efile GRAPHIC print Submission Date - 2023-07-31 DLN: 93493212014303 OMB No. 1545-0047 **Return of Organization Exempt From Income Tax** Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Inspection Treasury **∮**er√fee the 2021 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022 D Employer identification number Name of organization
WINDERMERE OAKS WATER SUPPLY CORP **B** Check if applicable: O Address change 74-2785317 O Name change Doing business as ☐ Initial return O Final return/terminated Number and street (or P.O. box if mail is not delivered to street address) 424 COVENTRY ROAD ∆mended return Application (830) 598-7511 Gending City or town, state or province, country, and ZIP or foreign postal code SPICEWOOD, TX 78669 G Gross receipts \$ 705,767 Name and address of principal officer: **H(a)** Is this a group return for RICH SCHAEFER ☐Yes ✓ No subordinates? **424 COVENTRY ROAD** Are all subordinates SPICEWOOD, TX ☐ Yes ☐No included? Tax-exempt status: □ 527 501(c)(3) 501(c) (12) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions. **H(c)** Group exemption number ▶ Website: WWW.WOWSC.ORG L Year of formation: 1975 M State of legal domicile: TX **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other lacktriangleSummary 1 Briefly describe the organization's mission or most significant activities: WATER SUPPLY CORPORATION Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 272 272 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2021 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 704,610 Program service revenue (Part VIII, line 2g) . 730.405 1,157 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 25 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 730.662 705.767 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 0 Benefits paid to or for members (Part IX, column (A), line 4) . 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,011 0 **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) **b**0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 704,408 816,909 708,419 816,909 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -111,142 Revenue less expenses. Subtract line 18 from line 12 . 22.243 Assets or d Balances Beginning of Current Year End of Year 1,836,806 1,721,913 20 Total assets (Part X. line 16) . 728,281 21 Total liabilities (Part X, line 26) . 732,032 Net assets or fund balances. Subtract line 21 from line 20 1.104.774 993.632 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2023-07-31 signature of officer Sign Here RICH SCHAEFER PRESIDENT Type or print name and title Date 2023-07-31 Preparer's signature Check if P01895227 Paid self-employed ► RAVEN A HERRON & COMPANY PC Firm's name Firm's EIN > 20-4021611 Preparer Firm's address ▶ PO BOX 4237 Use Only Phone no. (830) 598-5300 HORSESHOE BAY, TX 78657 🗸 Yes 🗌 No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2021) Cat. No. 11282Y

Form 990 (2021) Page 3 **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 2 No Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates No 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III . . . No 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, No the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 No Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Yes 11a **b** Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο 11b c Did the organization report an amount for investments—program related in Part X. line 13 that is 5% or more of its total No assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Nο **11d** e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Nο 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a No Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? . 14a No **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued 14b No Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to No or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions. Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 No Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a No

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Nο

20b

21

Par	t IV Checklist of Required Schedules (continued)						
			Yes	No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L,</i> Part I	25a					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b					
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No			
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L,Part III	27		No			
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes,"</i> complete Schedule L, Part IV	28a		No			
b	b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV						
_	A 35% controlled entity of one or more individuals and/or organizations described in line 39a or 39b2 If "Yes " complete	28b		No			
·	c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV						
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes</i> ," <i>complete Schedule M</i>	30		No			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		No			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No			
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No			
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		İ			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36					
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No			
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note All Form 990 filers are required to complete Schedule O						
Pa	Statements Regarding Other IRS Filings and Tax Compliance			_			
	Check if Schedule O contains a response or note to any line in this Part V						
	Enterthe number reported in her 2 of Ferry 1996 Ferry 9 March 1997 Ferry 1997		Yes	No			
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 8 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1.					

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4a	No
b	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders		
	Gross income from other sources. (Do not net amounts due or paid to other sources		
-	against amounts due or received from them.)		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	No
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17	

Form 990 (2021) Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο Yes 1a Enter the number of voting members of the governing body at the end of the tax year 272 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b 272 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 No Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 No of officers, directors or trustees, or key employees to a management company or other person? . 4 Nο Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . 5 No Did the organization become aware during the year of a significant diversion of the organization's assets? . 6 Yes Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Yes Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7h Yes Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Yes 8h Each committee with authority to act on behalf of the governing body? Yes Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο No 10a **10a** Did the organization have local chapters, branches, or affiliates? . If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the 11a Nο Describe on Schedule O the process, if any, used by the organization to review this Form 990. . 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Yes Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on 12c Yes Did the organization have a written whistleblower policy? . . . 13 No Did the organization have a written document retention and destruction policy? . 14 14 Nο Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a No 15h If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a No

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed

- Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 - ✓ Own website
 ☐ Another's website
 ☐ Upon request
 ☐ Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- State the name, address, and telephone number of the person who possesses the organization's books and records: ▶WINDERMERE OAKS WATER SUPPLY WINDERMERE OAKS WATER SUPPLY 424 COVENTRY ROAD 424 COVENTRY ROAD SPICEWOOD, TX 78669 (512) 573-0311

If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt

16b

Page 7 Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, Part VII and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. List all of the organization's current key employees, if any. See the instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor	any related or	ganizati	on co	omp	ensa	ated ar	ny c	urrent officer, direc	tor, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related	than o	ne b	ox, u n of tor/t	t che inles ficer	and a	son	compensation from the organization (W-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
	related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		(W-2/1099- MISC/1099-NEC)	related organizations
(1) RENE FRENCH SECRETARY/TR				х				0	0	0
(2) RICH SCHAEFER PRESIDENT	1.00			х				0	0	0
(3) DOROTHY TAYLOR VICE PRESIDE	1.00			х				0	0	0
										Form 990 (2021)

Pa	rt VII Section A. Officers, Direct	tors, Trustees	, Key I	Empl	oye	es,	and I	High	nest Coi	npensate	ed Employees	(con	tinued)	
	(A) Name and title	(B) Average hours per week (list any hours for related organizations	Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(E) Reportable compensatio from related organizations (2/1099- MISC/1099-NE	n d (W-	Estim amount comper from organizat	ated of other isation the tion and			
		below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	11130,1		7.155, 1033 112		organiz	
												-		
												+		
												+		
												+		
	Sub-Total				٠.		•							
	Total from continuation sheets to P Total (add lines 1b and 1c)			•	•	•	<u>*</u>							
2	Total number of individuals (including reportable compensation from the org	but not limited				ove		recei	ived more	e than \$10	0,000 of			
													Yes	No
3	Did the organization list any former of line 1a? If "Yes," complete Schedule J			e, ke	y em	nplo	yee, or	higl	hest com	pensated e	employee on			
4	For any individual listed on line 1a, is			omno	ncat	tion.	and of	hor	compone	ation from	the the	3		No
4	organization and related organization: individual										tile	4		No
5	Did any person listed on line 1a receive			• ion fr	· om s	• anv		tod o	· ·	ion or indiv	idual for			140
,	services rendered to the organization									• •		5		No
S	ection B. Independent Contract	ors												
1	Complete this table for your five higher the organization. Report compensation											npens	sation from	m
	·	(A) and business addre			<i>y</i>	3			3		(B)			C) nsation
	ivalile (and business dual								DCSC	paron or activices		compe	

		4	No				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization						
	services rendered to the organization? If "Yes," complete Schedule J for such person	5	No				
S	ection B. Independent Contractors						
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.						
	(A) Name and business address	(B) Description of services	(C) Compensation				

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

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must	t complete all columns. A	All other organization	s must complete colur	nn (A).
Check if Schedule O contains a response or note to	•			\square
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreig governments, and foreign individuals. See Part IV, lines 15 and 16	n			
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and keeployees	еу П			
6 Compensation not included above, to disqualified persons (defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	as			
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	299,568	40,132	259,436	
c Accounting	27,023	27,023		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (amount, list line 11g expenses on Schedule O)	A)			
2 Advertising and promotion				
3 Office expenses	8,304	8,304		
4 Information technology	7,669	7,669		
5 Royalties				
6 Occupancy				
7 Travel				
8 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
.9 Conferences, conventions, and meetings	4,447	4,447		
20 Interest	25,106	25,106		
Payments to affiliates				
2 Depreciation, depletion, and amortization	113,574	113,574		
3 Insurance	32,761	32,761		
Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a COST OF WATER SERVICES	179,449	179,449		
b REPAIRS & MAINTENANCE	102,903	102,903		
c INSTALL NEW SERVICE TAPS	12,984	12,984		
d CONTRACT SERVICES	3,121	3,121		
e All other expenses				
Total functional expenses. Add lines 1 through 24e	816,909	557,473	259,436	
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here if following SOP 98-2 (ASC 958-720).				

1,466,239

62.538

17.003

604,650

106,628

728,281

993,632

993.632

1,721,913 Form 990 (2021)

1,721,913

	-		•	,
Part		<		Ba

11

12

13

14

15

16

17

18

19

20

21

24

25

26

27

Balances

Fund

5 29

Assets 30

Net 33

31

32

jabilities

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

	(A) Beginning of year		(B) End of year
1 Cash-non-interest-bearing	370,467	1	25,2
1			

2	Savings and temporary cash investments	143,724	2	167,88
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director,			

trustee, kev employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net . . Inventories for sale or use . . Prepaid expenses and deferred charges . . .

10a Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D Less: accumulated depreciation 10b Investments—publicly traded securities .

Total assets. Add lines 1 through 15 (must equal line 33) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here 🕨 🗌 and

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Unsecured notes and loans payable to unrelated third parties . . .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here 🕨 🗹 and

Investments—program-related. See Part IV, line 11

Accounts payable and accrued expenses .

Other assets. See Part IV, line 11 .

Grants payable . . .

Deferred revenue

Complete Part X of Schedule D

Tax-exempt bond liabilities . . .

or family member of any of these persons

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances . .

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Investments—other securities. See Part IV, line 11 .

2.680.666 1.214.427

1,836,806

3.121

17

18

6 7

8 9

27

28

29

30

31

33

1,104,774

1.104.774

1.836.806

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SCHEDULE D

Department of the

(Form 990)

Submission Date - 2023-07-31

DLN: 93493212014303

Supplemental Financial Statements

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

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

OMB No. 1545-0047 Open to Public Inspection

Trea: Inter Serv	nal Revenue	► Go to <u>www.irs.gov/Form9</u>	<u>190</u> for instructions and the	latest inform	nation.	Inspection
Na	me of the organiz	zation TER SUPPLY CORP			Employer identificat	ion number
*****	IDERMENE CARS WA	TEN SOTT ET CONT			74-2785317	
Pa		zations Maintaining Donor Adviste if the organization answered "Yes			r Accounts.	
	·	<u> </u>	(a) Donor advised fur	nds	(b) Funds and o	other accounts
1	Total number at e	end of year				
2	Aggregate value	of contributions to (during year)				
3	Aggregate value	of grants from (during year)				
4	Aggregate value	at end of year				
5		ation inform all donors and donor advisor property, subject to the organization's exc				☐ Yes ☐ No
6	charitable purpo	ation inform all grantees, donors, and dor oses and not for the benefit of the donor · · · · · · · · · · · · · · · · · · ·	or donor advisor, or for any oth	er purpose cor	e used only for nferring impermissible	Yes No
Pa		vation Easements.	ll an Farma OOO Dawk IV line	7		
_	•	te if the organization answered "Yes		7.		
1		onservation easements held by the organi			taka atau II. dan arawa aka ak I	
		on of land for public use (e.g., recreation			istorically important la	
	☐ Protection	of natural habitat	□ Prese	rvation of a ce	rtified historic structu	re
	☐ Preservation	on of open space				
2		2a through 2d if the organization held a c e last day of the tax year.	ualified conservation contribut	ion in the form		end of the Year
а	Total number of	conservation easements			2a	
b	Total acreage res	stricted by conservation easements			2b	
C	Number of conse	ervation easements on a certified historic	structure included in (a)		2c	
d		ervation easements included in (c) acquir n the National Register	ed after 7/25/06, and not on a	historic	2d	
3	Number of constax year >	ervation easements modified, transferred	l, released, extinguished, or ter	rminated by th	e organization during	the
4	Number of state	es where property subject to conservation	easement is located 🕨			
5	Does the organi enforcement of	zation have a written policy regarding the the conservation easements it holds?	e periodic monitoring, inspectio	on, handling of	violations, and	es 🗆 No
6	Staff and volunt	eer hours devoted to monitoring, inspect	ing, handling of violations, and	enforcing cons	servation easements (during the year
7	Amount of expe	nses incurred in monitoring, inspecting, h	nandling of violations, and enfo	rcing conserva	tion easements during	g the year
8		ervation easement reported on line 2(d) a (h)(4)(B)(ii)?			O(h)(4)(B)(i)	es 🗆 No
9	balance sheet, a	ribe how the organization reports conser and include, if applicable, the text of the n's accounting for conservation easement	ootnote to the organization's fi			
Pa	rt III Organi	zations Maintaining Collections	of Art, Historical Treasu		er Similar Assets.	
		ete if the organization answered "Yes				
1a	historical treasu	on elected, as permitted under FASB ASC res, or other similar assets held for publi tt of the footnote to its financial statemen	exhibition, education, or research			
b	historical treasu	on elected, as permitted under FASB ASC ires, or other similar assets held for publi nts relating to these items:				
((i) Revenue includ	ded on Form 990, Part VIII, line 1			. ▶\$	
		l in Form 990, Part X				
2	If the organization	on received or held works of art, historicants required to be reported under FASB A	al treasures, or other similar ass	sets for financi		
а	•	ed on Form 990, Part VIII, line 1	•		. ▶\$	
h	Accets included	in Form 990 Part X				

Cat. No. 52283D

Par	t III	Organizations M	<u> Iaintaining Co</u>	llections of <i>l</i>	Art, Histo	rical '	Treas	ures, or (Other Similar	Assets (co	ntinued,)
3		the organization's acq (check all that apply):		n, and other rec	ords, check	any of	the fol	lowing that	are a significant	use of its coll	ection	
а		Public exhibition			d		Loan	or exchange	e programs			
b		Scholarly research			е		Other					
c		Preservation for future	e generations									
4	Provid	de a description of the	•	ections and exp	olain how the	ey furtl	her the	organizatio	on's exempt purp	oose in		
5		ng the year, did the organise to be sold to raise fur								Yes		lo
Pai	rt IV											
		Complete if the ord line 21.	ganization answ	ered "Yes" on	Form 990,	Part	IV, line	e 9, or rep	orted an amou	int on Form !	990, Pa	art X,
1a	Is the	e organization an agent	trustee, custodia	n or other inter	mediary for	contrik	outions	or other as	sets not			
		ded on Form 990, Part								☐ Yes		lo
b	If "Ye	s," explain the arrange	ment in Part XIII a	nd complete the	e following to	able:				Amount		
c	Begin	nning balance						1	С			
d	Addit	ions during the year .						. 10	d			
е	Distri	butions during the year	r					1	е			_
f	Endin	ng balance						1	f			
2a	Did th	he organization include	e an amount on For	m 990. Part X. l	line 21. for e	scrow	or cust	todial accou	ınt liability?			<u> </u>
b		s," explain the arranger									<u> </u>	
	rt V	Endowment Fund		THECK HEIE II THE	Explanation	i iias k	Jeen pi	Ovided III I	are Aiii			
		Complete if the or		ered "Yes" on	Form 990,	Part	IV, line	e 10.				
		·		(a) Current yea	er (b) P	rior yea	ar ((c) Two years	back (d) Three y	ears back (e)	Four yea	ırs back
1 a	Beginn	ing of year balance .										
b	Contrib	outions										
C	Net inv	estment earnings, gair	ns, and losses									
d	Grants	or scholarships										
		expenditures for facilitie	es									
	•	ograms										
		istrative expenses .										
_		year balance										
2 a		de the estimated perce d designated or quasi-e	-	nt year end bal	ance (line 1	g, colu	mn (a))) held as:				
b	Perma	anent endowment 🕨	•••••									
С	Term	endowment 🕨										
	The p	ercentages on lines 2a	, 2b, and 2c shoul	d equal 100%.								
3a		here endowment funds	not in the possess	sion of the orga	nization that	are he	eld and	l administer	red for the			
	•	nization by:								2-(1)	Yes	No
		related organizations				•				3a(i) 3a(ii)		
b		elated organizations . s" on 3a(ii), are the rela				R2 عاددا	•			. 3b		
4		ribe in Part XIII the inte	•	•								<u> </u>
	rt VI	Land, Buildings,										
		Complete if the or			Form 990,	Part	IV, line	e 11a. See	Form 990, Pai	rt X, line 10.		
	Descri	iption of property	(a) Cost or othe (investme		Cost or other	basis (other)	(c) Accumu	lated depreciation	(d) B	ook valu	e
			(/vestille									
1a	Land						61,110					61,110
b	Buildin	ıgs .										
c	Leaseh	nold improvements										
d	Equipn	nent				1	07,769		31,02	1		76,748
						2,5	11,787		1,183,406	5		1,328,381

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

1,466,239

Part VII	Investments - Other Securities.	D 1) / 1	11b C F	- 000 Dt	V II 12
	Complete if the organization answered "Yes" on Form 990, F (a) Description of security or category	(b) Bo	ok	(c) Method	of valuation:
/5) Figure 1	(including name of security)	value	e Cos	st or end-of-y	ear market value
	I derivatives				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII	Investments - Program Related. Complete if the organization answered 'Yes' on Form 990, F (a) Description of investment	Part IV, li	ne 11c. See Form (b) Book value	(c)	X, line 13. Method of valuation: end-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
Part IX	n (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets.				
	Complete if the organization answered 'Yes' on Form 990, P.	art IV, lir	ne 11d. See Form	990, Part X,	
(1)	(a) Description				(b) Book value
(2)					
(3)					+
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.				>
Part X	Complete if the organization answered 'Yes' on Form 990, P	art IV, lir	ne 11e or 11f.Se	e Form 990	
1. (1) Federal (2)	(a) Description of liability income taxes				(b) Book value
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col.(B) line 25.) or uncertain tax positions. In Part XIII, provide the text of the footnote	to the e	ganization's face	ial statemen	106,628

Part XI

1

2

b

3

1

2

3

а

b

Part XII

2e

3

4c

1

2e 3

4c

5

Schedule D (Form 990) 2021

Page 4

Reconciliation of Revenue per Audited Financial Statements With Revenue per
Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990. Part VIII, line 12: Net unrealized gains (losses) on investments 2a

Donated services and use of facilities . . .

Recoveries of prior year grants

Other (Describe in Part XIII.)

Add lines 2a through 2d Subtract line **2e** from line **1**

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Amounts included on line 1 but not on Form 990, Part IX, line 25:

Donated services and use of facilities

2d

Explanation

Add lines 2a through 2d . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Subtract line **2e** from line **1** . .

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

2a 2h 2c

4a

4b

2b

2c 2d

4h

Supplemental Information Part XIII

Return Reference

Prior year adjustments . .

Other (Describe in Part XIII.) .

Other losses .

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

efile GRAPH	IC print	Submission Date - 2023-07-31	DLN: 93493212014303	
SCHEDUL (Form 990) Department of t Treasury) the	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.		
Warne of the organization WINDERMERE OAKS WATER SUPPLY CORP T4-2785317				
Return Reference	Explanation			
FORM 990, PAGE 2, PART III, LINE 4D	PROVIDE TREATED WATER, AND WASTE WATER TREATMENT FACILITIES FOR THE CUSTOMERS OF WINDERMERE OAKS WATER SUPPLY CORPORATION			
FORM 990, PAGE 6, PART VI, LINE 6				
FORM 990, PAGE 6, PART VI, LINE 7A				
FORM 990, PAGE 6, PART VI, LINE 7B				
FORM 990, PAGE 6, PART VI, LINE 11B	NO REVIEW WAS OR WILL BE CONDUCTED.			
FORM 990, PAGE 6, PART VI, LINE 12C	GUIDELINES FOR MONITORING AND ENFORCING CONFLICTS OF INTEREST ARE DOCUMENTED IN THE CONFLICT OF INTEREST POLICY.			
FORM 990, PAGE 6, PART VI, LINE 15B	THE PROCESS FOR DETERMINING COMPENSATION FOR OTHER OFFICERS OR KEY EMPLOYEES, SPECIFICALLY THE ROLE OF PUBLIC INFORMATION OFFICER, INCLUDED COMPARISON OF THE COSTS TO OUTSOURCE THE ROLE TO A LAW FIRM AT AN HOURLY RATE.			
FORM 990, PAGE 6, PART VI, LINE 19	NO DOCUMENTS AVAILABLE TO THE PUBLIC			
For Paperwork I 990-EZ.	Reduction	Act Notice, see the Instructions for Form 990 or Cat. No. 5	1056K Schedule O (Form 990) 202	