countersigned by



**TEXAS - AUDIT PREMIUM AND
RETROSPECTIVE PREMIUM ENDORSEMENT**

Section D of Part Five of the policy is replaced by the following provision:

PART FIVE - PREMIUM

D. Premium Payments

You will pay all premium when due. You will pay the premium even if part or all of a workers' compensation law is not valid. The billing statement or invoice for audit additional premiums and/or retrospective additional premiums establishes the date that the premium is due.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.

Endorsement Effective: 4/13/16 Policy No. SRZH21987-16 End. No. 09
Insured: TEXAS PUMP & WATER SYSTEMS, INC. Carrier Code: 21075
Insurance Company: Service Lloyds Ins. Co.

Countersigned by



UNITED FIRE & CASUALTY COMPANY

P.O. Box 73909, Cedar Rapids, IA 52407-3909

***** DIRECT BILL *****
 THE ADDITIONAL/RETURN SHOWN BELOW IS
 TRANSFERRED INTO YOUR FLEX BILL BALANCE

NAMED INSURED:

TEXAS PUMP & WATER SYSTEMS
 TEXAS WATER SYSTEMS INC
 7891 US HIGHWAY 271
 TYLER TX 75708-4002

AUDIT BREAKDOWN

COMMERCIAL GENERAL LIABILITY

ISSUE DATE 07-29-2015 MG

POLICY NO: 85314987

AGENT: 830185

HILLIARD BOX INSURANCE
 4802 KINSEY DRIVE

TYLER TX

75703

POLICY DATE FROM 04-13-2014 TO 04-13-2015			AUDIT DATE FROM 04-13-2014 TO 04-13-2015			
CANC. DATE		CANC. TYPE		CANC. RATE		
CODE	CLASSIFICATION	EXPOSURE	RATES		PREMIUMS	
			Pr/Co	All other	Pr/Co	All other
16527	PLUMBING SUPPLIES AND FIXTURES-TX 7891 HIGHWAY 271	2250000S	.487	.186	1096	419
98482	PLUMBING-COMMERCIAL AND-TX 7891 HIGHWAY 271	274728P	12.795	5.739	3515	1577
99943	WATER COMPANIES-TX 7891 HIGHWAY 271	370602P	Incl	12.752	Incl	4726
PREMIUM NON-AUDITABLE COVERAGES						623



NO CHANGE IN PREMIUM

A- AREA
 C- COST
 G- GALLONS
 M- ADMISSIONS
 P- PAYROLL
 S- SALES/RECEIPTS
 T- EACH
 U- UNITS

EARNED PREMIUM	11956.00
ADVANCED PREMIUM	<i>Paid</i> 8178.00
ADDITIONAL PREMIUM	<i>Base</i> 3778.00
RETURN PREMIUM	

AUD 7012 (01 95)

UNITED FIRE & CASUALTY COMPANY

P.O. Box 73909, Cedar Rapids, IA 52407-3909

***** DIRECT BILL *****
 THE ADDITIONAL/RETURN SHOWN BELOW IS
 TRANSFERRED INTO YOUR FLEX BILL BALANCE

NAMED INSURED:

TEXAS PUMP & WATER SYSTEMS
 TEXAS WATER SYSTEMS INC
 7891 US HIGHWAY 271
 TYLER TX 75708-4002

AUDIT BREAKDOWN

COMMERCIAL GENERAL LIABILITY

ISSUE DATE 08-02-2016 SAE

POLICY NO: 85314987

AGENT: 830185

HILLIARD BOX INSURANCE
 4802 KINSEY DRIVE

TYLER TX

75703

POLICY DATE FROM 04-13-2015 TO 04-13-2016			AUDIT DATE FROM 04-13-2015 TO 04-13-2016			
CANC. DATE:		CANC. TYPE		CANC. RATE		
CODE	CLASSIFICATION	EXPOSURE	RATES		PREMIUMS	
			Pr/Co	All other	Pr/Co	All other
16527	PLUMBING SUPPLIES AND FIXTURES-TX 7891 HIGHWAY 271	1119556S	.463	.176	518	197
98482	PLUMBING-COMMERCIAL AND-TX 7891 HIGHWAY 271	128848P	12.147	5.449	1565	702
99943	WATER COMPANIES-TX 7891 HIGHWAY 271	271411P	Incl	12.107	Incl	3286
PREMIUM NON-AUDITABLE COVERAGES						935



NO CHANGE IN PREMIUM

A- AREA
 C- COST
 G- GALLONS
 M- ADMISSIONS
 P- PAYROLL
 S- SALES/RECEIPTS
 T- EACH
 U- UNITS

EARNED PREMIUM

7203.00

ADVANCED PREMIUM

11694.00

ADDITIONAL PREMIUM

RETURN PREMIUM 4491.00

AUD 7012 (01 95)

01000070



UNITED FIRE & CASUALTY COMPANY

P.O. Box 73909, Cedar Rapids, IA 52407-3909

***** DIRECT BILL *****
 THE ADDITIONAL/RETURN SHOWN BELOW IS
 TRANSFERRED INTO YOUR FLEX BILL BALANCE

NAMED INSURED:

TEXAS PUMP & WATER SYSTEMS
 TEXAS WATER SYSTEMS INC
 7891 US HIGHWAY 271
 TYLER TX 75708-4002

AUDIT BREAKDOWN

COMMERCIAL GENERAL LIABILITY

ISSUE DATE 05-30-2017 SAE

POLICY NO: 85314987

AGENT: 830185

HILLIARD BOX INSURANCE
 4802 KINSEY DRIVE

TYLER TX

75703

POLICY DATE: FROM 04-13-2016 TO 04-13-2017			AUDIT DATE: FROM 04-13-2016 TO 04-13-2017				
CANC. DATE:		CANC. TYPE		CANC. RATE			
				RATES		PREMIUMS	
CODE	CLASSIFICATION	EXPOSURE	Pr/Co	All other	Pr/Co	All other	
16527	PLUMBING SUPPLIES AND FIXTURES-TX 7891 HIGHWAY 271	1S	.527	.184			
98482	PLUMBING-COMMERCIAL AND-TX 7891 HIGHWAY 271	1P	11.837	5.548	94M		
99943	WATER COMPANIES-TX 7891 HIGHWAY 271	283431P	Incl	12.351	Incl	3501	



NO CHANGE IN PREMIUM

A- AREA
 C- COST
 G- GALLONS
 M- ADMISSIONS
 P- PAYROLL
 S- SALES/RECEIPTS
 T- EACH
 U- UNITS

EARNED PREMIUM

S/B

4569.00

ADVANCED PREMIUM

Paid

11927.00

ADDITIONAL PREMIUM

RETURN PREMIUM

owed to tws

7358.00

AUD 7012 (01 95)

01000170



Appendix B

Region To _____ Del. Date 07/28/15

Mailing Address 7001 US HIGHWAY 271 Office Phone (803) 597-4219 Home Phone (803) 521-2546

City & State TALLER, TX Zip 75708-4002

Year & Make 15 FORD Model EXPEDITION

Serial No. 1F70K1LT18E137592 SALE TYPE FNUC

NEW USED

SOURCE	STOCK NO.	MANAGER	SALESMAN	KEY	DATE	DEAL NO.	ACCESSORIES & OTHERS ON CAR
10 20				I		98015	
DESC.	COST	ACCT. NO.	SALE	KEY	CONTRACTS		
CROWN VICTORIA		40000		-	DRAFT	11100	
FUSION		40270		-	VEH. REC.	11100	
FOCUS		40300		-	FACTORY REBATE	117	
MUSTANG		40400		-		117	
500		40220		-		117	
EDGE		44750		-	GAP	23111	
FREESTYLE		45750		-	GAP RES.	5	
EXPEDITION		44000		-	RESERVE	128	
EXPLORER		44100		-	RESERVE INCOME	5	
ECON. VAN		44200		-	LUX. TAX	21520	
RANGER		44300		-	INS. PAY	23110	
F150 - 250 LD		44400		-	INS. RES.	5	
ESCAPE		44500		-	V.I.T.	21550	
F250 - 850 SD		44600		-	ESP WARR	23150	
F450 - 550 SD		44800		-	WARR RES.	5	
FREESTAR		44050		-	SALES TAX	21500	
EXCURSION		45300		-	INSP.	70310	
FLEET CARS		43600		-	DOC FEE	93000	
FLEET TRUCKS		44700		-	PAYOFF	23100	
				-	ACCESS. DUE	23120	
DEALER TRANSFER		46400		-	COMM	24110	
				-	COMM	24110	
U.C. RETAIL		4700		-	COMM EXP/NEW	70000	
U.T. RETAIL		47500		-	COMM EXP/USED	72000	
E.C. RETAIL		47050		-	UC INV	13500	
E.T. RETAIL		47550		-		13500	
U.C. WHOLESALE		47100		-	U TR INV	13600	
U.T. WHOLESALE		47600		-		13600	
U.C. RECONDITION		47010		-	COS	23160	
U.T. RECONDITION		47510		-			
E. VEH. RECONDITION		47		-			

TRADE IN CAR 15FORD F250 PICKUP

Est. Rec. App. By

VIN# 1FT7W2B62GEA37204 Allowance \$ 44000.00

PAYOFF TO: Net Payoff \$ 20760.30

Quoted By Phone Net Equity \$ 23239.70

Payoff good thru: Acct. #

Receipt Numbers Cash REBATE 6500.00

Terms on Bal. Due Due \$ N/A

Title 457194981

Status TOTAL \$ 29739.70

Selling Price \$ 52800.00

DEALERS \$ 99.77

Veh. Inv. Tax \$ 123.75

6.25% Sales Tax \$ 33.00

License Plates \$ 23.75

Title \$ 33.00

State Inspection \$ 23.75

Used Car Transfer Fee \$2.50 \$ N/A

Documentary Fee \$ 50.00

Credit Life \$ N/A

Warranty \$ N/A

Total Cash Price \$ 63008.71

Total Down Payment \$ 60739.70

Balance \$ 24169.01

A DOCUMENTARY FEE IS NOT AN OFFICIAL FEE. A DOCUMENTARY FEE IS NOT REQUIRED BY LAW, BUT MAY BE CHARGED TO BUYERS FOR HANDLING DOCUMENTS AND PERFORMING SERVICES RELATING TO THE CLOSING OF A SALE. A DOCUMENTARY FEE MAY NOT EXCEED \$50. THIS NOTICE IS REQUIRED BY LAW.

UN HONORARIO DE DOCUMENTACION NO ES UN HONORARIO OFICIAL. UN HONORARIO DE DOCUMENTACION NO ES REQUERIDO POR LA LEY, PERO PUEDE SER CARGADO AL COMPRADOR COMO GASTOS DE MANEJO DE DOCUMENTOS Y PARA REALIZAR SERVICIOS RELACIONADOS CON EL CIERRE DE UNA VENTA. UN HONORARIO DE DOCUMENTACION NO PUEDE EXCEDER \$50. ESTA NOTIFICACION ES REQUERIDA POR LA LEY.

Financed by financial institution and



WEB DEALER ORIGINAL TITLE



3C6MR5AL2GG119839



25000142479250012

COUNTY: WOOD

TAC NAME: CAROL TAYLOR

PLATE NO: HFR7869

DATE: 04/21/2016

DOCUMENT NO: 25000142479250012

TIME: 08:07AM

USER: 250-CFARREL

EFFECTIVE DATE: 04/21/2016

EXPIRATION DATE: 3/2018

WEB TITLE ID: 1115794

OWNER NAME AND ADDRESS

JAMES KIMMIE BROWN JR

17679 BRIARPATCH

LINDALE, TX 75771

REGISTRATION CLASS: TRUCK-LESS/EQL. 1 TON

PLATE TYPE: PASSENGER-TRUCK PLT

ORGANIZATION:

STICKER TYPE: WS

VEHICLE IDENTIFICATION NO: 3C6MR5AL2GG119839

VEHICLE CLASSIFICATION: TRK<=1

YR/MAKE: 2016/RAM MODEL: RAM BODY STYLE: PK

UNIT NO:

EMPTY WT: 7200 CARRYING CAPACITY: 1500

GROSS WT: 8700

TRAILER TYPE:

BODY VEHICLE IDENTIFICATION NO:

TRAVEL TRLR LNG/WDTH: 0

PREV OWNER NAME: LONESTAR DODGE CHRYSLER

PREV CITY/STATE: MINEOLA, TX

INVENTORY ITEM(S)

YR

PASSENGER-TRUCK PLT

WINDSHIELD STICKER

2018

VEHICLE RECORD NOTATIONS

ACTUAL MILEAGE

E-TITLE

MAJOR COLOR: WHITE

FEES ASSESSED

TITLE APPLICATION FEE

TEXAS MOBILITY FUND FEE

SALES TAX FEE

BUYERS TAG

WINDSHIELD STICKER

REG FEE-DPS

CNTY ROAD BRIDGE ADD-ON FEE

AUTOMATION FEE

INSPECTION FEE-2YR

TOTAL

\$ 13.00
\$ 15.00
2,560.13
5.00
108.00
2.00
20.00
2.00
16.75
2,741.88

ODOMETER READING: 259

BRAND: A

OWNERSHIP EVIDENCE: MANUFACTURER'S CERT. OF ORIGIN

1ST LIEN

DATE: 03/29/2016

SUNTRUST BANK

PO BOX 4000

WILMINGTON, OH 45177

SALES TAX CATEGORY: SALES/USE

Date of Assignment/Sales Tax Date: 03/29/2016
Sales Price (Less \$4,500.00 rebate) \$ 40,962.00
Less Trade In Allowance \$ 0.00
Taxable Amount \$ 40,962.00
Sales Tax Paid \$ 2,560.13
Less Other State Tax Paid \$ 0.00
Tax Penalty \$ 0.00
TOTAL TAX PAID \$ 2,560.13

2ND LIEN

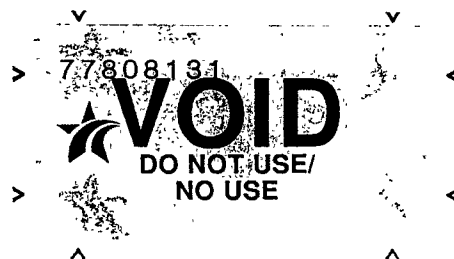
3RD LIEN

TITLE WILL BE ELECTRONICALLY FILED WITH THE LIENHOLDER.

THIS RECEIPT IS YOUR PROOF OF APPLICATION FOR CERTIFICATE OF TITLE AND REGISTRATION.

PEEL FROM BACK ONLY / DESPEGUE POR DETRÁS

Peel sticker from any corner.
Despegue la calcomanía de cualquier esquina.



OR



Appendix C

as of June 1, 2017

Texas Water Systems

Customer Deposits

<u>Name</u>	<u>Acct #</u>	<u>Dep 1 Amt</u>			
Hennessee, Gary	01-0003-002	\$50.00	Greene, Joseph/Shari	01-0101-002	\$50.00
Peek, Mike/Donna	01-0005-001	\$50.00	Rieke, Lousie	01-0103-001	\$50.00
Belongie, Kevin	01-0007-001	\$50.00	Rieke, Greg	01-0105-001	\$50.00
Johnson, Jay	01-0009-002	\$50.00	Heying, Joyce	01-0107-001	\$0.00
Rayner, Daniel	01-0011-001	\$50.00	Strickland, Jamès	01-0109-002	\$50.00
Dennis, Gary	01-0013-001	\$0.00	Smith, Kenneth	01-0111-002	\$50.00
Berry, Fern	01-0015-002	\$0.00	Parsons, Dan (cc)	01-0113-003	\$50.00
Hanson, Chad	01-0017-001	\$50.00	Woodson, Jay	01-0115-001	\$50.00
Hyzer, Karl	01-0019-005	\$50.00	Bell, Lucy	01-0117-001	\$50.00
Caney Bay Family	01-0021-001	\$50.00	Carmody, Chase	01-0118-002	\$50.00
Polczynski, Michael	01-0023-001	\$0.00	West, Alisa	01-0119-002	\$50.00
Hester, Kevin	01-0025-001	\$50.00	Mitchell, Clifton	01-0125-001	\$50.00
Jones, James/Angela	01-0027-001	\$50.00	Brewer, Robert/Iona-email	01-0130-001	\$50.00
Drago, Patricia	01-0029-001	\$50.00	Gondron, Glenn	01-0135-002	\$50.00
Dorey, Jeremy	01-0031-001	\$50.00	Darwin, Cheryl	01-0145-004	\$0.00
Collins, James	01-0033-001	\$0.00	Herrmann, Beverly	01-0150-001	\$50.00
Little, Brittney/Brian	01-0035-002	\$50.00	Rowe, David	01-0155-001	\$50.00
Fisher, Bethany	01-0035-003	\$0.00	CAPE TRANQUILITY POA	01-0160-001	\$0.00
Dennis, Gary	01-0037-001	\$50.00	Walker, Bradley W	01-0170-001	\$50.00
Lanfrey, Charles	01-0039-001	\$50.00	Norris, Kay-CC	02-0001-001	\$0.00
Ballenger, Ellen	01-0041-001	\$0.00	Speake, Wesley	02-0002-001	\$50.00
Cook, James	01-0043-001	\$50.00	Daniels, Ron/Bridgett	02-0003-001	\$50.00
Valdez, Sandra	01-0045-002	\$50.00	Shanks, Joel/Amber	02-0004-001	\$50.00
McKee, Karen	01-0047-002	\$50.00	JONES, WYVONNE A	02-0005-001	\$10.00
Moore, Gary/Deborah	01-0049-001	\$50.00	Baith, Owen	02-0006-002	\$50.00
Gresham, JW	01-0051-001	\$0.00	Wallis, Brian	02-0007-001	\$50.00
Kiser, Lana	01-0053-001	\$50.00	JBNA Development	02-0008-001	\$50.00
Zagst, Cynthia	01-0055-001	\$0.00	Becze, Katelyn	02-0015-003	\$0.00
VACANT	01-0057-001	\$0.00	Worley, Sue	02-0025-001	\$0.00
Sims, Michael	01-0059-003	\$50.00	Shipman, April	02-0030-002	\$50.00
Reese, Tabatha	01-0061-001	\$0.00	Baetz, Michelle	02-0035-002	\$0.00
Caldwell, Pam	01-0063-005	\$50.00	BLOW, NORMA	02-0040-001	\$10.00
Laughlin, Al	01-0065-001	\$50.00	T. R. BONNER LODGE #764	02-0045-001	\$25.00
Djuvik, Eric	01-0067-003	\$50.00	Murphy, Dean/Brenda	02-0055-003	\$50.00
Jung, Hans	01-0069-001	\$50.00	SMYRL, TREVOR	02-0060-002	\$50.00
Pirtle, James	01-0070-001	\$50.00	BROOKS, HAROLD	02-0065-001	\$25.00
Harris, Casey*	01-0071-005	\$0.00	SKELLEY, MANDY	02-0070-002	\$50.00
Gordon, Robert/Kathleen	01-0073-003	\$50.00	FROEBE, TODD/AMANDA	02-0075-002	\$50.00
Buchanan, Howard	01-0075-001	\$50.00	ANDERSON, JACKIE	02-0080-001	\$25.00
Kiser, Lana/Donald	01-0077-001	\$50.00	CAMPBELL, MELINDA	02-0085-001	\$25.00
Massey, Ronald	01-0079-001	\$0.00	DIAZ, CARLA	02-0090-003	\$50.00
Farrow, Lenard/Peggy	01-0081-001	\$0.00	LITTLE, WILLIAM	02-0105-001	\$50.00
Berry, Danny	01-0083-002	\$50.00	CATES, J A	02-0110-001	\$0.00
Morrison, Faron/Norma	01-0085-001	\$50.00	CLARK, FRANK	02-0115-001	\$10.00
Phares, Tom	01-0087-001	\$50.00	HAMILTON, DAVID	02-0120-003	\$50.00
Lesniewski, Nathan	01-0091-002	\$50.00	COCHRAN, TRACY	02-0125-001	\$35.00
Allen, Lorene	01-0093-001	\$0.00	MARSHALL, KEVIN KATHRYN	02-0130-002	\$0.00
West, Patricia	01-0095-002	\$50.00	CORN, B F	02-0135-001	\$25.00

Name	Acct #	Dep 1 Amt			
Lavigne, Gerald	01-0097-001	\$0.00	SMITH, JAMIE/SAMANTHA	02-0140-004	\$50.00
Dromgoole, Sheryl	01-0099-002	\$0.00	HALL, DAN T	02-0155-001	\$50.00
SIMS, BEN	02-0160-003	\$50.00	SMITH, JAMES	02-0450-002	\$50.00
Korbol, Karen	02-0165-002	\$35.00	Sanders, Ross	02-0455-002	\$0.00
MARSHALL, KEVIN KATHRYN	02-0170-001	\$0.00	SESSIONS, KYLE	02-0460-001	\$25.00
FRANKLIN, MICHAEL	02-0175-001	\$50.00	MARSHALL, KEVIN KATHRYN	02-0465-001	\$50.00
WALTERS, HAROLD	02-0185-001	\$50.00	Hickey, Thomas*	02-0470-006	\$50.00
LOCKHART, RICHARD	02-0190-001	\$50.00	WRIGHT, AMY	02-0475-004	\$50.00
TEW, KELLIE	02-0200-001	\$0.00	LEMMERT, BEN/KRISTI	02-0480-002	\$50.00
Swope, Tracy	02-0211-001	\$50.00	SPEERLY, Robert	02-0485-001	\$0.00
HALL, ELAINE	02-0215-001	\$0.00	STONE, W C	02-0495-001	\$0.00
HARMON, GREG	02-0220-001	\$35.00	STRINGER, DEE	02-0500-001	\$0.00
HICKS, CONNIE	02-0250-001	\$0.00	WATERS, BETTY	02-0505-001	\$30.00
Hallonquist, Charles/Lind	02-0255-001	\$10.00	CORRIVEAU, GREG	02-0510-002	\$0.00
LUTTRELL, LOGAN/JULIE	02-0260-001	\$50.00	TOMLIN, S W	02-0515-001	\$10.00
HUNTER, MARK	02-0265-001	\$35.00	The Added Touch	02-0520-003	\$0.00
Davis, Donny/Mary	02-0268-001	\$0.00	MODISETTE, MITCH	02-0530-003	\$50.00
MCKINNEY, DANNY	02-0270-001	\$0.00	WESTBERRY, NICKY	02-0535-001	\$0.00
Stewart, Dennis	02-0275-001	\$0.00	Benson, Kelli	02-0545-004	\$50.00
GARZA, DONNA/EDDIE	02-0280-002	\$50.00	Setser, Brittany	02-0550-004	\$50.00
LEMMERT, DAN	02-0285-001	\$25.00	MT SYLVAN BAPTIST CHURCH	02-0559-002	\$0.00
Haas, Laura	02-0290-002	\$50.00	WINSLOW, FORREST	02-0560-001	\$0.00
Burdine, Harlen	02-0299-002	\$50.00	WOOD, JULIAN	02-0565-001	\$25.00
LOVING, CHARLES	02-0300-001	\$10.00	ZIMMERMAN J, EARL J	02-0570-001	\$0.00
FRANKLIN, SAMMY	02-0305-001	\$10.00	ZIMMERMAN L, EARL L	02-0575-001	\$10.00
MALONE, CURTIS	02-0310-001	\$10.00	WOOD JR., JULIAN	02-0580-001	\$50.00
Malone, Mike/Cheryl	02-0315-001	\$0.00	SMITH, TIM M	02-0585-001	\$35.00
BALUSEK, JANIS C	02-0320-001	\$35.00	HARDY, B J	02-0590-001	\$35.00
Middleton, Caleb	02-0325-002	\$0.00	JOHNSTON, WILLIAM/TINA	02-0595-001	\$50.00
PRIDE, RICHARD	02-0330-002	\$50.00	Goldwater, Sam	02-0605-002	\$0.00
COCHRAN, TRACY	02-0335-001	\$0.00	Mullins, Tommy	02-0610-001	\$35.00
CAMPBELL, MELINDA	02-0340-001	\$50.00	FLICKINGER, CORY	02-0615-001	\$50.00
MCKINNEY, CURTIS(LOLA)	02-0345-001	\$25.00	MARADIAGA, ILMER	02-0620-001	\$50.00
HEALEY, ALAN	02-0350-001	\$35.00	ROZELL, DARREN	02-0625-001	\$50.00
Messenger, Michael	02-0355-007	\$50.00	PATTON, ANTHONY D	02-0635-001	\$35.00
Mt Sylvan Comm Ctr	02-0360-001	\$0.00	SMITH, W. MITCHELL	02-0640-001	\$50.00
MT SYLVAN METHODIST	02-0365-001	\$25.00	SINGLER, SHANNON	02-0646-002	\$0.00
MT SYLVAN METHODIST	02-0370-001	\$0.00	CALDWELL, ROBBIE	02-0650-001	\$35.00
MT SYLVAN BAPTIST CHURCH	02-0375-001	\$0.00	Slaton, Marvin	02-0655-001	\$35.00
PARKER, ROGER	02-0380-001	\$0.00	Pritchard, Troy	02-0661-003	\$50.00
Thornton, Denise	02-0385-001	\$50.00	PERMENTER, BOBBY	02-0670-002	\$50.00
NIX, EDWIN GLEN	02-0390-001	\$0.00	Hurt, Larry	02-0675-001	\$35.00
Fuller, James	02-0395-001	\$0.00	CHATTERTON, GERALDINE	02-0685-001	\$35.00
MELVILLE, CHARLES	02-0400-002	\$0.00	Mt Sylvan Cemetery Assn	02-0690-001	\$0.00
PAYNE, DAVID	02-0410-001	\$35.00	Paschal, Roger	02-0695-004	\$50.00
HOLMES, TERRI	02-0415-002	\$50.00	STONE, W C	02-0705-001	\$0.00
Pinkerton, Glenda	02-0420-001	\$25.00	Rodriquez, Ashley	02-0710-002	\$50.00
Prieto, Joann	02-0425-001	\$0.00	Stanford, Stevan	02-0715-003	\$50.00

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Customer Deposits

<u>Name</u>	<u>Acct #</u>	<u>Dep 1 Amt</u>			
DOBBS, RAY	02-0430-001	\$10.00	BECKLEY, BOB/WILMA	02-0745-001	\$35.00
REEVES, RANDY	02-0435-001	\$25.00	CORN, CAROLYN	02-0765-001	\$35.00
RICE, CHARLES	02-0440-001	\$50.00	BAZIL, PAUL G	02-0770-001	\$50.00
MT SYLVAN BAPTIST CHURCH	02-0445-003	\$0.00	DOVE RIDGE HOA	02-0780-001	\$0.00
Cline, Anna	02-0800-003	\$50.00	TYRONE, JOSEPH	02-1155-003	\$50.00
GROOM, IRA	02-0815-001	\$0.00	Kiser, Mark	02-1160-003	\$50.00
Hester, Rhonda/Chuck	02-0820-001	\$0.00	WRIGHT, KYLE (email)cc	02-1170-006	\$50.00
Hester, Chuck/Rhonda	02-0825-001	\$0.00	McMullen, Kelly (email)	02-1175-003	\$50.00
SURRATT, STAN	02-0840-001	\$50.00	Fowler, Brad	02-1180-004	\$50.00
CLEARVIEW CHURCH OF CHRI	02-0850-001	\$0.00	Baetz, Michelle	02-1185-002	\$0.00
WALKER, TERRY	02-0855-001	\$50.00	Bergstrom, Patrick*	02-1200-001	\$50.00
Crawley, Bryan-mail	02-0860-001	\$0.00	HICKEY, DAVID/LUANN	02-1205-001	\$50.00
CHANDLER, LEAH	02-0865-002	\$50.00	Morris, Edward/Sheila	02-1210-003	\$50.00
MONSIVAIS, JORGE	02-0870-003	\$50.00	ELLIOTT, MARK/ZANA	02-1215-001	\$50.00
COOPER, LYNN	02-0880-001	\$50.00	BLACKBURN, ROBERT	02-1220-001	\$50.00
HAGAR, JOHN	02-0885-001	\$50.00	LEACH, BRIAN	02-1225-003	\$50.00
Astrillo, David	02-0900-002	\$50.00	ROCHA, SHELLEY	02-1230-002	\$50.00
Welch, Brooke	02-0905-002	\$50.00	WILKINS, JENNIFER	02-1240-002	\$50.00
WIGGINS, HANK	02-0910-001	\$50.00	Ingram, Donnie/Laura	02-1245-001	\$0.00
SUMNER, SHELLY	02-0915-001	\$50.00	Staton, Robin/Bonnie	02-1250-002	\$50.00
CALDWELL, APRIL	02-0920-003	\$50.00	Staton, Robin/Bonnie	02-1255-001	\$0.00
MALONE, DON	02-0925-001	\$50.00	Ingram, Donnie/Laura	02-1260-001	\$50.00
REEVES, WILLIAM R	02-0930-001	\$0.00	DAVIS, CHERYL	02-1265-001	\$50.00
Smith, Maxine	02-0935-001	\$50.00	Westberry, Tommy/Belinda	02-1270-001	\$50.00
HEFTON, DOROTHY	02-0940-002	\$0.00	DAVIS, MARY	02-1275-001	\$0.00
Rainwater, Vanessa	02-0945-001	\$0.00	WOOD, MICHAEL/LINDA	02-1285-001	\$0.00
Schultz, David	02-0950-001	\$50.00	WESTBERRY, JAMES/JO	02-1290-001	\$0.00
PAYNE, NATHAN	02-0955-001	\$50.00	Westberry, Jimmy/Wanda	02-1295-001	\$0.00
Mezzell, Sam	02-0956-001	\$0.50	Westberry, BL	02-1300-001	\$0.00
LEMMERT, CHES	02-0960-001	\$50.00	BLACKMON, DARLA	02-1305-002	\$50.00
BROOKS, ROBERT L	02-0965-001	\$50.00	McMullen, Delores	02-1320-001	\$0.00
HAZLETT, KIM	02-0975-002	\$50.00	McMullen, Anthony	02-1325-003	\$0.00
LEE, ANN/PHILIP	02-0980-001	\$50.00	Coleman, Roy #2	02-1330-003	\$0.00
BRISTOW, GARY	02-0985-004	\$50.00	Coleman, Roy #1	02-1335-001	\$0.00
VICKERY, JERRY	02-0990-002	\$0.00	PAINE, SANDY	02-1335-002	\$50.00
HARRIS, TRAVIS/KIM	02-0995-003	\$50.00	PACKARD, MIKE	02-1340-001	\$50.00
SLATER, ANDREW	02-1000-001	\$50.00	NORRIS, KEVIN	02-1345-001	\$50.00
JOHNSON, GARY L	02-1005-001	\$50.00	NORRIS, WILMA	02-1350-001	\$0.00
SPEERLY, KEITH	02-1020-001	\$50.00	STONE, TIM	02-1360-001	\$0.00
FRIZZELL, JAMES/JUANITA	02-1025-001	\$50.00	MCKINLEY, KENNETH (email)	02-1365-001	\$0.00
BROWN, BOBBY	02-1030-001	\$50.00	Boyack, James	02-1370-001	\$50.00
Rankin, Andrew/Shelly	02-1040-002	\$50.00	Havens, Bonnie	02-1375-003	\$50.00
PAULL, SHERRY	02-1045-001	\$0.00	COLE, RONALD	02-1380-002	\$0.00
BEELER, JERRY	02-1050-001	\$50.00	HOLMES, TERRY	02-1385-001	\$50.00
GRAHAM, RICHARD/DEBORAH	02-1060-001	\$50.00	WELLS, ANDREA	02-1390-001	\$50.00
FRENCH, RODNEY	02-1065-001	\$50.00	Breytspraak, Don (CC)	02-1395-002	\$50.00
RAND, TONY	02-1070-001	\$50.00	Hobbs, Shannon	02-1400-001	\$50.00
DANIEL, JOSIAH/SUSAN	02-1075-002	\$0.00	BAZIL, RITA	02-1405-001	\$0.00

<u>Name</u>	<u>Acct #</u>	<u>Dep 1 Amt</u>			
TURNER, CHARLOTTE	02-1080-001	\$50.00	Sims, Audra	02-1410-003	\$50.00
ROBERTS, WYNN	02-1085-001	\$0.00	MOORE, DAVID	02-1415-002	\$50.00
SANTANGELO, KELLY	02-1090-001	\$50.00	NOBLE, ED	02-1420-001	\$50.00
Goldwater, Sam	02-1100-001	\$0.00	BENGE, Jamie	02-1425-002	\$50.00
GAMBRELL, RICHARD	02-1125-001	\$50.00	Miller, Tammy	02-1430-001	\$0.00
Cloud, Dan	02-1130-003	\$50.00	BUSH, CURTIS	02-1500-001	\$50.00
Froebe, Charles	02-1510-001	\$50.00	YOUNGBLOOD, BOBBY	04-0025-001	\$0.00
Worrell, Dennis/Cheryl	02-1520-001	\$50.00	Cannon, Debbie	04-0030-001	\$0.00
WILLFORD, GEORGE/MARY	02-1600-001	\$0.00	WEATHERBURN, G	04-0035-003	\$0.00
HOLT , CLIFFORD	02-1610-001	\$50.00	KRAMER, STANLEY	04-0040-001	\$0.00
WARREN, ROCKY-email	02-1700-001	\$50.00	Kouba, Wes	04-0050-001	\$50.00
MAY, BEATRICE	02-1710-001	\$50.00	BURCH, AMORETTE	04-0050-004	\$50.00
MCLEOD, CHRIS	02-1750-001	\$50.00	JOHNSON, JEFF	04-0055-001	\$0.00
Thomas, Brett/Shirley	02-1765-001	\$50.00	CLEMONS, LARKIN	04-0060-001	\$0.00
BROWN, PEGGY	02-1800-001	\$50.00	HOLT, MICHAEL W./LINDA	04-0065-001	\$50.00
KINGDOM BUILDERS LOT 8	02-1805-001	\$50.00	SCOTT, PAM	04-0070-007	\$50.00
Mullinax, Eugene	02-1820-002	\$50.00	Logan, Michelle (email)	04-0075-004	\$0.00
Jones, Amber	02-1900-001	\$0.00	LIVELY, RICHARD/JAN	04-0085-002	\$50.00
Waters, Betty	02-3000-001	\$50.00	Tackett, Mary	04-0090-001	\$0.00
F6 Investments	02-4000-001	\$0.00	Edwards, Michael	04-0100-006	\$50.00
Kyker, Steve/Vickie	02-7000-001	\$50.00	Alexander, M/W (email)	04-0105-002	\$50.00
SHIRLEY, GARY	03-0005-001	\$50.00	MCPEEK, BOBBY	04-0110-001	\$50.00
Wilburn, Philip	03-0010-001	\$0.00	MCPEEK, BOBBY	04-0115-001	\$0.00
CROW, MICHAEL	03-0015-001	\$25.00	Langford, Doug/Cheryl	04-0120-001	\$50.00
TILL, TAMMY	03-0020-002	\$50.00	GAGE, WILLIS	04-0140-001	\$0.00
Southwell, Kenny/Sandra	03-0025-001	\$50.00	Wigg, Donna	04-0145-002	\$50.00
MARTIN, MISTY	03-0030-002	\$50.00	BROWN, CHRIS	04-0150-006	\$50.00
HALE, ROSS	03-0035-001	\$0.00	McLendon, Clifton/Marlene	04-0155-003	\$50.00
vacant	03-0040-003	\$0.00	HART, SEAN/DENISE	04-0160-001	\$50.00
HARRIS, ROY	03-0045-001	\$25.00	Stanfield, Kevin	04-0175-001	\$0.00
JACKSON, LILLIAN D	03-0050-001	\$0.00	HOBGOOD, KATHY	04-0185-001	\$50.00
JOHNSON, KENNETH	03-0055-001	\$0.00	BARNES, TONY	04-0190-002	\$50.00
MEDLIN, CHRIS	03-0060-002	\$50.00	BARNES, TONY	04-0195-001	\$0.00
HILL, MIRIAM	03-0065-001	\$35.00	BARNES, CLIFFORD	04-0200-001	\$0.00
Godsy, Brittany	03-0070-002	\$50.00	SEAHORN, DARRELL	04-0205-001	\$50.00
vacant	03-0080-008	\$0.00	MARION	04-0210-004	\$50.00
Rucker, Micah/Jennifer	03-0085-003	\$0.50	BETTERTON, SARAH	04-0220-001	\$50.00
ALEXANDER, LYNN	03-0090-001	\$0.00	BURGESS, SARAH	04-0225-001	\$50.00
HELPENSTILL, ROY/LINDA	03-0100-002	\$0.00	SMITHERMAN, SONJA	04-0230-001	\$50.00
Harvey, Marjorie	03-0105-001	\$50.00	FROST, STEPHEN	04-0235-001	\$50.00
JOBE, JOSEPH	03-0110-003	\$50.00	LANGFORD, MYRTIE	04-0240-001	\$35.00
STEVENS, TINA	03-0116-001	\$0.00	WILER, JOHNNY	04-0245-001	\$50.00
Wayne, Remona	03-0120-001	\$25.00	LANSDALE, ROBERT	04-0255-001	\$50.00
FENTON, JERRY	03-0125-001	\$50.00	MCPEEK, BOBBY-HOUSE	04-0275-001	\$50.00
WALLER, JAMES	03-0135-001	\$0.00	MASSOLETTI, BOBBY	04-0280-001	\$50.00
Nations, Gene	03-0140-001	\$35.00	Hall, Doris	04-0285-003	\$50.00
REINDERS, JERRY	03-0145-001	\$0.00	R & J Custom Homes	04-0290-001	\$0.00
Williams, Patsy	03-0150-001	\$25.00	SATTERWHITE, SAM	04-0295-001	\$50.00

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<u>Name</u>	<u>Acct #</u>	<u>Dep 1 Amt</u>			
YORK, JULIE	03-0155-006	\$50.00	IRWIN, JOHN	04-0305-001	\$50.00
FENNELL, LOUIS	03-0160-001	\$35.00	HEATH, GEORGE	04-0335-001	\$50.00
Harty, Jared	03-0170-001	\$50.00	Norwood, Judy	04-0340-002	\$50.00
Langford, Brandon/Misty	04-0001-001	\$50.00	TURNER, SARAH	04-0360-001	\$0.00
WHITE, KEN	04-0005-001	\$0.00	Mask, Terry	04-0365-003	\$0.00
Lewis, Jeff	04-0010-002	\$0.50	Dominguez, Myra-CC	04-0370-003	\$50.00
Langford, John	04-0015-001	\$50.00	BERRY, IVAN D	04-0380-001	\$0.00
GRIMES, RUTH	04-0020-001	\$0.00	JACKSON, JOHNNIE	04-0385-001	\$50.00
Hurd, Alice	04-0390-002	\$50.00	HURT, TRENT	05-0185-002	\$50.00
PARKER, NITA	04-0395-001	\$50.00	Horton, Windell	05-0190-001	\$50.00
KITCHENS, JERRY/BETTY	04-0400-001	\$50.00	Rosewood Baptist Church	05-0195-001	\$0.00
JACKSON, REBEL	04-0405-001	\$50.00	ALLEN, JOHN	05-0200-001	\$50.00
BAILEY, DAVID	04-0410-001	\$50.00	MILLER, GARRY	05-0205-001	\$0.00
Starnes, Bill	04-0415-001	\$50.00	Hurt, Danny/Laurie	05-0210-001	\$50.00
TRAYLOR, KURT	04-0425-001	\$50.00	REYNOLDS, WALTER	05-0220-002	\$50.00
JONES, BEN	04-0430-001	\$50.00	Pena, Emily	05-0225-002	\$50.00
Dunn, Donald	04-0435-002	\$50.00	JOHNSTON, ALLEN W	05-0240-006	\$0.00
Johnson, Matt	04-0440-001	\$50.00	STRACENER, LOUISE	05-0245-001	\$50.00
Adkinson, Ryon	04-0445-003	\$50.00	ETEX TELEPHONE COMPANY	05-0250-001	\$0.00
Skinner, Mark/Julie	04-0455-001	\$50.00	JACKSON, GARY	05-0255-001	\$50.00
McKnight, Nancy	04-0460-002	\$0.00	ALBRIGHT, BETTY	05-0260-001	\$50.00
SUSTAIRE, MARGE	04-0465-001	\$0.00	ALFORD, MATT	05-0265-002	\$50.00
LOW, MAX	04-0475-001	\$50.00	Uriega, Rochelle/Gabriel	05-0270-001	\$50.00
JONES, CHRIS	04-0500-001	\$50.00	Sanders, Heather	05-0275-002	\$0.00
Rosser, William	04-0501-001	\$50.00	BOUKNIGHT, STEVE	05-0280-001	\$50.00
Partain, Christopher/Tiff	04-0550-001	\$50.00	DUNAWAY, GENA	05-0285-001	\$50.00
BRASWELL, GERALDINE	04-0560-001	\$0.00	LAMB, TOMMY	05-0300-002	\$0.00
Burkhart, Dustin-email	04-1000-001	\$0.00	Jones, Terry/Angela	05-0305-001	\$50.00
Lange, Earnie	04-1600-001	\$50.00	SEAHORN, DONALD	05-0325-001	\$0.00
Turner, Roy	04-2000-002	\$0.00	SMITH, LARRY P	05-0345-001	\$0.00
Roberts, Matthew	05-0001-002	\$50.00	O'HARA, BEN/LINDA	05-0350-001	\$0.00
Tuel, Ronnie	05-0005-001	\$0.00	Jenkins, Anna	05-0355-005	\$0.00
MCCOOL, PALMOUR	05-0025-001	\$0.00	Harmony Methodist Church	05-0360-001	\$0.00
HOGAN, FLOYD	05-0035-001	\$50.00	Tipton, Judy	05-0365-001	\$50.00
O'Donald, William/Linda	05-0037-001	\$50.00	SETTLES, JACK	05-0370-001	\$0.00
SHARP, M.W	05-0040-001	\$50.00	Myska, Anita	05-0385-002	\$0.00
Lambert, Gerald/Judy	05-0045-001	\$0.00	Pena, Miriam	05-0390-006	\$0.00
Parker, Clint/Amanda	05-0050-002	\$0.00	Pena, Fernando	05-0395-010	\$50.00
VARNADO, DUSTIN	05-0050-003	\$50.00	Burnett, Cecil/Judy	05-0400-001	\$50.00
GIBSON, SHARON	05-0055-001	\$0.00	Tucker, Cindy/Matt-cell	05-0400-002	\$0.00
REED, DAVID	05-0065-001	\$50.00	MCWHORTER, EARL	05-0405-001	\$0.00
Wells, Donna	05-0080-003	\$0.00	James, Joseph	05-0410-007	\$50.00
CUELLAR, MARCELINA L	05-0085-001	\$50.00	Roots, Becky	05-0415-001	\$50.00
MILLER, DANNY	05-0090-001	\$50.00	Bedinghaus, Charles/Katie	05-0418-001	\$0.00
BULLARD, LELA	05-0095-001	\$50.00	FLOWERS, STEVEN	05-0435-006	\$50.00
ROSEWOOD VIDEO	05-0100-001	\$50.00	REEVES, DOUGLAS	05-0500-001	\$50.00
PORTER, CHARLES	05-0105-001	\$0.00	BURNETT, KEVIN/JILL	05-0505-001	\$50.00
GIBSON, RICKY	05-0115-001	\$0.00	Selvage, Kellie/Earl	05-0510-004	\$50.00

as of June 1, 2017

Texas Water Systems

Customer Deposits

Name	Acct #	Dep 1 Amt			
BERRY, BRUCE	05-0120-001	\$0.00	Drinning, Danny	05-0515-002	\$50.00
DUGGER, PETE	05-0135-001	\$50.00	SMITH, JOHN L	05-0520-001	\$50.00
White, Dawn	05-0140-001	\$50.00	Robertson, Margaret	05-0530-001	\$50.00
Bowers, Beverly	05-0145-001	\$50.00	JONES, TERRY/SHELLY	05-0535-002	\$50.00
MARTINEZ, CHRISTINA	05-0150-001	\$50.00	CROSS, SANDRA	05-0545-001	\$50.00
Besecke, Dawn	05-0155-002	\$0.00	SEAHORN, MICHAEL	05-0555-001	\$50.00
Garcia, Vefage	05-0165-006	\$0.00	BURNETT, COURTNEY	05-0565-002	\$50.00
HOWARD, TERRY	05-0170-001	\$0.00	SUTTON, SABRINA	05-0570-001	\$50.00
DUGGER, DOROTHY	05-0175-001	\$0.00	Johnson, Ashley (email)	05-0575-007	\$0.00
FLOWERS, CATHY	05-0180-001	\$0.00	HAMMOND, KANDIE	05-0580-001	\$50.00
WILKERSON, HEITH	05-0585-001	\$50.00	LANGFORD, MICHAEL	06-0005-001	\$50.00
BUNN, JOE	05-0590-002	\$0.00	KERLICK, BOB	06-0010-001	\$0.00
PAYNE, LINDA	05-0595-001	\$50.00	MURPHY, DANNY	06-0015-002	\$0.00
Scheid, Kenneith	05-0610-001	\$50.00	FRAZIER, TOMMY	06-0020-001	\$0.00
Wingfield, Dee	05-0620-003	\$0.00	Fisk, Stanley	06-0025-001	\$0.00
BUNN, JESSE	05-0625-001	\$50.00	HECTOR, LARRY	06-0030-001	\$0.00
Jones, Robi/Virginia	05-0640-002	\$50.00	Yale, Hope	06-0035-005	\$50.00
Goodrich, Kris	05-0645-003	\$50.00	CLARK, DEBBIE	06-0040-001	\$0.00
SEAHORN, MANDY	05-0650-003	\$50.00	Anderson, Shane/Amanda	06-0045-002	\$50.00
SEAHORN, JEREMY	05-0655-001	\$50.00	POOL, MICHAEL	06-0050-002	\$50.00
MAUK, BRIAN/MARY	05-0660-001	\$0.00	Moore, Michael	06-0055-001	\$0.00
HILL, NOVELINE	05-0665-001	\$0.00	MURPHY, DOUG	06-0060-001	\$0.00
Harrison, Rebecca	05-0670-003	\$50.00	Click, David (email)	06-0065-002	\$50.00
Caffey, Perry	05-0675-002	\$50.00	MYSKA, ANITA	06-0070-001	\$0.00
Goddard, Darren/April	05-0680-001	\$50.00	DODSON, JOHNNY	06-0075-001	\$0.00
Hogan, Slade	05-0685-004	\$50.00	SHREWSBURY, JAMES	06-0080-003	\$50.00
MILES, WARREN	05-0695-001	\$50.00	HARMONY VOL FIRE DEPT	06-0085-001	\$0.00
Bunn & Bradshaw	05-0700-001	\$0.00	DENTON, ROBERT	06-0095-001	\$0.00
Adams, Lorie	05-0700-002	\$50.00	OATES, WILLIAM	06-0105-001	\$0.00
Brosseau, Marie	05-0705-002	\$0.00	OATES, WILLIAM D	06-0110-001	\$0.00
WELLS, AMANDA	05-0710-001	\$50.00	Trimble, Chad	06-0115-007	\$50.00
NANCE, JEFF	05-0715-008	\$50.00	Texas Premier 3	06-0120-001	\$50.00
HYMER, RICHARD	05-0720-001	\$0.00	Texas Premier 2	06-0120-002	\$50.00
GODDARD, TOM	05-0725-001	\$0.00	Texas Premier 1	06-0120-003	\$0.00
Palacios, Casey	05-0730-007	\$50.00	JONES, HARLEY	06-0125-001	\$0.00
Redmond, Christi	05-0735-006	\$50.00	Jones, Ernie/Janice	06-0130-001	\$0.00
vacant	05-0740-006	\$0.00	BARTON, LARRY	06-0135-001	\$0.00
Shuler, William/Angela	05-0745-006	\$50.00	JOHNSON, PAUL	06-0140-001	\$0.00
Dozier, Leah	05-0750-007	\$0.00	BUCHANAN, MICKEY	06-0145-001	\$0.00
Young, Chris	05-0755-002	\$50.00	PHILLIPS, DANNY	06-0150-001	\$0.00
McCoy, Crystal	05-0765-005	\$50.00	HECTOR, JONATHAN	06-0155-001	\$50.00
Hurt, Larry D	05-0770-004	\$50.00	Adler, Barbara	06-0165-002	\$50.00
Palmer, Mike	05-0775-001	\$0.00	SEAHORN, GERALD	06-0170-001	\$50.00
DAILEY, LUELLA	05-0780-001	\$0.00	BARRICK, WAYNE	06-0175-002	\$50.00
BARBWIRE HALO COWBOY CH	05-0785-001	\$50.00	MOORE, JOAN	06-0190-001	\$0.00
Ricks, Donavan	05-0800-001	\$50.00	Howard, Wayne	06-0205-001	\$0.00
Denison, Kevin	05-0805-001	\$35.00	Holmes, Russel/Caroline	07-0001-001	\$0.00
HENSON, ROBERT	05-0810-001	\$50.00	LeFeber, Bethany	07-0002-001	\$50.00

as of June 1, 2017

Texas Water Systems

Customer Deposits

Name	Acct #	Dep 1 Amt			
Burgett, Tyler	05-0900-002	\$50.00	Carlson, Julie	07-0003-001	\$50.00
HURT, TRENT	05-0910-001	\$50.00	Howard, Kenneth	07-0004-001	\$0.00
Lopez	05-1000-003	\$0.00	MAGLIOLO, SALLY	07-0005-002	\$50.00
Gaspar, Donna	05-1100-001	\$0.50	Malone, Curtis	07-0006-001	\$50.00
Johnson, Paul S	05-1400-001	\$50.00	Wheeler, Jack	07-0007-001	\$50.00
Angenend, Donella	05-1601-002	\$0.00	Lyle, Brittany/Lance	07-0008-001	\$50.00
Davis, Bethany	05-1602-001	\$0.00	Schlentz,Patrick/Rhonda	07-0009-001	\$50.00
Bowman, Corey	05-1603-001	\$0.00	Slauson, Steve	07-0010-004	\$50.00
Strobe Properties	05-1604-001	\$0.00	Shotwell, Robert	07-0011-001	\$50.00
Salim, Muhammad	05-1605-002	\$0.00	Lilly, Lawrence/Lana	07-0012-001	\$50.00
Davis, Chad/Bethany	05-1606-002	\$50.00	Monk, Daniel/Madonna	07-0013-001	\$0.00
Payne, Donna	05-9000-003	\$0.00	Moore, Ronnie or Jana	07-0025-006	\$0.00
REYNOLDS, RODNEY	07-0030-003	\$50.00	Russell, Sam/Megan	07-0460-001	\$50.00
Moses, Jim/Kathy	07-0040-001	\$50.00	HARRIS, STEFANIE	07-0600-001	\$50.00
THOMAS, BILLY	07-0040-002	\$50.00	McCoy, Stephen/Amy	07-0650-001	\$50.00
SHELTON, RANDY	07-0045-001	\$0.00	Admire, David/Lindsey	07-0900-001	\$50.00
Tekell, Richard (cc)	07-0060-003	\$0.00	Noell, Ryan	07-1000-001	\$50.00
ORTIZ, GREG	07-0065-003	\$50.00	Metcalfe, Amy	07-1095-001	\$50.00
JOHNSON, VELMA/JAMES	07-0070-002	\$50.00	Delano, Douglas/Lynn	07-1200-002	\$0.00
OVERFIELD, KANE	07-0075-002	\$50.00	Brooks, Jay/Kelly	07-1400-001	\$50.00
Powles, Tom/Leticia	07-0105-002	\$50.00	PERMENTER, DENNIS	07-1800-001	\$50.00
Stewart, Ralph	07-0110-002	\$50.00	Scott, Kelly	07-1805-001	\$50.00
CRAM, DENNIS	07-0115-002	\$0.00	Davis, Debbie	07-1810-001	\$50.00
CORDRAY, ROGER S	07-0120-001	\$50.00	Felix, Tijmen	07-3000-001	\$50.00
Peterson, Erin	07-0122-001	\$50.00	McMurray, Mika	08-0001-001	\$50.00
HARRIS, RICHARD	07-0130-003	\$50.00	Emerson, Kris	08-0001-002	\$50.00
WASHINGTON, A	07-0135-002	\$50.00	Buck, Aaron (Sandy)	08-0002-001	\$50.00
SEWELL, TREY	07-0145-001	\$50.00	Chesser, Carl (hard-mail)	08-0002-002	\$50.00
COVINGTON, CATHY	07-0150-001	\$50.00	Latimer, William-email	08-0003-002	\$50.00
Cockrell, Steven	07-0155-003	\$50.00	Smith, Milton L	08-0004-001	\$50.00
STRONG, ROGER	07-0160-001	\$0.00	CHURCH OF G.V.	08-0005-003	\$50.00
Leal, Carrie	07-0165-003	\$50.00	Buck, Aaron/Amy	08-0006-001	\$50.00
Thompson, Ryan /Esmeralda	07-0180-003	\$0.00	Kendall, Taressa	08-0050-001	\$0.00
SMITH, ANN/TAMBI IDRIS	07-0185-007	\$50.00	Knight, Ronda	08-0055-002	\$50.00
Carlisle, Jim/Lisa (email	07-0200-001	\$50.00	JONES, GARY	08-0060-001	\$50.00
Voss, Jack	07-0200-003	\$50.00	HAVARD, EUGENE	08-0075-001	\$0.00
Plunk, Adam	07-0205-001	\$0.00	STAPLETON, DOUG	08-0080-001	\$0.00
McGee, Ashley	07-0215-001	\$50.00	Fortriede, David/Amy	08-0085-001	\$0.00
Angerer, Tammy/Doug	07-0220-002	\$50.00	Tekell, Richard (CC)	08-0090-002	\$50.00
ROBERTSON, ALTON E	07-0225-001	\$50.00	Garden Valley Property	08-0100-001	\$0.00
ALLEGRETTO, RICK	07-0230-001	\$50.00	DARINGTON, ANDREW(email)	08-0105-004	\$50.00
Hammond, John	07-0235-003	\$0.00	MODISETTE, TORI	08-0110-006	\$50.00
YARBROUGH, DAVID/JEANNE	07-0240-001	\$50.00	Everett, Chad/Danielle	08-0115-006	\$50.00
Hudson, Angela	07-0255-002	\$50.00	KING, JUDY	08-0135-001	\$0.00
AMMON, JOHN	07-0270-001	\$50.00	ASHMORE, AMANDA	08-0155-002	\$50.00
SLOAN, THOMAS	07-0290-001	\$50.00	TAYLOR, MARVIN/MARIAH	08-0160-004	\$50.00
Neville, Jeremy/Stefanie	07-0310-002	\$50.00	Lee (email), Jason	08-0170-002	\$0.00
Anderson, Mercedes/Lewis	07-0315-001	\$50.00	Crow, Ethan/Lauren	08-0190-001	\$0.00

as of June 1, 2017

Texas Water Systems

Customer Deposits

<u>Name</u>	<u>Acct #</u>	<u>Dep 1 Amt</u>			
Sims, Greg	07-0320-004	\$50.00	Prince, Debra	08-0210-001	\$50.00
LOLLAR, SHELLY	07-0330-001	\$50.00	Thorn, Gary	08-0400-001	\$50.00
KNAPP, LARRY/NELL	07-0340-002	\$50.00	Thorn, Gary	08-0410-001	\$50.00
GANDY, DOMONICK	07-0345-002	\$50.00	Miles, Ralph	08-0420-001	\$50.00
ARMSTRONG, SUSAN	07-0365-001	\$50.00	Miles, Raplh	08-0450-001	\$50.00
MILLAZZO, JOHN	07-0370-001	\$0.00	Hardin, Ken	08-0900-001	\$50.00
JARRELL, CLAY	07-0380-007	\$50.00	Herbison, John H	08-1000-001	\$50.00
Stallion Lake Ranch	07-0385-001	\$50.00	Roden, Billy-email/mail	08-1234-001	\$0.00
Jacobs, Johnny	07-0390-002	\$50.00	GARDEN VALLEY LAKE HOUSE	08-2000-004	\$0.00
CHANEY, STEVEN	07-0415-001	\$50.00	GARDEN VALLEY MAINT	08-2000-005	\$0.00
Potter, Travis	07-0420-001	\$50.00	GARDEN VALLEY UTILITY CO	08-2000-007	\$0.00
HARPER, LONI/SKYLER	07-0435-001	\$50.00	Harp, Curt/Terry *email	08-3000-001	\$50.00
MEYER, ANDREW T	07-0440-001	\$0.00	Havens, David/Leonna	08-5000-001	\$0.00
Patterson, Jori	07-0450-002	\$0.00	Nunez, Jose/America	09-0003-001	\$50.00
Hampton, Patricia	09-0005-001	\$50.00	Dang, Toan	09-0250-001	\$0.00
WILLAND INC.	09-0010-001	\$50.00	Fourman, Kevin	09-0255-001	\$0.00
Maglaris, Laura	09-0015-001	\$0.00	Garcia, Oscar/Rebeca	09-0260-001	\$50.00
Shelley, Kevin	09-0020-001	\$0.00	STEPHENS JR, S D	09-0265-001	\$50.00
Parr, Howard/Jennifer	09-0025-001	\$0.00	Anderson, Robert	09-0270-001	\$0.00
Solis, Celso	09-0030-003	\$50.00	Ruiz, Filiberto	09-0280-001	\$50.00
Solis, Gaudencia	09-0031-001	\$50.00	Solis, Hilario	09-0285-001	\$50.00
Story, Jill	09-0035-001	\$50.00	Hernandez, Alejandro	09-0295-002	\$0.00
Foreman, Linda	09-0040-001	\$0.00	Morgan, Lana	09-0310-001	\$50.00
M<cKenzie, Pam	09-0045-001	\$0.00	Cruz, Jose	09-0315-004	\$50.00
Smith, Jamie/Alex	09-0050-005	\$50.00	Solorzano, Mario/Elisa	09-0320-001	\$50.00
Norris, Harvey/Kayette	09-0055-001	\$0.00	Romero, Elfego (cc)	09-0325-001	\$50.00
Garcia, Romon	09-0060-002	\$50.00	Flores, Erica	09-0345-003	\$50.00
Ray, Keith	09-0065-001	\$0.00	Byrd, Mark	09-0350-001	\$50.00
Skelton, Ray	09-0070-001	\$0.00	Martinez, Ceser	09-0355-001	\$50.00
Lester, Mark	09-0075-003	\$0.00	Coombs, Jeff	09-0360-001	\$50.00
Nono, Robert	09-0080-001	\$0.00	Medrano, Evelio	09-0365-002	\$50.00
Dickson, Mitch	09-0085-001	\$0.00	Gonzales, Christian A	09-0370-001	\$50.00
Wehunt, Michael	09-0090-001	\$50.00	Dickenson, Glenda	09-0500-001	\$50.00
Timmons, Dorothy	09-0095-001	\$0.00	BARRINGER, BOBBY/JO	02-0205-001	\$50.00
Curtis, Robert	09-0100-001	\$0.00	Goldwater, Sam	02-0295-001	\$0.00
Wooley, Sara	09-0105-001	\$0.00	CANELLA, GIORGIO	02-0405-001	\$50.00
Smallwood, Walter	09-0110-001	\$0.00	WILLIS, LAMAR	02-0555-001	\$0.00
Ramos, Tino	09-0115-001	\$0.00	Schulte, Robert/Celeste	02-0680-002	\$50.00
Featherly, Darrell	09-0120-001	\$50.00	PATRICK, GLEN/DENISE	02-0750-001	\$50.00
REINECKER, LESLIE	09-0125-006	\$50.00	SITTON, STEPHEN	02-0805-001	\$50.00
Coombs, Jeff	09-0130-001	\$0.00	MT SYLVAN BAPTIST CHURCH	02-0890-001	\$0.00
Collins, Randal	09-0135-001	\$0.00	Holland, Susan	02-0895-001	\$50.00
RICHARDSON, LEROY	09-0140-001	\$0.00	LICATOVICH, DONALD J	02-0970-001	\$0.00
Phillips, Kim	09-0145-001	\$0.00	MCMULLEN, BEN	02-1010-001	\$0.00
Reese, Leroy	09-0150-001	\$0.00	DODGEN, CHERYL	02-1095-001	\$50.00
AGUILAR-SANCHEZ, DAVID	09-0155-002	\$50.00	THOMPSON, JOE B/STARLA	02-1115-001	\$0.00
WASHINGTON, JAMIE	09-0160-001	\$50.00	GROVES, GARTH	02-1135-001	\$50.00
HARRIS, JANIS JONES	09-0165-002	\$50.00	Dodd, R Marie Ault/Charle	02-1145-003	\$50.00

as of June 1, 2017

Texas Water Systems

Customer Deposits

<u>Name</u>	<u>Acct #</u>	<u>Dep 1 Amt</u>			
Walker, Joey	09-0170-001	\$0.00	VICTORY TREE FARM	02-1195-001	\$50.00
Dixon, David/Cindy	09-0175-001	\$0.00	MOORE, ANGELA	02-1310-003	\$50.00
COX, J	09-0180-001	\$0.00	Britton, Shannon	04-0350-002	\$0.00
Pryor, Felicia	09-0185-002	\$50.00	HURT, KOLLIN	04-0355-001	\$0.00
Vega, Daniel	09-0190-002	\$50.00	Johnson, Dennis/Vicki	05-0635-001	\$50.00
STEED, BRETT	09-0195-002	\$50.00	Mitchell, Ted/Nicole	07-0015-002	\$0.00
Velozy, Jaime	09-0200-002	\$50.00	Pinzino, Charles (email)	07-0035-001	\$50.00
Jaynes, Jesse	09-0205-002	\$50.00	ELLIS, ANNE	07-0095-002	\$50.00
ROMERO, ISMAEL	09-0210-001	\$0.00	SMITH, AMY	07-0125-001	\$0.00
JACKSON, E E	09-0215-001	\$0.00	Williamson	07-0140-002	\$0.00
ROSEBOROUGH, DAVE	09-0220-001	\$0.00	SULSER, JIM	07-0190-001	\$50.00
AVILA, ANTONIO	09-0225-001	\$0.00	Juricek, Darel	07-0195-002	\$50.00
Partain, Angela	09-0230-001	\$0.00	STAPLETON, RICHARD	07-0210-001	\$50.00
Gomez, David	09-0235-001	\$0.00	York, Terry	07-0260-001	\$0.00
Messer, Ken/Rosemary	09-0240-001	\$0.00	LEBLANC, JERRY/RAQUEL	07-0265-001	\$50.00
Richardson, Clint	09-0245-001	\$50.00	TAYLOR, LEIGH ANN	07-0275-002	\$50.00
SLOAN, THOMAS	07-0285-001	\$50.00	LOPEZ, MARILU	10-0070-001	\$25.00
Sartain, Barry	07-0295-001	\$50.00	Robinson, Lewis	10-0075-001	\$25.00
TURNER, AMANDA	07-0335-007	\$50.00	HIGGINBOTHAM, STANLEY	10-0080-001	\$25.00
Johnson, Stephen	07-0360-001	\$50.00	WHITAKER, STEVE	10-0090-001	\$25.00
WHITFIELD, JAMES	07-0375-001	\$50.00	MALDONADO, LAURIE	10-0095-001	\$25.00
O'Donnell, John/Sheila	07-0395-002	\$0.00	Maldonado, Heather	10-0105-002	\$0.00
LUCAS, EDWARD/A	07-0400-001	\$50.00	HART, JENNIFER	10-0110-001	\$0.00
Gibson, James	07-0425-002	\$50.00	WHISENHUNT, SHARON	10-0115-003	\$25.00
Holden, Chet	07-0430-001	\$50.00	BROOKSHIRE, HENRY	10-0120-001	\$0.00
Morphis, Sandy	08-0065-002	\$50.00	Walls, Carrie	10-0125-001	\$25.00
JACKSON, JOHN	08-0070-001	\$0.00	APPLEGATE, RUTHIE	10-0130-001	\$25.00
Shirey, Robert/Cheryl	08-0095-001	\$0.00	MARTIN, SAM	10-0135-001	\$25.00
SCOTT, ANNA/HOWARD	08-0125-003	\$50.00	Lewis, Josh	10-0140-001	\$25.00
OSBORN, HAROLD	08-0140-001	\$0.00	CHRISWELL, FENTINI	10-0145-002	\$25.00
Yandall, Kevin	08-0200-001	\$50.00	Atchison, Jim	10-0150-001	\$25.00
Garden Valley	08-2000-001	\$0.00	Martinez, Maria	10-0155-001	\$25.00
Davis, Ken	02-0810-001	\$50.00	Thompson, Natalie	10-0160-001	\$25.00
GILMER COUNTRY CLUB	03-0165-001	\$35.00	MARTINEZ, MARIA	10-0165-001	\$25.00
Wiler, Johnny	04-0450-001	\$0.00	Moore, Gabriell	10-0170-003	\$25.00
Stallion Lake PRP	07-0020-001	\$50.00	Cundiff, Kiya	10-0175-002	\$25.00
Tekell, Richard (CC)	07-0060-002	\$50.00	Kinnomen, Brent/Tina	10-0180-003	\$25.00
KOLOGEY, SUANN	07-0090-001	\$50.00	Underwood, Carl	10-0182-001	\$10.00
BARNETT, JOHN M	07-0100-002	\$50.00	Skinner, Rachael	10-0195-002	\$0.00
ACKER, LEONARD	07-0170-001	\$50.00	SIDDERS, ALICE L	10-0200-001	\$25.00
Truitt, Norman	07-0245-002	\$100.00	BROOKSHIRE, MARK	10-0205-001	\$0.00
SELF, SIDNEY/STEPHANIE	07-0280-001	\$50.00	PEPPER, DEE	10-0220-001	\$25.00
Willow Branch RV Park	07-0350-001	\$0.00	Henry Brookshire	10-0225-004	\$25.00
KNIGHT, CHARLES	07-0410-001	\$50.00	BONNETTE, TONY	10-0230-001	\$25.00
CHURCH OF G.V. (RV CENTER	08-0175-001	\$50.00	Hammerbacher, Russell	10-0235-002	\$25.00
GARDEN VALLEY DOCKSIDE	08-2000-003	\$0.00	TRINIDAD, FRANCISCO	10-0240-001	\$25.00
GARDEN VALLEY ASSN	08-2000-008	\$0.00	PATE, DAVID	10-0250-001	\$25.00
BRUNSON, KATHY	02-1190-001	\$50.00	COBURN, TRENT	10-0255-001	\$25.00

Director Report 9-17

Director Report 11-17

Service Lloyd

Director Report 10-17

Director Report 12-17

United Fire

Appendix D

2016 Corporate Return
prepared for:

TWS Holdings, Inc.
7891 Hwy 271
Tyler, TX 75708-4002

SQUYRES JOHNSON SQUYRES & CO. LLP
821 ESE LOOP 323 STE 100
TYLER, TX 75701

Form 1120

Department of the Treasury
Internal Revenue Service

U.S. Corporation Income Tax Return

For calendar year 2016 or tax year beginning 2016, ending 2016

OMB No. 1545-0123

2016

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

A Check if:

- 1 a Consolidated return (attach Form 851) ☒ **TYPE OR PRINT**
- b Life/nonlife consolidated return ☐
- 2 Personal holding co. (attach Sch. PH) ☐
- 3 Personal service corp. (see instrs) ☐
- 4 Schedule M-3 attached ☐

TWS HOLDINGS, INC.
7891 HWY 271
TYLER, TX 75708-4002

B Employer identification number

20-5297845

C Date incorporated

7/27/2006

D Total assets (see instructions)

\$ 1,249,070.

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

INCOME	1 a Gross receipts or sales	1 a	1,385,890.
	b Returns and allowances	1 b	
	c Balance. Subtract line 1b from line 1a	1 c	1,385,890.
	2 Cost of goods sold (attach Form 1125-A)	2	579,192.
	3 Gross profit. Subtract line 2 from line 1c	3	806,698.
	4 Dividends (Schedule C, line 19)	4	
	5 Interest	5	
	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	
10 Other income (see instructions — attach statement)	10		
11 Total income. Add lines 3 through 10	11	806,698.	
DEDUCTIONS SEE INSTRUCTIONS	12 Compensation of officers (see instructions — attach Form 1125-E)	12	
	13 Salaries and wages (less employment credits)	13	333,323.
	14 Repairs and maintenance	14	83,281.
	15 Bad debts	15	42,980.
	16 Rents	16	
	17 Taxes and licenses	17	9,146.
	18 Interest	18	48,468.
	19 Charitable contributions	19	0.
	20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20	1,302.
	21 Depletion	21	
	22 Advertising	22	5,122.
	23 Pension, profit-sharing, etc., plans	23	
	24 Employee benefit programs	24	
	25 Domestic production activities deduction (attach Form 8903)	25	
	26 Other deductions (attach statement) SEE STATEMENT 1	26	283,076.
	27 Total deductions. Add lines 12 through 26	27	806,698.
	28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11	28	0.
29 a Net operating loss deduction (see instructions)	29 a		
b Special deductions (Schedule C, line 20)	29 b		
c Add lines 29a and 29b	29 c		
TAXES 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	6,000.
	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	
	35 Overpayment. If line 32 is larger than the total of lines 31 and 33, enter amount overpaid	35	6,000.
	36 Enter amount from line 35 you want Credited to 2017 estimated tax 6,000. Refunded <input type="checkbox"/>	36	0.

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

Title

May the IRS discuss this return with the preparer shown below? See instructions.

☒ Yes ☐ No

Paid Preparer Use Only

Print/type preparer's name

CHARLES WAYNE BARTON

Preparer's signature

Date

Check

self-employed

if PTIN

P00187425

Firm's name

SOUYRES, JOHNSON, SOUYRES & CO., LLP

Firm's EIN

75-0699590

Firm's address

706 HIGHWAY 110 SOUTH

Phone no.

(903) 597-2021

WHITEHOUSE, TX 75791

Schedule C Dividends and Special Deductions
(see instructions)

	(a) Dividends received	(b) Percentage	(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. See instructions for limitation			
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 line 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 line 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)). See instructions	<input type="checkbox"/>	
2	Income tax. Check if a qualified personal service corporation. See instructions	<input type="checkbox"/>	0.
3	Alternative minimum tax (attach Form 4626)		
4	Add lines 2 and 3		0.
5a	Foreign tax credit (attach Form 1118)		
5b	Credit from Form 8834 (see instructions)		
5c	General business credit (attach Form 3800)		
5d	Credit for prior year minimum tax (attach Form 8827)		
5e	Bond credits from Form 8912		
6	Total credits. Add lines 5a through 5e		6
7	Subtract line 6 from line 4		-7
8	Personal holding company tax (attach Schedule PH (Form 1120))		8
9a	Recapture of investment credit (attach Form 4255)		
9b	Recapture of low-income housing credit (attach Form 8611)		
9c	Interest due under the look-back method— completed long-term contracts (attach Form 8697)		
9d	Interest due under the look-back method— income forecast method (attach Form 8866)		
9e	Alternative tax on qualifying shipping activities (attach Form 8902)		
9f	Other (see instructions— attach statement)		
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	2015 overpayment credited to 2016	12	6,000.
13	2016 estimated tax payments	13	
14	2016 refund applied for on Form 4466	14	
15	Combine lines 12, 13, and 14	15	6,000.
16	Tax deposited with Form 7004	16	
17	Withholding (see instructions)	17	
18	Total payments. Add lines 15, 16 and 17	18	6,000.
19	Refundable credits from:		
19a	Form 2439		
19b	Form 4136		
19c	Form 8827, line 8c		
19d	Other (attach statement— see instructions)		
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	6,000.

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>551112</u>		
b	Business activity <u>MANAGEMENT</u>		
c	Product or service <u>MANAGEMENT</u>		
3	Is the corporation a subsidiary in an affiliated group or a parent-subsidiary 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 from page 3)

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.
- If 'Yes,' complete (i) through (iv) below.

Yes	No
	X

(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.
- If 'Yes,' complete (i) through (iv) below.

Yes	No
	X

(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
- If 'Yes,' file Form 5452, Corporate Report of Nondividend Distributions.

Yes	No
	X

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?
- For rules of attribution, see section 318. If 'Yes,' enter:

Yes	No
	X

- (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 ☐
- 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 ▶ \$ _____ NONE

- 10 Enter the number of shareholders at the end of the tax year (if 100 or fewer) ▶ 2

- 11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here ☐
- 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 won't be valid.

- 12 Enter the available NOL carryover from prior tax years (don't reduce it by any deduction on line 29a) ▶ \$ _____ NONE

- 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?

Yes	No
	X

If 'Yes,' the corporation isn't 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.
- If 'Yes,' complete and attach Schedule UTP.

Yes	No
	X

- 15 a Did the corporation make any payments in 2016 that would require it to file Form(s) 1099?
- b If 'Yes,' did or will the corporation file required Forms 1099?

Yes	No
X	
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?

Yes	No
	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?

Yes	No
	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?

Yes	No
	X

- 19 During the corporation's tax year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code?

Yes	No
	X

Schedule L Balance Sheets per Books

	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		6,945.		5,943.
2a Trade notes and accounts receivable	75,790.		144,255.	
b Less allowance for bad debts		75,790.		144,255.
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities (see instructions)				
6 Other current assets (attach statement) SEE ST. 2		564,677.		593,063.
7 Loans to shareholders				
8 Mortgage and real estate loans				
9 Other investments (attach statement)				
10a Buildings and other depreciable assets	1,527,238.		1,557,136.	
b Less accumulated depreciation	1,174,941.	-352,297.	1,202,182.	354,954.
11a Depletable assets				
b Less accumulated depletion				
12 Land (net of any amortization)		26,977.		26,977.
13a Intangible assets (amortizable only)	69,381.		69,381.	
b Less accumulated amortization	29,679.	39,702.	34,305.	35,076.
14 Other assets (attach statement) SEE ST. 3		88,803.		88,802.
15 Total assets		1,155,191.		1,249,070.
Liabilities and Shareholders' Equity				
16 Accounts payable		71,405.		149,480.
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (attach stmt) SEE ST. 4		70,066.		182,933.
19 Loans from shareholders				
20 Mortgages, notes, bonds payable in 1 year or more		651,098.		601,768.
21 Other liabilities (attach statement)				
22 Capital stock: a Preferred stock				
b Common stock				
23 Additional paid-in capital				
24 Retained earnings — Approp (att stmt)				
25 Retained earnings — Unappropriated		362,622.		314,889.
26 Adjmt to shareholders' equity (att stmt)				
27 Less cost of treasury stock				
28 Total liabilities and shareholders' equity		1,155,191.		1,249,070.

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	-47,733.	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):			
5 Expenses recorded on books this year not deducted on this return (itemize):		8 Deductions on this return not charged against book income this year (itemize):	
a Depreciation	\$ 43,723.	a Depreciation	\$
b Charitable contributions	\$ 2,697.	b Charitable contribns	\$
c Travel & entertainment	\$		
STATEMENT 5	1,313.		
	47,733.	9 Add lines 7 and 8	0.
6 Add lines 1 through 5	0.	10 Income (page 1, line 28) — line 6 less line 9	0.

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

1 Balance at beginning of year	362,622.	5 Distributions	a Cash	
2 Net income (loss) per books	-47,733.	b Stock	c Property	
3 Other increases (itemize):		6 Other decreases (itemize):		
		7 Add lines 5 and 6		
4 Add lines 1, 2, and 3	314,889.	8 Balance at end of year (line 4 less line 7)		314,889.

AMT SMALL CORPORATION EXEMPTION

Form **4626****Alternative Minimum Tax – Corporations**

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service► Attach to the corporation's tax return.
► Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.**2016**Name **TWS HOLDINGS, INC.** Employer identification number **20-5297845****Note:** See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e).

1	Taxable income or (loss) before net operating loss deduction	1	
2	Adjustments and preferences:		
a	Depreciation of post-1986 property	2a	
b	Amortization of certified pollution control facilities	2b	
c	Amortization of mining exploration and development costs	2c	
d	Amortization of circulation expenditures (personal holding companies only)	2d	
e	Adjusted gain or loss	2e	
f	Long-term contracts	2f	
g	Merchant marine capital construction funds	2g	
h	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)	2h	
i	Tax shelter farm activities (personal service corporations only)	2i	
j	Passive activities (closely held corporations and personal service corporations only)	2j	
k	Loss limitations	2k	
l	Depletion	2l	
m	Tax-exempt interest income from specified private activity bonds	2m	
n	Intangible drilling costs	2n	
o	Other adjustments and preferences	2o	
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 2o	3	
4	Adjusted current earnings (ACE) adjustment:		
a	ACE from line 10 of the ACE worksheet in the instructions	4a	
b	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a negative amount. See instructions	4b	
c	Multiply line 4b by 75% (0.75). Enter the result as a positive amount	4c	
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. See instructions. Note: You must enter an amount on line 4d (even if line 4b is positive)	4d	
e	ACE adjustment.		
	• If line 4b is zero or more, enter the amount from line 4c	4e	
	• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount		
5	Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT	5	
6	Alternative tax net operating loss deduction. See instructions	6	
7	Alternative minimum taxable income Subtract line 6 from line 5. If the corporation held a residual interest in a REMIC, see instructions	7	
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c):		
a	Subtract \$150,000 from line 7 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0-	8a	
b	Multiply line 8a by 25% (0.25)	8b	
c	Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0-	8c	
9	Subtract line 8c from line 7. If zero or less, enter -0-	9	
10	Multiply line 9 by 20% (0.20)	10	
11	Alternative minimum tax foreign tax credit (AMTFTC). See instructions	11	
12	Tentative minimum tax. Subtract line 11 from line 10	12	
13	Regular tax liability before applying all credits except the foreign tax credit	13	
14	Alternative minimum tax Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	14	

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 4626 (2016)

Form **1125-A**

(Rev October 2016)

Department of the Treasury
Internal Revenue Service**Cost of Goods Sold**

► Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.
► Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

OMB No. 1545-0123

Name TWS HOLDINGS, INC.		Employer identification number 20-5297845	
1	Inventory at beginning of year	1	
2	Purchases	2	117,865.
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule) SEE STATEMENT 6	5	461,327.
6	Total. Add lines 1 through 5.	6	579,192.
7	Inventory at end of year	7	
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	579,192.
9 a Check all methods used for valuing closing inventory:			
(i) <input checked="" type="checkbox"/> Cost			
(ii) <input type="checkbox"/> Lower of cost or market			
(iii) <input type="checkbox"/> Other (Specify method used and attach explanation)			
b Check if there was a writedown of subnormal goods <input type="checkbox"/>			
c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) <input type="checkbox"/>			
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 entity? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If 'Yes,' attach explanation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

BAA For Paperwork Reduction Act Notice, see instructions.

Form 1125-A (Rev 10-2016)

SCHEDULE G
(Form 1120)

(Rev December 2011)

Department of the Treasury
Internal Revenue Service**Information on Certain Persons Owning the
Corporation's Voting Stock**

▶ Attach to Form 1120.

▶ See instructions.

OMB No. 1545-0123

Name

TWS HOLDINGS, INC.

Employer identification number (EIN)

20-5297845

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

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
JAMES K. BROWN	457-19-4981	UNITED STATES	50.00%
HUDSON WHITE	466-82-6597	UNITED STATES	50.00%

Form **851**

(Rev October 2016)

Department of the Treasury
Internal Revenue Service**Affiliations Schedule**

For tax year ending 12/31, 2016

► File with each consolidated income tax return.

OMB No 1545-0123

► Information about Form 851 and its instructions is at www.irs.gov/form851.

Name of common parent corporation

TWS HOLDINGS, INC.

Employer identification number

20-5297845

Number, street, and room or suite number. If a P.O. box, see instructions.

7891 HWY 271

City or town

State

ZIP Code

TYLER, TX 75708-4002

Part I Overpayment Credits, Estimated Tax Payments, and Tax Deposits (see instructions)

Corp No.	Name and address of corporation	Employer identification number	Portion of overpayment credits and estimated tax payments	Portion of tax deposited with Form 7004
1	Common parent corporation		6,000.	
	Subsidiary corporations:			
2	TWS MANAGEMENT INC 7891 HWY 271, TYLER, TX 75708	20-5297919		
3	TWS UTILITIES, INC. 7891 HWY 271, TYLER, TX 75708	75-2253588		
4				
5				
6				
7				
8				
9				
10				
Totals (Must equal amounts shown on the consolidated tax return).....			6,000.	

Part II Principal Business Activity, Voting Stock Information, Etc (see instructions)

Corp No.	Principal business activity (PBA)	PBA Code Number	Did the subsidiary make any nondividend distributions?		Stock holdings at beginning of year			
			Yes	No	Number of shares	Percentage of voting power	Percentage of value	Owned by corporation number
1	Common parent corporation MANAGEMENT	551112						
	Subsidiary corporations:							
2	UTILITY SYSTEM MGMT & MAINT	221300		X		%	%	1
3	WATER UTILITY SYSTEM	221300		X		%	%	1
4						%	%	
5						%	%	
6						%	%	
7						%	%	
8						%	%	
9						%	%	
10						%	%	

BAA For Paperwork Reduction Act Notice, see instructions.

Form 851 (Rev 10-2016)

Part III Changes in Stock Holdings During the Tax Year

Corp No.	Name of corporation	Shareholder of Corporation No.	Date of transaction	(a) Changes		(b) Shares held after changes described in column (a)	
				Number of shares acquired	Number of shares disposed of	Percentage of voting power	Percentage of value
						%	%
						%	%
						%	%
						%	%
						%	%
						%	%
						%	%
						%	%

- (c) If any transaction listed above caused a transfer of a share of subsidiary stock (defined to include dispositions and deconsolidations), did the share's basis exceed its value at the time of the transfer? See instructions ☐ Yes ☒ No
- (d) Did any share of subsidiary stock become worthless within the meaning of section 165 (taking into account the provisions of Regulations section 1.1502-80(c)) during the taxable year? See instrs. ☐ Yes ☒ No
- (e) If the equitable owners of any capital stock shown above were other than the holders of record, provide details of the changes.

- (f) If additional stock was issued, or if any stock was retired during the year, list the dates and amounts of these transactions.

Part IV Additional Stock Information (see instructions)

- 1 During the tax year, did the corporation have more than one class of stock outstanding? ☐ Yes ☒ No
If 'Yes', enter the name of the corporation and list and describe each class of stock.

Corp No.	Name of corporation	Class of stock

- 2 During the tax year, was there any member of the consolidated group that reaffiliated within 60 months of disaffiliation? ☐ Yes ☒ No
If 'Yes', enter the name of the corporation(s) and explain the circumstances.

Corp No.	Name of corporation	Explanation

- 3 During the tax year, was there any arrangement in existence by which one or more persons that were not members of the affiliated group could acquire any stock, or acquire any voting power without acquiring stock, in the corporation, other than a de minimis amount, from the corporation or another member of the affiliated group? ☐ Yes ☒ No
If 'Yes', enter the name of the corporation and see the instructions for the percentages to enter in columns (a), (b), and (c).

Corp No.	Name of corporation	(a) Percentage of value	(b) Percentage of outstanding voting stock	(c) Percentage of voting power
		%	%	%
		%	%	%
		%	%	%
		%	%	%

- Corp No. (d) Provide a description of any arrangement.

BAA

Form 851 (Rev 10-2016)

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2016Department 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

TWS HOLDINGS, INC.

Business or activity to which this form relates

Identifying number

20-5297845**PART I - SUMMARY****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	145,675.
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,010,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
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	500,000.
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
SEE STATEMENT 7			66,129.
7	Listed property. Enter the amount from line 29	7	0.
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	66,129.
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	66,129.
10	Carryover of disallowed deduction from line 13 of your 2015 Form 4562	10	12,502.
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	22,406.
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	22,406.
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12	13	56,225.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property) (See instructions.)

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

Part III MACRS Depreciation (Don't include listed property) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	
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 2016 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
19 a 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	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System

20 a 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	
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 instructions	22	
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	

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2016

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

TWS HOLDINGS, INC.

Identifying number

20-5297845

Business or activity to which this form relates

FORM 1120

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 (see instructions)	3	2,010,000.
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 2015 Form 4562.	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11.	12	
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12.	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	741.
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	455.
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 2016 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
19 a 3-year property						
b 5-year property						
c 7-year property		741.	7	HY	200DB	106.
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	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	

Section C — Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System

20 a 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	
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 instructions.	22	1,302.
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	

BAA For Paperwork Reduction Act Notice, see separate instructions.

FDI20812L 01/24/17

Form 4562 (2016)

Form **4562****Depreciation and Amortization**
(Including Information on Listed Property)

OMB No. 1545-0172

2016Department 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

TWS HOLDINGS, INC.

Identifying number

20-5297845

Business or activity to which this form relates

FORM 1125-A (COST OF GOODS SOLD)

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 (see instructions)	3	2,010,000.
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 2015 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	22,406.
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	40,851.

Part III MACRS Depreciation (Don't include listed property) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	1,406.
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 2016 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
19 a 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	
i Nonresidential real property			39 yrs	MM	S/L	

Section C — Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System

20 a 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	13,158.
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 instructions	22	77,821.
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	

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.

OMB No. 1545-0184

2016Attachment
Sequence No. **27**

Name(s) shown on return

TWS HOLDINGS, INC.

Identifying number

20-5297845

- 1 Enter the gross proceeds from sales or exchanges reported to you for 2016 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 (see instructions)

2	(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)
	2001 FORD F450	12/31/05	12/31/16		14,586.	14,586.	0.
	2001 DODGE 3/4 TON PICKUP	11/29/06	12/31/16		12,918.	12,918.	0.

- 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

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.

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 didn't 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.

- 8 Nonrecaptured net section 1231 losses from prior years. See instructions. 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 (see instructions)

- 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
- 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

- 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:

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. 18a

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. 18b

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2016)

2016

FEDERAL STATEMENTS

PAGE 1

CLIENT 175670

TWS HOLDINGS, INC.

20-5297845

3/22/17

04:15PM

STATEMENT 1
FORM 1120, LINE 26
OTHER DEDUCTIONS

AMORTIZATION.....	\$	4,626.
AUTO AND TRUCK.....		1,739.
BENEVOLENCE.....		65.
BEREAVEMENT.....		500.
BONUS.....		3,500.
CAMP JOY TESTING.....		15.
CHEMICALS.....		11,305.
COMPUTER SOFTWARE.....		358.
CONTRACT LABOR.....		7,921.
CUSTOMER APPRECIATION.....		81.
DELIVERY AND FREIGHT.....		28.
DUES AND SUBSCRIPTIONS.....		790.
EMPLOYEE BENEFITS.....		2,966.
EMPLOYEE RELATIONS.....		212.
EMPLOYEE RELATIONS.....		92.
INSPECTIONS.....		450.
INSURANCE.....		45,541.
LAB FEES.....		7,042.
LATE FEES & BANK CHARGES.....		1,728.
LEAD & COPPER SAMPLES.....		630.
LEGAL AND PROFESSIONAL.....		11,456.
MANAGEMENT FEES.....		-41,101.
MILEAGE REIMBURSEMENT.....		447.
OFFICE EXPENSE.....		73,421.
PAYROLL EXPENSE OTHER.....		348.
PERSONAL VEHICLE USAGE.....		360.
ROAD BORE.....		9,748.
SUPPLIES.....		434.
TAXES - FUTA.....		575.
TAXES - FICA & MEDICARE.....		25,253.
TAXES - FRANCHISE.....		154.
TAXES - PROPERTY.....		50,769.
TAXES - SUTA.....		988.
TCEQ REGULATORY FEE.....		5,823.
TESTING.....		7,724.
UNIFORMS.....		906.
UTILITIES.....		43,742.
WATER SYSTEM FEE.....		2,008.
WORKERS COMP.....		432.
TOTAL	\$	283,076.

STATEMENT 2
FORM 1120, SCHEDULE L, LINE 6
OTHER CURRENT ASSETS

	BEGINNING	ENDING
A/R AMERITEX.....	\$ 32,297.	\$ 8,164.
A/R TEXAS PUMP.....	485,242.	535,746.
ADV TO TP&W - LITTLE HOPE TANKS.....	20,000.	20,000.
INVENTORY ASSET.....	0.	312.
N/R - HUDSON WHITE.....	0.	800.
RECEIVABLE - JAMES K BROWN.....	27,138.	27,138.
UNDEPOSITED FUNDS.....	0.	903.
TOTAL	\$ 564,677.	\$ 593,063.

2016

FEDERAL STATEMENTS

PAGE 2

CLIENT 175670

TWS HOLDINGS, INC.

20-5297845

3/22/17

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STATEMENT 3
FORM 1120, SCHEDULE L, LINE 14
OTHER ASSETS

	BEGINNING	ENDING
N/R JK BROWN - LINDALE STATE	\$ 3.	\$ 0.
ROUNDING	88,800.	88,800.
	0.	2.
TOTAL	\$ 88,803.	\$ 88,802.

STATEMENT 4
FORM 1120, SCHEDULE L, LINE 18
OTHER CURRENT LIABILITIES

	BEGINNING	ENDING
CHECKS IN EXCESS OF CASH	\$ 0.	\$ 18,684.
CUSTOMER DEPOSITS	42,199.	42,199.
FORD CREDIT #52630519	24,155.	0.
FORD EXPEDITION #53747972	0.	32,243.
JAMES BROWN 2015	0.	14,000.
JAMES BROWN 2016	0.	16,864.
PAYROLL TAX PAYABLE	0.	13,457.
SALES TAX PAYABLE	3,712.	8,503.
SUNTRUST BANK	0.	36,983.
TOTAL	\$ 70,066.	\$ 182,933.

STATEMENT 5
FORM 1120, SCHEDULE M-1, LINE 5
BOOK EXPENSES NOT DEDUCTED

PENALTIES	\$ 1,313.
TOTAL	\$ 1,313.

STATEMENT 6
FORM 1125-A, LINE 5
OTHER COST OF GOODS SOLD

CHEMICALS	\$ 1,120.
CONTRACT LABOR	67,815.
COST OF GOODS SOLD	14,174.
CUSTOMER RELATIONS	193.
DEPRECIATION	77,821.
EQUIPMENT REPAIR & MAINT	5,398.
LAB FEES	2,809.
MANAGEMENT FEES, CONTRACT	214,717.
OPERATING FEE BROOKSHIRES	15,000.
SHIPPING	455.
TOOLS & EQUIPMENT	887.
TRAINING	2,992.
TRANSPORTATION, FUEL, ETC	52,380.
UTILITIES	5,182.
WATER SYSTEM FEES	384.
TOTAL	\$ 461,327.

2016

FEDERAL STATEMENTS

PAGE 3

CLIENT 175670

TWS HOLDINGS, INC.

20-5297845

3/22/17

04:15PM

STATEMENT 7
FORM 4562, PART I
ELECTION TO EXPENSE CERTAIN TANGIBLE PROPERTY (SECTION 179)

DESCRIPTION OF PROPERTY	COST	ELECTED COST
METERS & FIXTURES - GV.....	3,665.	\$ 3,665.
METERS & FIXTURES - MT SY.....	1,400.	1,400.
METERS & FIXTURES - STALL.....	3,700.	3,700.
METERS & FIXTURES - ROSEW.....	3,739.	3,739.
METERS & FIXTURES - FRIEN.....	350.	350.
LINES- GARDEN VALLEY.....	18,884.	18,884.
LINES- MT SYLVAN.....	6,488.	6,488.
LINES - STALLION.....	1,186.	1,186.
LINES - ROSEWOOD.....	23,180.	23,180.
BOOSTER PUMP.....	3,537.	3,537.
	TOTAL	\$ 66,129.

2016

GENERAL ELECTIONS

PAGE 1

CLIENT 175670

TWS HOLDINGS, INC.

20-5297845

3/22/17

04:15PM

ELECTION TO DEPRECIATE MACRS PROPERTY UNDER THE STRAIGHT LINE METHOD

PURSUANT TO IRC SECTION 168(B) (3) (D), THE CORPORATION HEREBY ELECTS TO DEPRECIATE THE FOLLOWING PROPERTY PLACED IN SERVICE IN THE TAX YEAR ENDED 12/31/16 UNDER THE STRAIGHT LINE METHOD.

5 YEAR CLASS - VEHICLES

SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION

THE CORPORATION HEREBY MAKES THE DE MINIMIS SAFE HARBOR ELECTION UNDER REGULATION 1.263(A)-1(F).

TWS HOLDINGS, INC.
7891 HWY 271
TYLER, TX 75708-4002
20-5297845