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## Form **990**

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

	2009
	CARPELL CY. PSE
	Openito Public Inspection
	, 2010
_	- Identification Number

	For the	2009 calen	dar year,	or tax year beginning	10/01	, 2009	9, and ending	g 9/	30	,	2010	
В	Check if a	pplicable	Bi	С					D Employ	er Identifi	cation Number	_
	Addr	ess change	Please use IRS label	MODERN ELECT	RIC WATER (	COMPANY			91-	03234	30	
	Nam	e change	or print or type.	PO BOX 14008					E Telepho	ne numbe	r	
	<del></del>	ıl return	See specific	SPOKANE, WA	<del>3</del> 9206				509	-928-	4540	
	$\vdash$	nination	Instruc- tions.						-			
	H	nded return							G Gross re	eceipts \$	14,459	.723.
	H	ication pending	F Name	and address of principal offic				H(a) Is this	a group retur			
	□ _ John	ication pending		AS C ABOVE					affiliates incl		Yes	=
	Tay	exempt statu			sert no )	4947(a)(1) or	527	If 'No,'	attach a list	(see instri	uctions)	
<u> </u>			W.MEWC		ert no )	4547 (a)(1) UI		U(a) Craun	exemption nu	ımbar Þ		
K		f organization:			ociation Other		Year of Formati				jal domicile WA	
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Activities & Governance	-			. <b></b>								
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Ğ				nbers of the governing						3		5
<b>8</b> 0	4 N	lumber of in	depender	nt voting members of	the governing b	ody (Part VI, Iir	ne 1b)			4		5 5
J‡e	5 T	otal number	r of emplo	oyees (Part V, line 2a	)					5		34
ŧ				teers (estimate if nec						6		0
⋖	l	_		business revenue fror		• • •			•	7a		0.
	<b>b</b> N	let unrelated	busines:	s taxable income fron	n Form 990-T, lii	ne 34.		<del></del>	• • • •	7b		0.
				REC	EIVED	7		F	Prior Year		Current Y	<u>'ear</u>
<u>o</u>	<b>8</b> C	contributions	and gran	nts (Part VIII_line 1h)	'he ! 'Y [ ]	1	•					
Revenue	<b>9</b> P	rogram ser	vice rever	nue (Part VIII, line 2g)	)	ပ္တု		<u> </u>			750	
ě				art VIII, Solumn (A), I					1,088,6			919.
				III, column (A), lines			. 10		2,732,5			665.
				ines 8 through 11 (mu			line 12)		1,643,8	73.	2,986	,584.
				ounts paid (Bart)(X)			•	-	<del></del>			
	1			members (Part IX, co				-	074		000	
ø	1			nsation, employee be			es 5-10)	-	974,7	44.	983	572.
Expenses	16a P	rofessional	fundraisir	ng fees (Part IX, colu	mn (A), line 11e	)		200		TO CARROLLES   No.		65.44.0 (Ma/2
Š	Ь⊤	otál fundra:	sing expe	nses (Part IX, column	n (D), line 25) ►							<b>对外</b>
ш	17 O	ther expens	ses (Part	IX, column (A), lines	11a-11d, 11f-24	f)			915,5	506.	1,094	,907.
	18 T	otal expens	es. Add li	ines 13-17 (must equa	al Part IX, colum	nn (A), line 25)			1,890,2	250.	2,078	3,479.
				es Subtract line 18 fro					-246,3		908	,105.
2 8 8			'					Regi	nning of Y	'ear	End of Y	ear
Signal Constitution	20 T	otal assets	(Part X li	ine 16)					1,897,8		44,281	
<b>&gt;</b>		otal liabilitie	-	•					2,849,1			,460.
<b>Z</b>			•	ances Subtract line 2	21 from line 20				9,048,7		41,143	
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		ZIP + 4		KANE, WA 9921				<u> </u>	Phone no	509-	926-6221	<del></del>
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Page 3

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Schedule A .. . 2 Х Is the organization required to complete Schedule B. Schedule of Contributors?. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I Х 3 **Section 501(c)(3) organizations**. Did the organization engage in lobbying activities? *If 'Yes,' complete Schedule C, Part II* 4 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If 'Yes,' complete Schedule C, Part III* 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, X Part I 6 . . Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If 'Yes,' complete Schedule D, Part II* . . . . . X 7 X 8 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete X 9 Schedule D. Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V Х 10 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or 11 X X as applicable ... • Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI • Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. • 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? If Yes, complete Schedule D. Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII X 12 12AWas the organization included in consolidated, independent audited financial statement for the tax No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 X 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If 'Yes,' complete Schedule F, Part I* 14b X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I. 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х lines 1c and 8a? If 'Yes,' complete Schedule G. Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 Х 20 X Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

Form 990 (2009) MODERN ELECTRIC WATER COMPANY

RantilVar Checklist of Required Schedules (continued)

			res	NO
<b>21</b> `	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		<u>x</u> _
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		_ X_
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	Х	
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
ď	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		
25 a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
t	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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		_X_
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
ě	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
(	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part $l$ .	31		X
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_		х
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? If 'Yes,' complete Schedule R, Part I	33_		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		<u>x</u>
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Х	_
3AA		Form	990	(2009)

a Enter the number reported m Box 3 of form 1096. Annual Summary and Transmittal of U S. 12 12 12 15 16 16 16 16 16 16 17 16 16 16 16 16 16 16 16 16 16 16 16 16	rait V Statements Regarding Other INST mings and Tax Compilance			т——
Information Returns. Enter -0- if not applicable b Enter the number of Forms W-23 included in line 1 a Enter -0- if not applicable 1 b 0 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to prize winners?  2 a Enter the number of employee reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calleady per unique with the year owered by this return  2 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 1 a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3 b Oct the organization in lines 1 and 2a is greater than 250, you may be required to e-file this return (see instructions) 3 b If Yes has it filed a Form 990-T for this year? If No.' provide an explanation in Schedule O  4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such las a bank account, securities account, or other financial account)?  b If Yes, enter the name of the foreign country: P See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c If Yes, in line 5s or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?  5 a Was 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?  5 b If Yes, indicate the region of the value of the goods or services provided?  7 b Jordanization stat may receive deductible contributions under section 178(c).  5 b If Yes, indicate the number of Forms 8382 filed during the year  9 b Did the organization and any time services any funds, directly or indirectly, to pay premiums on a personal benefit contract?  9 b If Yes, ind		r	Yes	No
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  c bit the organization comply with abokup withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to pitzle withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to pitzle withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to pitzle withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to pitzle withholding rules for reportable payments that the gambling of the called the gambling of the surface o	1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns, Enter -0- if not applicable	2	**	
(gambling) winnings to prize winners?  2a find the number of endyese reported on Form W.3, Transmital of Wage and Tax Statements, filed for the cleindary year ending with or within the year cowered by this return.  2b fir at least one is reported on in fine 2b, 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 this return (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return.  b if "Yes, has it filed a Form 990-T for this year?" If No, provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; such as a bank account, securities account, or other financial account).  5a Was the organization a party to a prohibited tax shalter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  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?  5c To Organization stat may receive deductible contributions under section 170(c).  a Did the organization receive a payment in excess of \$75 made party to a prohibition and partly for goods and services provided to the payor?  7b Organizations that may receive deductible contributions under section 170(c).  a Did the organization only the donor of the value of the goods or services provided?  7b If Yes, indicate the number of Forms 8282 filed during the year receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c Ford the organization, during the year, receive any funds, directly or ind	· · · · · · · · · · · · · · · · · · ·	<b>−</b> 12 °	26	Î.,
2a Inter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the landbud year endined year endined wher within the year covered by this return.  2b 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-rife this return (see instructions)  3a Did the organization have unrelated businesses gross income of \$1,000 or more during the year covered by this return?  3b If Yes' has it filed a Form 990-T for this year? If No, 'provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5b If Yes, enter the name of the foreign country:  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction?  5b Was the organization aparty to a prohibited tax shelter transaction?  5c Uf Yes, to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5c C If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c Jack 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?  6c Jack 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?  6c Jack the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  6c Jack the organization receive a payment in excess of \$75 made partly	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			لحقدا
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a 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?  b If Yes,' did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If Yes,' indicate the number of Forms 8282 filed during the year  e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds.  a Did the organization make any distribution to a donor, donor advisor, or related person?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any distribution to a donor, donor advisor, or related person?  9 Sponsoring 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.  b Gross Receipts, included on Form 990, Part VIII, line 12.  a Initiation fees and capital contributions included on Part VIII, line 12.  b Gross income from other members or shareholders  b Gross income from other members or shareholders  b Gross income from other members or shareholders  c Total Title 13, 654, 953.  11a 13,654,953.  11b 804,771.  12a	7 Organizations that may receive deductible contributions under section 170(c).	<i>3</i> .		
b If 'Yes,' idid the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d If 'Yes,' indicate the number of Forms 8282 filed during the year	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service			
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b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11 Section 501(c)(12) organizations. Enter:  a Gross income from other members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	1 1			
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a Gross income from other members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a 13,654,953.  11b 804,771.  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		_	1 19.	1983
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against	*.		
	•	$\neg \neg$		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b				-

**BAA** Form **990** (2009)

Part VI: Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

<u>5,e</u>	ction A.	Governing E	<b>3ody and Mana</b>	gement									
												Yes	No_
1	a Enter the	number of votir	ng members of the	governing boo	ly			1 a		5	١٠٠.		
	<b>b</b> Enter the	number of votir	ng members that a	e independen	t			1ь		5	~		
2	Did any o	officer, director, f irector, trustee o	trustee, or key emp or key employee?	oloyee have a	famıly relatı	ionship or a	business r	elations	ship with a	iny other	2	\$5 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	X
3	Did the o	organization dele	gate control over n ustees, or key emp	nanagement di loyees to a ma	uties custon anagement	narily perfo	rmed by or or other pers	under t	he direct :	supervision	3		X
	Did the o	organization mak	e any significant ch was filed?		rganızatıona						4	Х	
5		•	me aware during t			ersion of the	organizatio	on's ass	sets?		5		Х
6	Does the	organization ha	ve members or sto	ckholders?	SEE SCH	EDULE C	)				6	Х	
7	<b>a</b> Does the governing	organization ha g body?	ve members, stock SEE .SCHEDULI	holders, or oth E O	ner persons	who may e	elect one or	more n	nembers o	of the	7a	х	
	<b>b</b> Are any	decisions of the	governing body sul	oject to approv	al by memb	bers, stockl	nolders, or o	other pe	ersons?	•	7Ь		<u>X</u>
8	Did the o		emporaneously do	cument the me	etings held	l or written	actions und	ertaken	during th	e year by			ڵڹڎڴۮ
	a The gove	erning body?				•					8a	X	
	<b>b</b> Each cor	nmittee with autl	hority to act on bel	alf of the gove	erning body	7					8b	X	
9	Is there a	any officer, direction's mailing ad	tor or trustee, or ke dress? <i>If 'Yes,' pro</i>	ey employee li vide the name	sted in Part	t VII, Sectio esses in Sc	n A, who ca chedule O	annot b	e reached	at the	9		Х
Se	ction B.	Policies (	This Section B i	requests inf	ormation	about po	licies not	requii	red by th	ne Internai	1		
Re	venue Code	•)			<del>,</del>								
												Yes	No
10	a Does the	organization ha	ve local chapters, l	oranches, or a	ffiliates?			•	•		10a		X
	and bran	ches to ensure t	ation have written heir operations are	consistent wit	th those of t	the organiz	ation?	•			10b		
11	Has the	organization prov	vided a copy of this	Form 990 to	all members	s of its gov	erning body				11	X	<u> </u>
11	<b>A</b> Describe	ın Schedule O t	he process, if any,	used by the o	rganızatıon	to review t	his Form 99	o SE	EE SCHE	DULE O		1860 14 0 1860 14 0	
12		•	ve a written conflic	•	•	. •				•	12a	Х	
	<b>b</b> Are office to conflic	ers, directors or cts?	trustees, and key e	employees requ	uired to disc	close annua	ally interests	s that c	ould give i	rise	12b	х	
	c Does the Schedule	organization req O how this is d	gularly and consiste one SEE SC	ently monitor a CHEDULE O	and enforce	compliance	e with the po	olicy? /	f 'Yes,' de	scribe in	12 c	х	
13	Does the	organization ha	ve a written whistle	blower policy?	?.						13	Х	
14	Does the	organization ha	ve a written docum	ent retention a	and destruc	tion policy?	)				14	Х	2.73
15	Did the p persons,	rocess for deteri comparability da	mining compensati ata, and contempoi	on of the follow aneous substa	wing person antiation of	ns include a the delibera	review and ation and de	d approvects	val by inde	ependent		ر د این د است	
			Executive Director,				SCHEDULI	ΕQ.			15 a	Х	
	<b>b</b> Other off	icers of key emp	loyees of the orga	nization. SE	E SCHED	ULE O					15b	X	7 4
	If 'Yes' to	o line 15a or 15b	, describe the proc	ess in Schedu	le O (See i	instructions	;)						
16	<b>a</b> Did the o	organization inversing the year?.	st in, contribute as:	sets to, or part	ticipate in a	ı joint ventu	ire or simila	r arrang	gement wi	th a taxable	16a	<u>816,55</u>	X
	in joint v	enture arrangem	tion adopted a writ ents under applica ch arrangements?	ten policy or p ble federal tax	rocedure re law, and ta	aken steps	organization to safeguare	d the o	aluate its i rganizatioi	participation n's exempt	16b		
Se	ction C.	Disclosures											
17	List the s	states with which	a copy of this Fori	m 990 is requi	red to be file	ed NON	E						
18	inspectio	n. Indicate how	organization to ma you make these av	ailable. Check	all that app	ply	able), 990, a	and 990	)-T (501(c)	(3)s only) a	vaılab	le for p	public
	$\Box$	website	Another's we		·	request							
19	Describe statemer	in Schedule O vots available to the	whether (and if so, ne public. SEE	how) the organ SCHEDULE	nization mai 0	kes its gov	erning docu	ments,	conflict of	f interest pol	ісу, аг	nd fina	ancial
20			address, and telep		· ·					ds of the org 06_509_9			- <b>-</b> -

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

#### 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 organizations's tax year. Use Schedule J-2 if additional space is needed
- 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. See instructions for definition of 'key employees'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order, individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees, and former such persons.

Check this box if the organization did no	1	sate a	any (			officer	, dır	1"		
(A)	(B)			•	c) 			(D)	(E)	<b>(F)</b>
Name and Title	Average hours per week	ndividual trustee or director	institutional trustee	Officer	a Key employee	Highest compensated a employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
JAMES BOUREKIS										
PRESIDENT	1	Х						6,300.	0.	0.
SAM WALDRON										
DIRECTOR	1	X		<u> </u>				3,750.	0.	0.
DAVE THOMPSON										
SECRETARY/TREAS	11	X						3,000.	0.	0.
BARRY BAKER	]						ŀ			
DIRECTOR	1	Х						2,500.	0.	0.
CECIL CLEVELAND	_									
VICE PRESIDENT	1	Х						4,250.	0.	0.
MIKE BAKER										
GENERAL MANAGER	40		ļ			X	<u> </u>	179,215.	0.	0.
JOE MORGAN								,		
OPERATIONS MANAGER	40		<u> </u>			X	<u> </u>	119,022.	0.	0.
WAI LANDRY	]									_
COMPTROLLER	40		ļ	_	_	Х	ļ	114,793.	0.	0.
	]									
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Part VII Section A. Officers, Directors, Trus	tees, k	(ey	En	ıplo	ye	es,	and	d Highest Con	pensated Em	ployees	(cont.)
(A)	(B)				c)			(D)	(E)		(F)
Name and Title	Average hours			check				Reportable	Reportable compensation from	Es	timated
•	per week	or II	inst	Officer	Key	Highest compensated employee	For	the organization	related organizations (W-2/1099-MISC)	s com	nt of other pensation
		vidu	Institutional trustee	ह	em	hest ploye	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	orga	om the anization
	1	함함	<u>a</u>		employee	com					d related inizations
		uste	trus		8	pen					
		"	tee			sate					
							<u> </u>				
		<u> </u>						<u>-</u> .	<u>-, -</u>		
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					Π						
1 b Total							<b>&gt;</b>	432,830.	C	).	0.
2 Total number of individuals (including but not limite	d to the	se li	ste	d ab	ove)	) wh	o re	ceived more than	\$100,000 in repo	ortable cor	npensation
from the organization > 3											
											Yes No
3 Did the organization list any former officer, director	or trus	tee	kev	emi	nlov	- 00	or h	inhest compensat	ed employee		
on line 1a? If 'Yes,' complete Schedule J for such i	ndividua	al .	cy	رادان				ignest compones.		3	X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater in	portable	e co	mpe	nsa	ţion	and	oth	er compensation	from		<i>`</i>
the organization and related organizations greater to individual	than \$15	50,00	007	If 'Y	'es'	com	nplet	e Schedule J for	such	4	X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sc	compens	satio <i>I for</i>	n fr	om a	any erso	unre	elate	ed organization fo	r services	5	Х
Section B. Independent Contractors	nedale .	3 101	300	.11 pt	2130			· · ·			
1 Complete this table for your five highest compensa	ted inde	pen	den	cor	ntra	ctors	s tha	at received more t	han \$100,000 of		
compensation from the organization.								<del></del>			
(A)								(B	)	((	C)
Name and business addres	ss							Description	of Services	Compe	nsation
											<del> </del>
2 Total number of independent contractors (including	but not	lımı	ted	to t	hose	e list	ted a	above) who receiv	ed more than		
\$100,000 in compensation from the organization >	0										

Page\_9

		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
2,0	1a Federated campaigns 1a				
AN	<b>b</b> Membership dues 1b				
£,5	c Fundraising events. 1c		]		
F &	d Related organizations . 1d				
S,≣	e Government grants (contributions) 1 e				£
5 E	f All other contributions, gifts, grants, and				4
題に	f All other contributions, gifts, grants, and similar amounts not included above				
PROGRAM SERVICE REVENUE OONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	g Noncash contribns included in lns 1a-1f. \$				F 
<u>0</u>	h Total. Add lines 1a-1f . Business Code				
N.	2a				
<u> </u>	b				· · · · · · · · · · · · · · · · · · ·
Z.	c				
5	d				
S S	e				
8	f All other program service revenue				
<u> </u>	g Total. Add lines 2a-2f ▶		79	*	
	3 Investment income (including dividends, interest and	504 467			F04 4C7
	other similar amounts)	594,467.			594,467.
	Income from investment of tax-exempt bond proceeds		-	-	
	5 Royalties . • (i) Real (ii) Personal		* *	4	
	<b>6a</b> Gross Rents 30, 600.				
	b Less rental expenses 1, 617.	* , '	<i>1</i> €.	*	,
	c Rental income or (loss) 28, 983.		;		
	d Net rental income or (loss) ▶	28,983.			28,983.
	7a Gross amount from sales of (i) Securities (ii) Other		*		
	assets other than inventory 139,299. 17,153.		*		
	<b>b</b> Less: cost or other basis		· *		
	and sales expenses				
	c Gain or (loss) 139,299. 17,153.	156 452	156,452.		
	direct gain or (loss)	156,452.	156,452.		
OTHER REVENUE	8a Gross income from fundraising events (not including. \$				
REVI	of contributions reported on line 1c)				
Ä	See Part IV, line 18 a b Less direct expenses b				
6	c Net income or (loss) from fundraising events				
i	9a Gross income from gaming activities See Part IV, line 19				
	b Less: direct expenses				
	c Net income or (loss) from gaming activities.				
	· · · · · · · · · · · · · · · · · · ·				
	10a Gross sales of inventory, less returns and allowances a 13678204.				
	<b>b</b> Less: cost of goods sold <b>b</b> 11471522.				
	c Net income or (loss) from sales of inventory	2,206,682.			2,206,682.
	Miscellaneous Revenue Business Code				
	11a				
	D		_		
	d All other revenue		<del></del>		
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	2.986.584	156,452.	0.	2,830,132.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete co	olumns (B), (C), and (D).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		•		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				-
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4					
5	Compensation of current officers, directors, trustees, and key employees	19,800.	0.	19,800.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	621,978.	0.	621,978.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	190,867.		190,867.	,
9	Other employee benefits	89,394.		89,394.	
10	Payroll taxes	61,533.		61,533.	
	Fees for services (non-employees)	,		/	
	a Management				_
	Legal	12,666.		12,666.	
	Accounting	52,160.		52,160.	
	Lobbying	,			
•	Prof fundraising svcs. See Part IV, In 17		, 0	¢	
f	Investment management fees	147,661.		147,661.	
ç	1 Other	·		·	
12	Advertising and promotion				
13	Office expenses	230,463.		230,463.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel			-	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		<u> </u>		
21	Payments to affiliates				<del></del>
22 23	Depreciation, depletion, and amortization Insurance	340,331.		340,331.	
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25	. *	a">		
_	below.) DUES AND SUBSCRIPTIONS	71,342.		71,342.	
	MISCELLANEOUS	67,191.		67,191.	
	POSTAGE AND SHIPPING	65,606.		65,606.	
	I INSURANCE	47,245.		47,245.	
	PUBLIC RELATIONS	38,574.		38,574.	
	All other expenses	21,668.		21,668.	
	Total functional expenses. Add lines 1 through 24f	2,078,479.	0.	2,078,479.	0.
26	Joint costs. Check here □ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	,			Form <b>990</b> (2009)
BAA					Form <b>990</b> (2009)

Part X	Balance Sheet			
		(A) Beginning of year		<b>(B)</b> End of year
. 1	Cash — non-interest-bearing	3,077,808.	1	2,995,304
2	Savings and temporary cash investments .		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	1,374,646.	4	1,398,692
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
.	and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
7 S E E S T S	Notes and loans receivable, net .		7	
8	Inventories for sale or use	351,705.	8	340,180
s 9	Prepaid expenses and deferred charges	93,502.	9	94,073
10a	Land, buildings, and equipment: cost or other basis. 10a 41,031,995.	_		
	Complete Part VI of Schedule D	· *		
t	Less accumulated depreciation 10b 21,118,577.	20,666,688.	10 c	19,913,418
11	Investments – publicly-traded securities .	16,222,728.	11	19,429,512
12	Investments – other securities. See Part IV, line 11 .		12	
13	Investments – program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	110,753.	15	110,182
16	Total assets Add lines 1 through 15 (must equal line 34)	41,897,830.	16	44,281,361
17	Accounts payable and accrued expenses	2,849,107.	17	3,137,460
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
[	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities. Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	2,849,107.	26	3,137,460
y F	Organizations that follow SFAS 117, check here ▶ ☐ and complete lines	%		
Ē	27 through 29 and lines 33 and 34.	· ¾, ﴿		
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
	Permanently restricted net assets		29	
₹	Organizations that do not follow SFAS 117, check here > X and complete	, ,		
<u>;</u>	lines 30 through 34.			
30	Capital stock or trust principal, or current funds	2,790.	30	2,786
31	Paid-in or capital surplus, or land, building, and equipment fund	2,158,327.	31	2,158,328
32	Retained earnings, endowment, accumulated income, or other funds	36,887,606.	32	38,982,787
31 32 33 33 34	Total net assets or fund balances	39,048,723.	33	41,143,901
S 34	Total liabilities and net assets/fund balances.	41,897,830.	34	44,281,361

BAA

Form **990** (2009)

Form 990 (2009) MODERN ELECTRIC WATER COMPANY	91-0323430	Pa	age 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			
' If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O	,		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	28	1	Х
<b>b</b> Were the organization's financial statements audited by an independent accountant?.	21	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for overs review, or compilation of its financial statements and selection of an independent accountant?	sight of the audit,	X	
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	aın		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year w consolidated basis, separate basis, or both	vere issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set fort Audit Act and OMB Circular A-133?	th in the Single		х

**b** If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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Form 990 (2009)

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

➤ Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ➤ See separate instructions

OMB No 1545-0047 Open to Public Inspection

Name of the organization			Zimpioyer identification i	iniinet.
MODERN ELECTRIC WATER COMPANY			91-0323430	
Part I Organizations Maintaining Dono the organization answered 'Yes'	or Advised Funds or Other Similar Fund to Form 990, Part IV, line 6.	s or Acco		ıf
<del></del>	(a) Donor advised funds	(h) F	unds and other acco	unts
1 Total number at end of year	(a) Bollor advised fullus	(5)	unas ana other acco	<u> </u>
•				·
2 Aggregate contributions to (during year)				
3 Aggregate grants from (during year)			<del></del>	
4 Aggregate value at end of year				
5 Did the organization inform all donors and do funds are the organization's property, subject	nor advisors in writing that the assets held in do to the organization's exclusive legal control?	nor advised	Yes	No
used only for charitable purposes and not for purpose conferring impermissible private ber		any other	Yes	☐ No
Part II Conservation Easements Comp	ete if the organization answered 'Yes' to	o Form 99	0, Part IV, line 7	7.
1 Purpose(s) of conservation easements held to	by the organization (check all that apply).			
Preservation of land for public use (e.g.,	recreation or pleasure) Preservation of	f an historica	ally important land a	rea
Protection of natural habitat	Preservation of	f certified his	storic structure	
Preservation of open space				
	tion held a qualified conservation contribution in t	the form of a	a conservation easer	ment on the
		STATE:	Held at the End of	he Year
a Total number of conservation easements		2a		
<b>b</b> Total acreage restricted by conservation ease	ements	2b		
c Number of conservation easements on a cert		2c	•	
d Number of conservation easements included		2 d		<del></del>
	, transferred, released, extinguished, or terminate		nanization during the	tav
	, transferred, released, extinguished, or terrimate	ed by the or	garnzation during the	, lax
year ►  4 Number of states where property subject to o	onservation easement is located ►	_		
and enforcement of the conservation easeme			ations, Yes	No
during the year ►	ing, inspecting, and enforcing conservation ease			_
7 Amount of expenses incurred in monitoring, during the year ►	Inspecting, and enforcing conservation easement	s \$ _		_
8 Does each conservation easement reported of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requirements of sec	tion	Yes	No No
9 In Part XIV, describe how the organization repor include, if applicable, the text of the footnote conservation easements	ts conservation easements in its revenue and expens to the organization's financial statements that de	se statement, escribes the	and balance sheet, a organization's accou	nd unting for
Partilla Organizations Maintaining Collection Complete if the organization and	ections of Art, Historical Treasures, or swered 'Yes' to Form 990, Part IV, line 8	Other Sim 3.	nilar Assets	
1a If the organization elected, as permitted under treasures, or other similar assets held for put the text of the footnote to its financial statem	er SFAS 116, not to report in its revenue stateme olic exhibition, education, or research in furtherar ents that describes these items.	ent and balar nce of public	nce sheet works of a service, provide, in	irt, historical Part XIV,
b If the organization elected, as permitted under treasures, or other similar assets held for pul amounts relating to these items:	er SFAS 116, to report in its revenue statement a olic exhibition, education, or research in furtherar	and balance nce of public	sheet works of art, he service, provide the	nistorical following
(i) Revenues included in Form 990, Part VII	, line 1		<b>►</b> \$	
(ii) Assets included in Form 990, Part X			. <b>≻</b> \$	
• •	art, historical treasures, or other similar assets fo 116 relating to these items	or financial g	ain, provide the follo	owing
a Revenues included in Form 990, Part VIII, lin	J		<b>⊳</b> \$	
<b>b</b> Assets included in Form 990, Part X			<b>▶</b> \$	

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. (c) Accumulated (b) Cost or other (d) Book Value Description of investment (a) Cost or other basis (investment) basis (other) Depreciation 1 a Land 739,291 739,291. **b** Buildings 3,708,687 1,149,861 2,558,826. 3,723,933 2,723,881. c Leasehold improvements 6,447,814 **d** Equipment 30,136,203. 16,244,783. 13,891,420. e Other 19,913,418.

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

Schedule **D** (Form 990) 2009

Schedule I	O (Form 990) 2009 MODERN ELECTRIC W.	ATER COMPANY	91-0323430 Page
	Investments-Other Securities See F	orm 990, Part X, line 12.	. N/A
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial	derivatives		
Closely-he	ld equity interests		
Other			
			·
Total. (Colu	mn (b) must equal Form 990 Part X, col (B) line 12.)		\$
	Investments-Program Related (See	Form 990, Part X, line 1.	3) N/A
	(a) Description of investment type	(b) Book value	(c) Method of valuation
		(3) 20011 12:20	Cost or end-of-year market value
			•
-			
	nn (b) must equal Form 990, Part X, Col (B) line 13)		
Part IX	Other Assets (See Form 990, Part X,		
	<b>(a)</b> De	scription	(b) Book value
		<del></del>	
		·	
	lumn (b) must equal Form 990, Part X, col.(B), I		·
Total. (Co	Other Liabilities (See Form 990, Part	X, line 25)	·
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability		
Part X	Other Liabilities (See Form 990, Part	X, line 25)	
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	· • • • • • • • • • • • • • • • • • • •
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	
Part X	Other Liabilities (See Form 990, Part (a) Description of Liability	X, line 25)	
Federal Inc	Other Liabilities (See Form 990, Part  (a) Description of Liability come Taxes	X, line 25)	
Federal Inc	Other Liabilities (See Form 990, Part  (a) Description of Liability come Taxes  on (b) must equal Form 990, Part X, col. (B) line 25)  ▶	X, line 25)  (b) Amount	ncial statements that reports the organization's liabilit

		91-0323430	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII,column (A), line 12)	2	,986,584.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,078,479.
. З	Excess or (deficit) for the year Subtract line 2 from line 1		908,105.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses .		
7	Prior period adjustments		
8	Other (Describe in Part XIV). SEE PART XIV		164,567.
9	Total adjustments (net) Add lines 4 through 8		164,567.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	1	,072,672.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements	1 2	2,986,584.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments 2a	***	
	Donated services and use of facilities 2b		
c	Recoveries of prior year grants		
	Other (Describe in Part XIV).	<b></b>	
	Add lines 2a through 2d.	2e	
	Subtract line 2e from line 1		2,986,584.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1	*,	, , -
	Investments expenses not included on Form 990, Part VIII, line 7b	, , <b>*</b> .	
	O Other (Describe in Part XIV).	<b>─</b> ┤ ',	
	Add lines 4a and 4b	4c	
	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12)		2,986,584.
	t XIIII Reconciliation of Expenses per Audited Financial Statements With Expenses p		
	Total expenses and losses per audited financial statements		,913,912.
	Amounts included on line 1 but not on Form 990, Part IX, line 25		., 5, 20, 522.
	Donated services and use of facilities	4	
	Prior year adjustments.	34.	
	COther losses		
	Other (Describe in Part XIV).	<del></del>	
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1		,913,912.
_	Amounts included on Form 990, Part IX, line 25, but not on line 1:		., 515, 512.
	Investments expenses not included on Form 990, Part VIII, line 7b		
	O Other (Describe in Part XIV) SEE PART XIV 4b 164,56	7   "	
	Add long An and Ab	4c	164,567.
	Total expenses. Add lines <b>3</b> and <b>4c</b> (This must equal Form 990, Part I, line 18.)		2,078,479.
	t XIV   Supplemental Information		.,010,413.
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this mation.	IV, lines 1b and part to provide a	2b; Part V, any additional
	·································		
			<del>-</del>
		·	

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Schedule **D** (Form 990) 2009

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Schedule D (Form 990) 2009 MODERN ELECTRIC WATER COMPANY	91-0323430	Page 5
Schedule D (Form 990) 2009 MODERN ELECTRIC WATER COMPANY  Part XIV Supplemental Information (continued)		
<del></del>		
	<del>-</del>	
		_ <b></b>

#### SCHEDULE J (Form 990)

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.

Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MODERN ELECTRIC WATER COMPANY

Employer identification number

91-0323430

Part	I Questions Regarding Compensation				
				Yes	No
1 a	Check the appropriate box(es) if the organization provided any of VII, Section A, line 1a. Complete Part III to provide any relev	the following to or for a person listed in Form 990, Part vant information regarding these items.	, į	,	
	First-class or charter travel	Housing allowance or residence for personal use			
Ī	Travel for companions	Payments for business use of personal residence			i
Ī	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
Ī	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
•	_		'		
b	f any of the boxes on line 1a are checked, did the organization of all of the expenses described	ion follow a written policy regarding payment or above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing trustees, and the CEO/Executive Director, regarding the item	ng or allowing expenses incurred by all officers, directors, is checked in line 1a?	2		
3	ndicate which, if any, of the following the organization uses CEO/Executive Director. Check all that apply.	to establish the compensation of the organization's			
ſ	Compensation committee	X Written employment contract			
Ì	Independent compensation consultant	X Compensation survey or study	l		
Ì	Form 990 of other organizations	X Approval by the board or compensation committee		٠. ﴿	•
			**		
4	During the year, did any person listed in Form 990, Part VII, or a related organization	Section A, line 1a with respect to the filing organization	ઃ સમૃદ્ધે		·
	Receive a severance payment or change-of-control payment	?	4a		X
b	Participate in, or receive payment from, a supplemental nonc	qualified retirement plan?	4ь		Х
	Participate in, or receive payment from, an equity-based com		4c		Х
	f 'Yes' to any of lines 4a-c, list the persons and provide the	applicable amounts for each item in Part III		,	
	•		٠,	-44	
4	Only section 501(c)(3) and 501(c)(4) organizations must com	nplete lines 5-9.	* .	33	
5	For persons listed in Form 990, Part VII, Section A, line 1a, contingent on the revenues of:	did the organization pay or accrue any compensation	gagar gagar	*	
a ·	The organization?		5 a		
b.	Any related organization?		5 b		
	f 'Yes' to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, contingent on the net earnings of	did the organization pay or accrue any compensation		*	
a ·	The organization?		6a		l
b	Any related organization?	***	6b		
	f 'Yes' to line 6a or 6b, describe in Part III.				
	For person listed in Form 990, Part VII, Section A, line 1a, di described in lines 5 and 6? If 'Yes,' describe in Part III	id the organization provide any non-fixed payments not	7		
	Were any amounts reported in Form 990, Part VII, paid or accontract exception described in Regs. section 53.4958-4(a)(3		8		
1	f 'Yes' to line 8, did the organization also follow the rebuttab section 53 4958-6(c)?		9		

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

Schedule J (Form 990) 2009 MODERN ELECTRIC WATER COMPANY 9266 Moders, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

Page 2

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		Cally cool. The Cally		-		- - - - -	
(A) Name	(i) Base	(ii) Bonus and incentive	(iii) Other	other deferred	benefits	(E) lotat of columns (B)(i)-(D)	reported in prior
	compensation	compensation	reportable compensation	compensation			Form 990-EZ
MIKE BAKER	$(0)_{179,215.}$	0 0			0	179, 215.	
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	<b>(E)</b>						
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	(ii)						
	(0)	             	             		           	         	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!
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							0000 0000
ВАА			TEEA4102L 02/	02/02/10		ocued	Schedule J (Form 990) 2009

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#### SCHEDULE O (Form 990)

#### **Supplemental Information to Form 990**

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
► Attach to Form 990.

Employer identification number Name of the organization 91-0323430 MODERN ELECTRIC WATER COMPANY FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS THE ORGANIZATION MADE MODIFICATIONS TO ITS CONFLICT OF INTEREST POLICY. LANGUAGE WAS ADOPTED STATING THAT BOARD MEMBERS WILL BE FORMALLY ASKED TO DISCLOSE CONFLICTS TWICE PER YEAR IN JANUARY AND JULY. FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAREHOLDE THE PROPERTY OWNERS WITHIN THE SERVICE DISTRICT OF MODERN ELECTRIC WATER COMPANY ARE OWNERSHIP OF THE COMPANY IS VESTED IN THE DEEDS TO THE LEGAL OWNERS OF THE COMPANY. THE PROPERTY. THESE RECORDS ARE THE BASIS FOR THE COMPANY'S ALLOCATION OF SHARES OF COMMON STOCK. FORM 990, PART VI. LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVERNING BODY MEMBERS OF THE BOARD OF DIRECTORS ARE ELECTED TO THREE-YEAR TERMS. THE TERMS ARE STAGGERED SUCH THAT EACH YEAR EITHER ONE OR TWO MEMBERS OF THE BOARD ARE UP FOR THE ELECTION OCCURS AT THE ANNUAL SHAREHOLDER'S MEETING. FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS THE GENERAL MANAGER AND THE COMPTROLLER REVIEWED THE FORM 990 BEFORE FILING. EACH MEMEBER OF THE BOARD WAS PROVIDED A COPY OF FORM 990 BEFORE FILING. FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS TWICE PER YEAR, ALL BOARD MEMBERS ARE FORMALLY ASKED BY THE GENERAL MANAGER TO DISCLOSE ANY CONFLICTS OF INTEREST AT THE BOARD MEETING. ALSO, THE GENERAL MANAGER, THE OPERATIONS MANAGER AND THE COMPTROLLER ARE REQUIRED TO DISCLOSE ANNUALLY, IN WRITING, ANY CONFLICTS OF INTEREST. FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CEO, EXEC. DIR., OR TOP MGTN EACH YEAR, THE BOARD REVIEWS THE NORTHWEST UTILITIES SALARY, WAGE & BENEFIT SURVEY TO DETERMINE THE SALARY OF THE GENERAL MANAGER. DELIBERATIONS OCCUR WHILE THE

GENERAL MANAGER IS EXCUSED FROM THE BOARD MEETING.

Employer identification number

Name of the organization

MODERN ELECTRIC WATER COMPANY   91-0323430
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEES
EACH YEAR, THE BOARD REVIEWS THE NORTHWEST UTILITIES SALARY, WAGE & BENEFIT SURVEY
TO DETERMINE THE SALARIES OF OTHER OFFICERS AND KEY EMPLOYEES. DELIBERATIONS OCCUR
WHILE THE THOSE WHOSE SALARIES ARE BEING DISCUSSED ARE EXCUSED FROM THE BOARD
MEETING.
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE
THE COMPANY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL
STATEMENTS ARE AVAILABLE AT 904 N. PINES, SPOKANE VALLEY, WA 99206, MONDAY THROUGH
FRIDAY, BETWEEN THE HOURS OF 7:30 A.M. AND 4:30 P.M. UPON REQUEST.
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	Employer identification number
MODERN ELECTRIC WATER COMPANY	91-0323430
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Schedule **O** (Form 990) 2009

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2009

## SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATION PAGE 6

MODERN ELECTRIC WATER COMPANY

91-0323430

SCHEDULE D, PART XI, LINE 8
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

BOOK TO TAX DEPRECIATION ADJUSTMENT

TOTAL \$ 164,567.

SCHEDULE D, PART XIII, LINE 4B OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

TAX DEPRECIATION OVER BOOK .

TOTAL \$ 164,567. \$ 164,567.