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Department of the Treasury Internal Revenue Service

SCANNED MAY 1 0 2012

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

Open to Public Inspection

(except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

Α	For the	2011 calend	dar year, or tax year beginning , 2011, and ending		_	,		
В	Check if a	pplicable	C Name of organization IRELAND WATER UTILITIES, INC		D Employ	er Identifi	cation Number	
	Addre	ess change	Doing Business As	i	35-	11363	71	
	Name	e change	Number and street (or P O box if mail is not delivered to street addr) Room/su	nte [E Telepho	ne numbe	г	
	Initia	I return	P. O. BOX 83		(81)	2) 48	2-2015	
	=	unated	City, town or country State ZIP code + 4		,,,,,,,	-,		
	H	nded return	IRELAND IN 47545	، ا	G Gross r	eceints S	549,964.	
	\vdash	ication pending		······································				X No
	Ш уррп	ication penuing	and a second of processing the second of the	H(b) Are all at	•		Yes	A No
	Tay ov	empt status		If 'No,' at	ttach a list	(see instri	uctions)	
<u> </u>								
<u>J</u>	Webs			(c) Group ex				
K		forganization	X Corporation Trust Association Other ► L Year of Formation	on 1967	MIS	tate of leg	al domicile IN	
Pa	ırt I	Summar						
			De the organization's mission or most significant activities TO PROVIDE DRI	INKABLE WA	TER TO T	HE ORGA	NIZATION MEMBI	ERSHIP
e] _1	O PROVI	DE FIRE PROTECTION FOR THE SURROUNDING AREA					· – – –
пап	-	- -						
Ver	2 -	heck this bo						· — — —
Governance			x \(\sum_{\text{long}} \) If the organization discontinued its operations or disposed of more ting members of the governing body (Part VI, line 1a)	tnan 25%	or its ne	assets	5	۵
∞ 5			dependent voting members of the governing body (Part VI, line 1b)			4		
Ę.	1		of individuals employed in calendar year 2011 (Part V, line 2a)			5		9 9 2 0
Activities &			of volunteers (estimate if necessary)			6		0
ĕ	7a T	otal unrelate	ed business revenue from Part VIII, column (C), line 12			7 a		0.
	b N	let unrelated	business taxable income from Form 990-1, fine 34			7 b		
			RECEIVED	Pri	ior Year		Current Yea	ar
ø.	1		and grants (Part VIII line 1h)		1,0	98.	1,	510.
Revenue	9 P	rogram serv	come (Part VIII, line 2g) (Come (Part VIII, column (A), lines 3, 4, and d) (Come (Part VIII, column (A), lines 5, 6d, 8c, 9e, 10c, and 11e)					
eve	10 Ir	nvestment in	icome (Part VIII, column (A), lines 3, 4, and d) MAY 0 7 2012			55.		547.
Œ	11 C	other revenu			128,5		170,	
			e – add lines 8 through 11 (must equal Part VIII, Column A) Jine 12)		137,4	87.	178,	
			milar amounts paid (Part IX, column (A), lines 1-3)		_			<u>30.</u>
	1	Benefits paid						
ø	15 S	alaries, othe	32,2	245.	44,	<u>141.</u>		
nse	16a P	rofessional	fundraising fees (Part IX, column (A), line 11e)					
Expenses	b T	otal fundrais	sing expenses (Part IX, column (D), line 25) ▶					
Ω	17 C	ther expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)		98,0	33.	97.	334.
	18 ⊤	otal expense	es Add lines 13-17 (must equal Part IX, column (A), line 25)		130,2		141,	
	i		expenses Subtract line 18 from line 12			209.		093.
8 8	 			Beginning			End of Yea	
Net Assets Fund Balanc	20 T	otal assets	(Part X, line 16)		153,4		2,230,	085.
A B	21 T	otal liabilitie	s (Part X, line 26)			23.		434.
25	22 N	let assets or	fund balances Subtract line 21 from line 20	2,	149,7	63.	2,225,	651.
Pa	art II	Signatu		•				
Und	er penaltie		celare that I have examined this return, including accompanying schedules and statements, and to the receiver of the result of t	ne best of my	knowledge	and belief	it is true, correct.	and
com	plete Dec	laration of prepa	grer (other than officer) is based on all information of which preparer has any knowledge	,				
			nnett d sknows Secrets - Trionne		5-3	-12	_	
Sig	gn	Signati	ure of officer	Date	•			
He	re	TE	VNETH L. SchNAUS SECRETARY - TREASURE					
		Type o	print name and title					
		Print/Type (preparer's name Prepaler's August 10 Date	(Check	ıf P	TIN	
Pa	id	DAVID	A BROMM CPA 05/01/	12	self-employ	ed P	00801811	
Pr	eparer						<u>==</u>	
Us	e Only	Firm's addr			Firm s EIN	► 27-	4269931	
			JASPER IN 47546		Phone no	(812		
Ma	y the IR	S discuss th	is return with the preparer shown above? (see instructions)				X Yes	No
			A A B A B A B A B A B A B A B A B A B A	A0101 07/0	5/11		Form 990	
		-	•	20				__\/

			Contract A			33	-11303	/ 1		aye z
Par		•	Service Accom	•						
	_ Check if Sch	nedule O contair	ns a response to any	question in this Part I	<u> </u>					
1	Briefly describe the	organization's i	mission							
	TO PROVIDE I	DRINKABLE	WATER TO THE	ORGANIZATION	MEMBERS	HIP				
				E SURROUNDING		-				
		11.01	1011011 1011 111	P DOWNOONDING						
					-					
						· · · · · · · · · · · · · · · · · · ·				
2	Did the organization	n undertake any	significant program	services during the ye	ear which wer	e not listed on the prid	or			
	Form 990 or 990-E	Zγ						Yes	X	No
	If 'Yes,' describe th	ese new service	s on Schedule O						_	
3				ant changes in how it	conducts an	v nrogram corvicac?		Yes	X	No
•	-		•	ant changes in now it	conducts, an	y program services	Ш	163	[A]	NO
_	If 'Yes,' describe th	_								
4	Describe the organi	zation's program	n service accomplish	ments for each of its	three largest	program services, as report the amount of	measured	by exp	enses	5
	others the total exi	na 501(c)(4) org	ganizations and secti entie if any for each	on 4947(a)(1) trusts a 1 program service rep	ire requirea to orted	o report the amount of	grants ar	id alloc	ations	το
	outlose, and total ox	J011303, 4114 101	cride, ii driy, for eder	r program service rep	ortea					
				_						
4 a	(Code) (Expenses \$		_ including grants of	\$) (Revenu	e \$)
	N/A									
		-								
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4 b	(Code) (Expenses \$		_ including grants of	\$) (Revenu	e \$)
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40	(Code.) (Expenses \$	·	_ including grants of	\$) (Revenu	e \$)
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40	Other program serv	vices (Describe	ın Schedule O)							
40	Other program serv (Expenses \$	vices (Describe	ın Schedule O)	nts of \$) (Revenue \$)	

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		x
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	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	3		Х
4	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		
5	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 Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	<u>-</u>	
6	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 Schedule D, Part I	6_		_X_
7	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	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	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 Schedule D, Part IV	9		_x_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
ā	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
t	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	11 b		х
C	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	11 c		х
•	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 Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
f	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	11 f		х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	Х
	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 at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	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, Parts II and IV	15		х
16	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, Parts III and IV	16		х
17	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 (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	_	Х
	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
	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		х
!	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2011) IRELAND WATER UTILITIES, INC

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	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		x
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		Х
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	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		x
ŧ	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		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
Ł	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		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	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 (or a family member thereof) 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	contributions? If 'Yes,' complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	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	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35 a		Х
ı	b 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		х
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? Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Forn	n 990	(2011)

Part V | Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 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? 2ъ Х Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3 b 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)? 4a Х **b** If 'Yes,' enter the name of the foreign country See instructions for 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 at any time during the tax year? 5 a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 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? X 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible 6 b Organizations that may receive deductible contributions under section 170(c). 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? 7 a Х b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Form 8282 d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 <u>g</u> as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter. a Gross income from members or shareholders 11 a 541,781 b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 8,183 12a 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 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. 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 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a Х

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

Form 990 (2011) IRELAND WATER UTILITIES, INC 35-1136371 Page 6 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 9 1a Enter the number of voting members of the governing body at the end of the tax year 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 9 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 7a 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? 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. a The governing body? 8a Х 8ь Х **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director or 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 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10 a Did the organization have local chapters, branches, or affiliates? Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х b Describe in 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 12 a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 X 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? a The organization's CEO, Executive Director, or top management official 15 a 15b b Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.) **16 a** Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16 a b 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16_b 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 114 W 4TH STREET JASPER IN 47546 (812) 482-4363

Page 7

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

Check if Schedule O contains a response to any question 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 year
- 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 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 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 neither the organization nor any related organization compensated any current officer, director, or trustee										
 		(C)								
(A) Name and title	(B) Average hours per week	unles	s per	ck mo	s both	an one i n an offi ustee)	box, cer	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	adividi al frasse or director	mshhulromel frustee	Offi er	key emphyee	Highest connected employee	FUNDEL	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) ANDY HULSMAN			1							
DIRECTOR	1.00	Х						910.	0.	0.
(2) ERIC KNIES DIRECTOR	1.00	x						980.	0.	0.
(3) KEN SCHNAUS								2001		
DIRECTOR	1.00	Х	1					980.	0.	0.
(4) RANDY MEHRINGER									0.	
DIRECTOR (5) STAN SCHNAUS	1.00	_X	┢	_		-		910.	0.	0.
DIRECTOR	1.00	х						980.	0.	0.
(6) EARL HULSMAN										
DIRECTOR	1.00	X						980.	0.	0.
_(7)_MATT_BUELTEL DIRECTOR	1.00	x						840.	0.	0.
(8) RON SCHROEDER	2.00							0.101	<u> </u>	
DIRECTOR	2.00	Х						1,960.	0.	0.
(9)_ TOM_ ERNY	1.00	v						980.	0.	0
(10) JERRY SANDER	1.00							960.		0.
HIGHEST COMPENSATED EMPLOYEE	25.00					х		18,156.	0.	0.
(11) SUE SCHROEDER	05.00							10.606		
KEY EMPLOYEE	25.00		-		Х			12,696.	0.	0.
<u>(12)</u>						ļ				
<u>(13)</u>										
(14)										

(A) Name and title		(do box,	not ci	Pos heck ss pe	osition ck more than one person is both an a director/trustee)			(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (describ e hours for related organi- zations in Sch O)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)										
(16)										
(17)										
<u>(18)</u>	İ									
<u>(19)</u>			•					-		
<u>(20)</u>										
(21)										
(22)								ı		
(23)										
(24)										
(25)										
1 b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	4	<u> </u>	-	,	•	, ,	A A	40,372.	0.	0.
Total number of individuals (including but not limited from the organization	l to tho	se lis	ted	abo	ve)	who	rece	•	100,000 of reportab	
 3 Did the organization list any former officer, director on line 1a? If "Yes," complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of repthe organization and related organizations greater the 	dıvıdua	1	•	·	•		•	·		Yes No
such individual										4 X
 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,' consection B. Independent Contractors 	omplet	e Scl	hedu	ile J	for	such	per	rson		5 X
Complete this table for your five highest compensate compensation from the organization. Report compensation.	ed inde	pend for t	ent	cont	tract	ors t	hat	received more tha	in \$100,000 of	tax vear
(A) Name and business addres						<i>)</i> • • • •		(B Description)	(C) Compensation
			_							
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►	but not	lımıt	ed t	o the	ose	listed	d ab	ove) who received	I more than	

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
9,0	1a Federated campaigns 1a			70707100		0.2,0,0,0,0,0
ANT	b Membership dues 1 b	1,510.				
F,G	c Fundraising events 1 c					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	d Related organizations 1 d					
	e Government grants (contributions) 1 e					
IBUTION THER S	f All other contributions, gifts, grants, and similar amounts not included above 1 f					
F S	g Noncash contributions included in Ins 1a-1f \$					
용론	h Total. Add lines 1a-1f	•	1,510.			
PROGRAM SERVICE REVENUE		Business Code				
E G	2a					
ᇎ	b					
Ž	·					
A SE	d					
ξ.	6					
စ္တ	f All other program service revenue g Total. Add lines 2a-2f	>				
┪						
	3 Investment income (including dividends, in other similar amounts)	terest and	6,547.	6,547.	0.	0.
	4 Income from investment of tax-exempt bon	nd proceeds	•	·		
	5 Royalties	▶				
	(ı) Real	(II) Personal				
	6a Gross rents 1,200.					
	b Less rental expenses		•			
	c Rental income or (loss) 1,200.				_	_
	d Net rental income or (loss)	•	1,200.	1,200.	0.	0.
	7 a Gross amount from sales of assets other than inventory	(ii) Other				
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)	>				
NUE	8a Gross income from fundraising events (not including \$	·				
OTHER REVE	of contributions reported on line 1c).					
ER	See Part IV, line 18					
OH	b Less direct expenses b					
	c Net income or (loss) from fundraising even	nts -				
	9a Gross income from gaming activities See Part IV, line 19					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities	\$				
	10a Gross sales of inventory, less returns and allowances a	540,271.				
	b Less cost of goods sold b	371,366.	1.60 005		_	_
	c Net income or (loss) from sales of inventor Miscellaneous Revenue	Business Code	168,905.	168,905.	0.	0.
	11.	DUSINESS CODE				}
	''a					
	c			-	 	
	d All other revenue		436.	436.	0.	0.
	e Total. Add lines 11a-11d	>	436.			<u> </u>
	12 Total revenue. See instructions	<u> </u>	178,598.	177,088.	0.	0.

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 columns (B), (C), and (D)

	Check if Schedule O contains a response to any question in this Part IX									
Do 1 6b, .	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					
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	30.								
2	Grants and other assistance to individuals in the United States See Part IV, line 22									
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16									
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	9,520.								
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	30,852.								
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes	3,769.								
11										
a	Management									
	b Legal	-			***					
	Accounting	2,600.		1						
	Lobbying	2,000.								
	e Professional fundraising services See Part IV, line 17									
	·									
	Investment management fees									
	Other		· · · · · · · · · · · · · · · · · · ·							
	Advertising and promotion				· · · · · · · · · · · · · · · · · · ·					
13	Office expenses	6,242.								
14	Information technology									
15	Royalties									
16	Occupancy	5,640.								
17	Travel	5,400.								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
	Conferences, conventions, and meetings									
	Interest	-								
21	Payments to affiliates	06.000		 						
22	' ' '	26,829.	· · · · · · · · · · · · · · · · · · ·	<u> </u>						
	Insurance	6,298.								
24	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 BILLING FEES	10,607.								
	b POSTAGE	2,016.								
	c DUES & SUBSCRIPTIONS	1,634.		<u> </u>						
	d WATER SAMPLES	1,140.								
	e All other expenses	28,928.		 						
	Total functional expenses Add lines 1 through 24e	141,505.		 						
26	,	141,303.		+						
∠ 0	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	<u> </u>					

Pa	IT A	Balance Sneet				<u></u>
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		295,484.	1	288,999.
	2	Savings and temporary cash investments		282,141.	2	287,714.
	3	Pledges and grants receivable, net	ĺ		3	
	4	Accounts receivable, net		41,218.	4	54,948.
	5	Receivables from current and former officers, directors and highest compensated employees. Complete Part			5	
	6	Receivables from other disqualified persons (as define persons described in section 4958(c)(3)(B), and contrisponsoring organizations of section 501(c)(9) voluntar organizations (see instructions)	buting employers and		6	
A S	7	Notes and loans receivable, net			7	
A S S E T S	8	Inventories for sale or use	İ		8	
Š	9	Prepaid expenses and deferred charges			9	
	10-					
	iva	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 2,071,527.			
	Ь	Less accumulated depreciation	10b 473, 103.	1,534,643.	10 c	1,598,424.
	11	Investments – publicly traded securities			11	
	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	ŀ		15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)	2,153,486.	16	2,230,085.
	17	Accounts payable and accrued expenses		3,723.	17	4,434.
	18	Grants payable			18	
	19	Deferred revenue			19	
Ļ	20	Tax-exempt bond liabilities		20		
Å	21	Escrow or custodial account liability. Complete Part I	V of Schedule D		21	
B L I T	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per of Schedule L	stees, key employees, sons Complete Part II		22	
į	23	Secured mortgages and notes payable to unrelated th	ird parties		23	
Š	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	s to related third parties, plete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		3,723.	26	4,434.
N E T		Organizations that follow SFAS 117, check here ►	and complete lines			
Ť		27 through 29 and lines 33 and 34.				
Ş	27	Unrestricted net assets			27	
KNOEI-N	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets		29	<u> </u>	
Q R		Organizations that do not follow SFAS 117, check he	re ► X and complete			
POZD	1	lines 30 through 34.				
D	30	Capital stock or trust principal, or current funds			30_	
B	31	Paid-in or capital surplus, or land, building, or equipm	nent fund	1,391,355.	31	1,430,150.
	32	Retained earnings, endowment, accumulated income,	or other funds	758,408.	32	795,501.
LANCES	33	Total net assets or fund balances		2,149,763.	33	2,225,651.
<u>\$</u>	34	Total liabilities and net assets/fund balances		2,153,486.	34	2,230,085.
BA	Α					Form 990 (2011)

Form 990 (2011)

Form 990 (2011) IRELAND WATER UTILITIES, INC	35-1136371		_Pag	ge 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part XI				X
1 Total revenue (must equal Part VIII, column (A), line 12)	1		8 <u>,5</u>	
2 Total expenses (must equal Part IX, column (A), line 25)	2		1,5	
3 Revenue less expenses. Subtract line 2 from line 1	3		7,0	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,14	9,7	<u>63.</u>
5 Other changes in net assets or fund balances (explain in Schedule O)	5	3	8,7	<u>95.</u>
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33 column (B))	6	2,22	5,6	51.
Part XII Financial Statements and Reporting		•		
Check if Schedule O contains a response to any question in this Part XII				\Box
			/es	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other			İ	
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	?	2a	х	
b Were the organization's financial statements audited by an independent accountant?		2 b		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for o review, or compilation of its financial statements and selection of an independent accountant?	versight of the audit,	2c	х	
If the organization changed either its oversight process or selection process during the tax year, ε in Schedule O.	explain			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the yes separate basis, consolidated basis, or both	ar were 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 Audit Act and OMB Circular A-133?	forth in the Single	3a		X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not under or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ergo the required audit	3 b		
BAA		Form 9	990 (2	2011)

TEEA0112 07/06/11

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions. OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

Department of the Treasury Internal Revenue Service

IRELAND WATER UTILITIES, 35-1136371 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ► Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, Yes No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 **►**\$ b Assets included in Form 990, Part X ▶\$

Conedule D (Form 990) 2011 IRELA				35-113 Other Cimilar Ass		4	Page 2			
Part III Organizations Mainta	ining Collect	ions of Art, Histo	rical Treasures, or	Other Similar Ass	ets (Co	วทเทน	ea)			
3 Using the organization's acquisition items (check all that apply)	on, accession, a			nat are a significant use	of its c	ollection	1			
a Public exhibition			or exchange programs							
b Scholarly research		e U Other								
c Preservation for future general	ations									
4 Provide a description of the organ Part XIV.	nization's collect	ons and explain how	they further the organiza	ation's exempt purpose	ın					
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or rec ather than to be	eive donations of art, maintained as part of	historical treasures, or the organization's collection	other similar ction?	Yes		No			
Part IV Escrow and Custodia line 9, or reported an				swered 'Yes' to For	m 990	, Part	IV,			
1 a Is the organization an agent, trus				assets not						
included on Form 990, Part X?					Yes	L	No			
b If 'Yes,' explain the arrangement	in Part XIV and	complete the following	g table							
					Amount	<u> </u>				
c Beginning balance				1c						
d Additions during the year				1 d						
e Distributions during the year										
f Ending balance		200 5 1 7 1 212		[1f]	—		7			
2a Did the organization include an ai		990, Part X, line 217			Yes	L	No			
Part V Endowment Funds. Co		organization and	wared 'Ves' to For	m 990 Part IV line	10					
rait v Lindowillent runus.	(a) Current ye					our years	hack			
1 a Beginning of year balance	(a) current ye	(b) Filor year	(c) Two years back	(u) Three years back	(6)	our years	Dack			
b Contributions					-					
		+			1					
c Net investment earnings, gains, and losses										
d Grants or scholarships										
 Other expenditures for facilities and programs 	·									
f Administrative expenses										
g End of year balance	<u></u>									
2 Provide the estimated percentage	•	ear end balance (line	1g, column (a)) held as	i						
a Board designated or quasi-endow	-	₹								
b Permanent endowment ►	8	_								
c Temporarily restricted endowmen		%								
The percentages in lines 2a, 2b,	and 2c should e	qual 100%.								
3a Are there endowment funds not in organization by	n the possession	of the organization th	nat are held and adminis	stered for the	ſ	Yes	No			
(i) unrelated organizations					3a(i)					
(ii) related organizations					3a(ii)					
b If 'Yes' to 3a(II), are the related of	rganizations list	ed as required on Sch	nedule R?		3b					
4 Describe in Part XIV the intended	duses of the org	anization's endowmer	nt funds							
Part VI Land, Buildings, and	Equipment.	See Form 990, Pa	art X, line 10.							
Description of property	(6	i) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	lue			
1 a Land			637.				637.			
b Buildings			7,200.	2,753.		4	447.			
c Leasehold improvements										
d Equipment			2,063,690.	470,350.	1	,593,	340.			
e Other										
Total. Add lines 1a through 1e. (Colum	nn (d) must equa	l Form 990, Part X, co	olumn (B), line 10(c))	•	1	,598,	424.			
BAA				Sched	dule D (l	orm 99	0) 2011			

2 FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

⁽⁷⁾ (8) (9) (10) (11)Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

Sche	edule D (Form 990) 2011 IRELAND WATER UTILITIES, INC	35-1136371	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)		_
3	Excess or (deficit) for the year Subtract line 2 from line 1		
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)		
9	Total adjustments (net). Add lines 4 through 8		-
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
$\overline{}$	t XII Reconciliation of Revenue per Audited Financial Statements With Reven	ue per Return	
	Total revenue, gains, and other support per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	a Net unrealized gains on investments	}	
	Donated services and use of facilities 2b		
	Recoveries of prior year grants		
	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	
3	1 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	a Investment expenses not included on Form 990, Part VIII, line 7b O Other (Describe in Part XIV)	 	
	Add lines 4a and 4b	4c)	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		
	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expe		
	Total expenses and losses per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	a Donated services and use of facilities		
	b Prior year adjustments	<u> </u>	
	c Other losses 2c		
	d Other (Describe in Part XIV)		
(e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV.) 4b		
	b Other (Describe in Part XIV) c Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	
	rt XIV Supplemental Information		
Com	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4 V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also additional information	1, Part IV, lines 1b and 2b, complete this part to provide	e
			- -

Schedule D (Form 990) 2011	IRELAND WATER UTILITIE	ES, INC	35-1136371	Page 5
Part XIV Supplementa	IRELAND WATER UTILITIE Information (continued)			
-		·		
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SCHEDULÈ O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization Employer identification number 35-1136371 IRELAND WATER UTILITIES, INC IN ORDER TO PURCHASE WATER YOU MUST BE A MEMBER Pt_VI, Line 7a MEMBERS VOTE ON THE GOVERNING BODY Pt_VI, Line_7b_ _ALL_MAJOR DECISIONS MUST BE APPROVED BY THE MEMBERS Pt VI, Line 11a THE BOARD OF DIRECTOR'S REVIEW AND APPROVE THIS 990 MONEY CONTRIBUTED BY MEMBERS FOR CONSTRUCTION OF SYSTEM

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
REPAIR & MAINTENANCE MISCELLANEOUS	28,868.			