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DLN: 93493214012067

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.IRS qov/foim990

OMB No 1545-0047

Open to Public Inspection

A F	or the 2	015 ca	lendar year, or tax year beg	inning 10-01-2015 , and ending 09	-30-2016				
_	eck if app		C Name of organization WEB Water Development Asso	ciation Inc			D Emplo	yer i	dentification number
_	idress cha ame chan	-					46-0	3520	27
_	ıtıal returi	-	Doing business as						
Fi	nal /terminate	ad	Number and street (or P O bo	x if mail is not delivered to street address)	Room/suite	!	E Teleph	one ni	umber
	nended re		PO Box 51				(605)	229	-4749
Ар	plication p	pending	City or town, state or province Aberdeen, SD 574020051	, country, and ZIP or foreign postal code			G Gross	receip	ts \$ 10,621,575
			F Name and address of pr	incipal officer		H(a) I	s this a group	retu	rn for
			Angie Hammrich PO Box 51			s	ubordinates?		☐ Yes 🗸
			Aberdeen, SD 57402005	1			No vre all subord	ınate	S Evan Ena
Та	x-exempt	status	501(c)(3) 3 501(c) (12) ◀ (insert no)	527		ncluded?		l les l Mo
W	ebsite:	▶ wwv	v webwater org				Group exemp		st (see instructions) number ►
€ For	m of orga	nızatıon	✓ Corporation	ssociation Other ►		L Year	of formation 19	979	M State of legal domicile SD
Pa	rt I	Sum	mary						
a)	The		ızatıon was ıncorporated for	sion or most significant activities the purpose of operating a system f	or the dis	tributio	n of water to	ıts m	embers for domestic and
₹ 2									
Ě									
Governance	2 Ch	eck th	is box ▶ ☐ if the organizati	on discontinued its operations or dis	posed of	more th	nan 25% of its	s net	assets
	3 Nu	ımber d	of voting members of the gov	verning body (Part VI, line 1a) .				3	9
Activities &			_	ers of the governing body (Part VI, I				4	9
Ę	5 To	tal nun	nber of individuals employed	d ın calendar year 2015 (Part V , lıne	2a) .			5	48
₹	6 To	tal nun	nber of volunteers (estimate	e if necessary)				6	0
				m Part VIII, column (C), line 12 .				7a	11,505
	b Net	unrela	ted business taxable incom	e from Form 990-T, line 34				7b	9,119
							Prior Year		Current Year
<u>Qı</u>		Contributions and grants (Part VIII, line 1h)						0 7 7	0 10,365,775
Ravenua		_	im service revenue (Part VI iment income (Part VIII, co	10,017,		249,296			
Ę.			· · · · · · · · · · · · · · · · · · ·	(A), lines 5, 6d, 8c, 9c, 10c, and 11				,550	2,723
	12		•	h 11 (must equal Part VIII, column	•		10,251,		10,617,794
			and similar amounts paid (Part IX, column (A), lines 1-3).			2.	,500	2,604
			•	art IX, column (A), line 4)				0	0
82	15		es, other compensation, em	ployee benefits (Part IX, column (A)			2,490,	,547	2,563,176
Expenses	16a	,		t IX, column (A), line 11e)				0	0
8	b	Total fu	ndraising expenses (Part IX, colun	nn (D), line 25) ▶ <u>0</u>					
ш	17	Other	expenses (Part IX, column	(A), lines 11a-11d, 11f-24e)			6,074,	,318	6,082,552
			•	(must equal Part IX, column (A), lin	•		8,567,	,365	8,648,332
(5)	19	Reven	ue less expenses Subtract	line 18 from line 12			1,684,	,346	1,969,462
Net Assets or Fund Balances						Beginn	ing of Current	Year	End of Year
ssel 3ala	20	Totala	assets (Part X, line 16) .				124,125,	,979	122,201,461
Z Z	21	Totall	iabilities (Part X, line 26)				31,905,	,596	29,907,188
žŢ	22	Net as	sets or fund balances Subt	ract line 21 from line 20			92,220,	,383	92,294,273
Jnde ny k	r penalt nowledg	ies of p		e examined this return, including acc complete Declaration of preparer (
		****	* *				2017-07-24		
Sigr	,	Signa	ture of officer				Date		
Her			Hammrich General Manager						
		<u> </u>	or print name and title	I December 1	1.		Г	D	
n-:-	J		nnt/Type preparer's name Ielissa White CPA	Preparer's signature Melissa White CPA	Dat 201	e .7-07-21	Check I if	PTIN POO	√ 851284
Paid		F	ırm's name ► EIDE BAILLY LLP				self-employed Fırm's EIN ▶ 4	1 5-025	0958
	parer		ırm's address ► 24 2ND AVE SW				Phone no (60!		
J S E	Only		ABERDEEN, SD 5	74014115					

. √Yes No

Par	t IV Checklist of Required Schedules			
			Yes	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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	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	11b		No
	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		No
	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 2	11 d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12 a		No
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 and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
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		No
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		No
19	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		No
20a		20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20h		

	990 (2015)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than $$5,000$ of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1^7 If "Yes," complete Schedule I, Paits I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Pait I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? <i>If "Yes," complete Schedule L, Part IV</i>	28 c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements	Regarding	Other	IRS Filing	s and T	ax Com	pliance

Par	t V	Statements Regarding Other IRS Filings and Tax Compliance					_
		Check if Schedule O contains a response or note to any line in this I	Part	v		Yes	No No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	19		163	110
		the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
		e organization comply with backup withholding rules for reportable payments to					
_		g (gambling) winnings to prize winners?		· · · · · ·	1 c	Yes	
2a		the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered s return	2a	48			
ь	,	east one is reported on line 2a, did the organization file all required federal emp			2b	Yes	
		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file					
3а	Did th	e organization have unrelated business gross income of \$1,000 or more during	g the y	/ear?	3a	Yes	
b	If "Ye	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanatio</i>	on in S	ichedule O	3b	Yes	
4a		y time during the calendar year, did the organization have an interest in, or a sig a financial account in a foreign country (such as a bank account, securities acc					
		int)?	.ounc,	or other imanetal	4a		No
b	If"Ye	s," enter the name of the foreign country					
	See in	structions for filing requirements for FinCEN Form 114, Report of Foreign Bank	and I	Inancial Accounts			
_	(FBAF						
		he organization a party to a prohibited tax shelter transaction at any time durin	-	•	5a		No_
		ny taxable party notify the organization that it was or is a party to a prohibited t	ax sn	enter transaction?	5b		No
C	If"Ye	s," to line 5a or 5b, did the organization file Form 8886-T?	• •		5c		
6a	Does	the organization have annual gross receipts that are normally greater than \$10	00,00	0 , and did the	6a		N o
	organ	ization solicit any contributions that were not tax deductible as charitable conti	ributio	ons?			
b		s," did the organization include with every solicitation an express statement th not tax deductible?	at suc	ch contributions or gifts	6b		
7		izations that may receive deductible contributions under section 170(c).					-
	_	e organization receive a payment in excess of \$75 made partly as a contribution	on and	d partly for goods and	7a		
		es provided to the payor?					
		s," did the organization notify the donor of the value of the goods or services pr			7b		
С		e organization sell, exchange, or otherwise dispose of tangible personal proper orm 8282?		which it was required to	7 c		
d		s," indicate the number of Forms 8282 filed during the year	7d				
	5 . 4.0			- L b 6 b t + 2			
е	Dia th	e organization receive any funds, directly or indirectly, to pay premiums on a po	erson	ar benefit contract?	7e		
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	nal be	enefit contract?	7 f		
g		organization received a contribution of qualified intellectual property, did the or	rganız	ation file Form 8899 as	7-		
h	requir	ear organization received a contribution of cars, boats, airplanes, or other vehicles	 . did t	the organization file a	/g		
		1098-C?	•	· · · · · ·	7h		
8		oring organizations maintaining donor advised funds.					
		donor advised fund maintained by the sponsoring organization have excess bus ; the year?		· · · · ·	8		
9a	Did th	e sponsoring organization make any taxable distributions under section 4966?			9a		
		e sponsoring organization make a distribution to a donor, donor advisor, or rela		erson ⁷	9b		
.0	Section	on 501(c)(7) organizations. Enter					
а	Initiat	tion fees and capital contributions included on Part VIII, line 12	10a				
b		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
.1	faciliti Sectio	nes on 501(c)(12) organizations. Enter					
		Income from members or shareholders	11a	10,364,901			
		income from other sources (Do not net amounts due or paid to other sources					
	agains	st amounts due or received from them)..........[11b	75,387			
.2a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990.	ın lıe	u of Form 1041?	12 a		
b		s," enter the amount of tax-exempt interest received or accrued during the	12b				
.3	year Section	on 501(c)(29) qualified nonprofit health insurance issuers.	140				
	Jectil	(-)(->) quainted nonprofit ficulti filodicines isouels.					
а		organization licensed to issue qualified health plans in more than one state? No	ote. S	ee the instructions for	.		
h		onal information the organization must report on Schedule O	ı		13a		
ט		the amount of reserves the organization is required to maintain by the states chithe organization is licensed to issue qualified health plans	13b				
c	Enter	the amount of reserves on hand	13c				
.4a	Dıd th	e organization receive any payments for indoor tanning services during the tax	year	·	14a		No
b	If"Ye	s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i> t	tion in	Schedule O	14b		

Part VI Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

	Check if Schedule O contains a response or note to any line in this Part VI			🗸
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9			
	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			
Ь	Enter the number of voting members included in line 1a, above, who are independent 1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
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?	7a 7b	Yes Yes	
	or persons other than the governing body?	/6	165	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8 b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal F	evenu	ie Code	≘.)
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10 a		No
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?	10b		
L1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12 a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	-
L3	Did the organization have a written whistleblower policy?	13		No
.4	Did the organization have a written document retention and destruction policy?	14		No
L 5	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		No
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 take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16 b		
	ction C. Disclosure			
L 7	List the States with which a copy of this Form 990 is required to be filed▶			
.8	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website			
L9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and record Angie Hammrich 38456 US Highway 12 PO Box 51 Aberdeen, SD 574020051 (605) 229-4749	S		

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 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not bo: h ar	chec x, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) Mike Neuharth Chairman	2 00	×		×				7,400	0	C	
(2) Daryl Thompson Vice Chairman	2 00	×		×				4,250	0	C	
(3) Arnie Goldade Treasurer	2 00	×		×				7,150	0	C	
(4) Scott Campbell Oct-Dec Secretary	2 00	×		×				0	0	C	
(5) David Sigdestad Director/Secretary	2 00	×		х				4,050	0	C	
(6) Bob Schuetzle Director	2 00	x						3,650	0	C	
(7) Evan Haar Director	2 00	×						4,050	0	C	
(8) Les Hınds Dırector	2 00	x						3,150	0	C	
(9) Harold Loewen Director	2 00	×						3,750	0	C	
(10) Tim Van Hatten Director	2 00	×						3,850	0	C	
(11) Angie Hammerich Business Manager	40 00			х				82,750	0	10,334	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	more t	:han o on is	one l both	oox, an d	heck unless officer stee)		(D) Reporta compens from ti organizatio	ible ation he on (W-	(E) Reportable compensation from related organizations (V	/-	(F) Estima amount o compens from	ated If other Sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-N		2/1099-MISC		rganizat relat organiza	ed
1b	Sub-Total		<u> </u>	<u> </u>		<u> </u>	. ▶					\perp		
c d	Total from continuation sheet Total (add lines 1b and 1c) .	s to Part VII, S	ection A				. •		124,0	250	0			10,334
2	Total number of individuals (in \$100,000 of reportable compa	icluding but not	lımıted	to the				e) w	·			<u> </u>		
													Yes	No
3	Did the organization list any f oon line 1a? <i>If "Yes," complete S</i>								, or highest o	ompen	sated employee	3		No
4	For any individual listed on lin organization and related organ													
5	Individual									• • nızatıon	or individual for	4		No
	services rendered to the organ	nızatıon? <i>If "Yes,</i>	" comple	ete Sc	hedu	ıle J	for suc	th pe	erson			5		No
Se	ection B. Independent Co													
1	Complete this table for your five compensation from the organization	zation Report co									thin the organizat			
		(A) Name and business	address							Des	(B) cription of services		Compe	
	a Directional LLC								In	stallation	contractor			683,198
	13th Ave eld, SD 57469											_		
									+			\dashv		
	Total number of independent co \$100,000 of compensation fror			not	lımıt	ed to	thos	e list	ed above) w	ho rece	ived more than			

Part V	/++1	Statement of Revenue										
		Check if Schedi	ule O contains a respo	nse or note to any lir		,		<u> </u>				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514				
s &	1a	Federated cam	paigns 1a									
ributions, Gifts, Grants Other Similar Amounts	ь	Membership du	es 1b									
	С	Fundraising eve	ents 1c									
ffs.	d	Related organiz	zations 1d									
i, ii	e	Government grant										
Sir	f	_	ons, gifts, grants, and 1f									
uti her	•	similar amounts no										
	g	Noncash contributi 1a-1f \$	ons included in lines									
Conj	h	Total. Add lines	s 1a-1f									
				Business Code								
ž.	2a	Water Sales to Me	mbers	221310	10,070,086	10,070,086						
Program Service Revenue	ь	Other Operating Re	evenue	221310	257,877	257,877						
ر د	С	Miscellaneous		900099	37,812	37,812						
ξ	d											
8	е											
ogra	f	All other progra	am service revenue									
Ĕ	g	Total. Add lines	s 2a-2f		10,365,775							
	3		ome (including dividen		232,490		8,782	223,708				
	4		ar amounts)	- F	232,430		0,702	223,700				
	5			· · · · ·								
		·	(ı) Real	(II) Personal								
	6a	Gross rents	6,000									
	ь	Less rental	3,781									
	c	expenses Rental income	2,219									
	٦	or (loss)	me or (loss)		2,219		2,219					
	"	Net rental inco	(i) Securities	(II) O ther	_,							
	7a	Gross amount from sales of assets other than inventory		16,806								
	b	Less cost or other basis and sales expenses		0								
	С	Gain or (loss)		16,806								
	d		ss)		16,806	16,806						
Other Revenue	8а	Gross income f events (not inc \$ of contributions See Part IV, lir	luding reported on line 1c)									
er l			a .									
t c	1		penses b									
			(loss) from fundraising	events >								
	9a		rom gaming activities ne 19 a									
	1		penses b									
	°	Net income or i	(loss) from gamıng actı	vities								
	10a	Gross sales of returns and allo										
	1		oods sold b									
	c	Net income or i	(loss) from sales of inv	entory ▶ Business Code								
	11a	Advanced Bioe		325193	504		504					
	b	Auvanceu Dioe	HOIGN K-T									
	c											
	d	All other reven	ue									
	е	Total. Add lines	s 11a-11d	•	504							
	12	Total revenue.	See Instructions .	🕨	10,617,794	10,382,581	11,505	222.700				
	1			I	10,017,794	10,302,301	11,305	223,708				

Form	990 (2015)				Page 10
	t IX Statement of Functional Expenses				
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all columns	-			
	Check if Schedule O contains a response or note to any line in t	this Part IX			
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	2,604			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	139,078			
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	1,776,034			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	112,009			
9	Other employee benefits	383,882			
10	Payroll taxes				
		152,173			
11	Fees for services (non-employees)				
а	Management				
b	Legal	51,811			
c	Accounting	19,345			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	65,721			
12	Advertising and promotion	8,664			
13	Office expenses	193,732			
14	Information technology	98,838			
15	Royalties				
16	Occupancy	116,362			

17

18

19

20

21 22

23

24

c d

25

26

Part X	Balance	Sheet

Par	ťΧ	Check if Schedule O contains a response or note to any line in this Part X .			_
		Check is schedule of contains a response of note to any line in this Part X .	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	beginning of year	1	End of year
	2	Savings and temporary cash investments	7,755,003	2	6,319,576
	3	Pledges and grants receivable, net	· ·	3	<u> </u>
	4	Accounts receivable, net	884,951	4	1,167,854
ts	5	Loans and other receivables from current and former officers, directors, truste key employees, and highest compensated employees. Complete Part II of Schedule L	es,	5	
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete P II of Schedule L		6	
Assets	7	Notes and leans recoverble not	227,513	7	217,896
Ø	8	Notes and loans receivable, net	1,580,982	8	2.564.599
	9	Prepaid expenses and deferred charges	1,380,902	9	2,304,399
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 185,978,	582		
	b	Less accumulated depreciation 10b 76,133,	862 111,706,929	10 c	109,844,720
	11	Investments—publicly traded securities	1,500,978	11	1,590,355
	12	Investments—other securities See Part IV, line 11	304.185	12	289,940
	13	Investments—program-related See Part IV, line 11		13	<u> </u>
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	165,438	15	206,521
	16	Total assets.Add lines 1 through 15 (must equal line 34)		16	122,201,461
	17	Accounts payable and accrued expenses	474,116	17	681,818
	18	Grants payable	·	18	<u> </u>
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	23,275	21	25,375
iabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>=</u>		persons Complete Part II of Schedule L		22	
ĿĦ	23	Secured mortgages and notes payable to unrelated third parties	29,485,997	23	28,492,182
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties and other liabilities not included on lines 17-24) Complete Part X of Schedule D	;,		
			1,922,208	25	707,813
	26	Total liabilities. Add lines 17 through 25	31,905,596	26	29,907,188
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complet lines 27 through 29, and lines 33 and 34.	e		
Net Assets or Fund Balances	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
B	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🕡 and			
ō		complete lines 30 through 34.			
şţs	30	Capital stock or trust principal, or current funds	0	30	0
\$ S E	31	Paid-in or capital surplus, or land, building or equipment fund	. 74,202,582	31	72,285,160
t A	32	Retained earnings, endowment, accumulated income, or other funds	18,017,801	32	20,009,113
Š	33	Total net assets or fund balances	92,220,383	33	92,294,273
	34	Total liabilities and net assets/fund balances	124,125,979	34	122,201,461

Form	990 (2015)				Page 12
Pai	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			· · 🔽
1	Total revenue (must equal Part VIII, column (A), line 12)	1		10,	617,794
2	Total expenses (must equal Part IX, column (A), line 25)	2		8,	648,332
3	Revenue less expenses Subtract line 2 from line 1	3		1,	969,462
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		92,	220,383
5	Net unrealized gains (losses) on investments	5			21,877
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,917,44		917,449
	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		92,	294,273
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O	_		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev a separate basis, consolidated basis, or both	iewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a se basis, consolidated basis, or both	parate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversion of the audit, review, or compilation of its financial statements and selection of an independent accountant		2c	Yes	

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

Schedule O

Single Audit Act and OMB Circular A-133?

Νo

3а

3b

Additional Data

Software ID: Software Version:

EIN: 46-0352027

Name: WEB Water Development Association Inc

Form 990, Part III, Line 4a

(Code) (Expenses \$ including grants of \$) (Revenue \$)

WEB Water Development Association, Inc. operates a high quality water treatment and distribution system to provide its members with safe water for domestic and commercial use, providing over 2 billion gallons of water in fiscal year 2016. As of September 30, 2016, WEB had approximately 6,800 miles of water pipe that served over 8,000 members in 14 South Dakota counties and 3 North Dakota counties.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE D

Supplemental Financial Statements

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

OMB No 1545-0047

DLN: 93493214012067

Open to Public

Department of the Treasury

(Form 990)

ern	al Revenue Service	(Form 990) and its instructions is at <u>www.ii</u>	s.gov/T	orm990. Inspection
Nar	ne of the organization		Empl	oyer identification number
WEE	B Water Development Association Inc		46-0	352027
Pa	rt I Organizations Maintaining Donor Complete if the organization answer	r Advised Funds or Other Similar F ed "Yes" on Form 990, Part IV, line 6.		
	·	(a) Donor advised funds	(b)	Funds and other accounts
	Total number at end of year			
	Aggregate value of contributions to (during year)			
	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor funds are the organization's property, subject to		nor advis	sed Yes No
	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?	benefit of the donor or donor advisor, or for a	any other	Yes No
aı	t II Conservation Easements. Comple	ete if the organization answered "Yes"	on Form	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the	ne organization (check all that apply)		
	Preservation of land for public use (e g , recreducation)		an histor	ically important land area
	Protection of natural habitat	<u>'</u>		d historic structure
	Preservation of open space	Fieselvation of	a certifie	a motoric structure
	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	neid a qualified conservation contribution in	the form	of a conservation
				Held at the End of the Year
a	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easeme	ents	2b	
c	Number of conservation easements on a certified	* *	2c	
d	Number of conservation easements included in (in historic structure listed in the National Register	c) acquired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, tra	nsferred, released, extinguished, or terminat	ed by the	e organization during the
	tax year ▶			
	Number of states where property subject to cons	ervation easement is located ▶		
	Does the organization have a written policy regard violations, and enforcement of the conservation of		ndling of	┌ Yes
	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforc	ing cons	ervation easements during the
	A mount of evenences incurred in manifestation	octing handling of wolations, and enforcement	conce=:-	tion opcomente during the
	Amount of expenses incurred in monitoring, inspi	ecting, nanding of violations, and enforcing (conserva	mon easements during the year
	Does each conservation easement reported on II (B)(I) and section 170(h)(4)(B)(II)?	ne 2(d) above satisfy the requirements of se	ction 17	
	In Part XIII, describe how the organization repor	ts conservation easements in its revenue ar	nd expen	Yes No
	balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	t of the footnote to the organization's financia		· · · · · · · · · · · · · · · · · · ·
ar		c tions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Oth	er Similar Assets.
а	If the organization elected, as permitted under Si works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	r assets held for public exhibition, education	, or resea	arch in furtherance of public
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide the following amounts relating to	r assets held for public exhibition, education		
(i) Revenue included on Form 990, Part VIII, line	1	> \$	
(ii) Assets included in Form 990, Part X		▶ \$	

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

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	****	Organizations Maintaining (continued)	Collections of A	rt, His	torio	al Tre	easures, o	or Ot	her Similar As	ssets
3		the organization's acquisition, accortion items (check all that apply)	ession, and other rec		ieck a	n y of th	e following t	hat ar	e a significant use	e of its
а	Г	Public exhibition		d		Loan c	or exchange	progra	ams	
b	_ :	Scholarly research		e		Other				
c		Preservation for future generations								
4	Provide Part >	de a description of the organization' (III	s collections and exp	laın hov	v they	further	the organiza	ation's	exempt purpose	ın
5		g the year, did the organization soli s to be sold to raise funds rather th								s
Par	t IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990,	Part IV	/, line 9, or	repo	orted an amoun	t on Form 990,
1 a		e organization an agent, trustee, cus led on Form 990, Part X?	todian or other interi	mediary	for co	ntributi	ions or other	asse	ts not Yes	s √ No
b	If"	Yes," explain the arrangement in P	art XIII and complete	e the fol	lowing	table			Ame	ount
c	Вед	ginning balance						1 c		
d	A d	ditions during the year						1d		
е	Dis	tributions during the year						1e		
f		ding balance					L	1f		
2 a	Did th	ne organization include an amount o	n Form 990, Part X, I	ıne 21,	for es	crow or	custodial ac	count	: liability? 🔽 Yes	i
b	Tf"Vo	c " ovnlain the arrangement in Bart	VIII Chack bara if t	ha avals	- n - t - o	n hac b	oon provided	d in D-	ort VIII	~
Pai	rt V	s," explain the arrangement in Part Endowment Funds. Comple								<u> </u>
			(a)Current year		or year		(c)Two years b		d) Three years back	(e)Four years back
1 a	Begir	nning of year balance								
b	Cont	ributions								
c	Net II	nvestment earnings, gains, and								
d	Grant	ts or scholarships								
e		r expenditures for facilities irograms								
f	A dmı	nistrative expenses								
g		of year balance								
2	Provid	de the estimated percentage of the	current year end bala	nce (lın	e 1g,	column	(a)) held as			
а	Board	designated or quasi-endowment 🕨								
b	Perma	anent endowment ▶								
С		orarily restricted endowment ► ercentages on lines 2a, 2b, and 2c	should equal 100%							
3а	organ	nere endowment funds not in the pos ization by	5		that a	re held	and adminis	tered		Yes No
		related organizations			•				3a 3a	(i)
ь 4	If"Ye	s" on 3a(II), are the related organiz ribe in Part XIII the intended uses of	ations listed as requi						<u> </u>	b
Par	t VI	Land, Buildings, and Equip	ment.							
		Complete if the organization a Description of property	answered 'Yes' to f	orm 9'	90, Pa (a)		line 11a.S	ee Fo	orm 990, Part X	, line 10. (d)Book value
					t or oth	ner basıs nent)	Cost or other		(c)depreciation	
				·			1	38,334		138,334
b	Buildin • •	gs 					2,9	82,243	516,367	2,465,876
c	Leaseh	old improvements								
d I	Equipm	nent					181,9	92,292	75,617,495	106,374,797
e	Other							65 712		005 710
Tota	 I. A dd I	Innes 1a through 1e (Column (d) mus		X, colui	mn (B)	, line 10	l	65,713	<u> </u> ▶	865,713 109,844,720
		.5 = 1 (5. mas	,,,, , ure	, -2.41	(2)	,	<u> </u>			D (Form 990) 2015

	See Form 990, Part X, line 12.			
	(a) Description of security or catego	ry	(b)Book value	(c)Method of valuation
/1\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	(including name of security)			Cost or end-of-year market value
	al derivatives r-held equity interests			
(3)Other	note oquity into out			
Total. (Colur	mn (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII	Investments—Program Related.			
	Complete if the organization answer	ed 'Yes' on Form 99		
	(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
				Cost of cita of year market value
	mn (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organiza	tion answored 'Ves' or	a Form 000 Bart IV June	11d Soo Form 999 Part V June 15
PaitIX		scription	1 Form 990, Part IV, fine	(b) Book value
		· ·		
Total (Coll	umn (h) must equal Form 990 Part X col (R) lin	e 15)		
	umn (b) must equal Form 990, Part X, col (B) lin Other Liabilities. Complete if the o			
Total. (Colu	Other Liabilities. Complete if the or See Form 990, Part X, line 25.	rganization answer	ed 'Yes' on Form 990,	
	Other Liabilities. Complete if the o		ed 'Yes' on Form 990,	
Part X	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	rganization answer	ed 'Yes' on Form 990,	
Part X	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	rganization answer	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	rganization answer	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal inc	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990,	
Part X 1. Federal Inc Deferred C	Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	(b) Book valu	ed 'Yes' on Form 990, e	

Part	Reconciliation of Revenue per Audited Financial Statements With R Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	evenue per l	Return
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)............. 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)............ <mark>4b</mark>		
C	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)		
Part :		Expenses pe	r Return.
1	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	1	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	• • -	+
∠ a	Donated services and use of facilities		
a b	Prior year adjustments		
C			
d	Other losses		
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1	. 20	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:	. 3	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	. 4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		
	rotal expenses Aud lines 3 and 40. (This must equal Form 330, Part 1, line 18)	5	
Part	XIII Supplemental Information		
Part V	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line: V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete mation		ide any additional
	Return Reference Explanation		
See Ad	dditional Data Table		
		-	

Page 5	chedule D (Form 990) 2015		
	ormation (continued)	art XIII Supplemental Info	Part XIII
	Explanation	Return Reference	Ref

Additional Data

Software ID: Software Version:

EIN: 46-0352027

Name: WEB Water Development Association Inc

Supplemental Information

Return Reference

The Association maintains a liability account for customer meter deposits

2 b

Supplemental Information						
Return Reference	Explanation					
Part X, Line 2	The Association is exempt from Federal income taxes under Section 501(c)(12) of the Intern al Revenue Code of 1954. The Association is annually required to file a Return of Organiza tion Exempt from Income Tax (Form 990) with the IRS. In addition, the Association is subject to income tax on net income that is derived from business activities that are unrelated to their exempt purposes. The Association files an Exempt Organization Business Income Tax Return (Form 990-T) with the IRS to report its unrelated business taxable income. The Association believes that it has appropriate support for any tax positions taken affecting in					

ts annual filing requirements, and as such, does not have any uncertain tax positions that are material to the financial statements. The Association would recognize future accrued interest and penalties related to unrecognized tax benefits and liabilities in income tax

expense if such interest and penalties are incurred

As Filed Data efile GRAPHIC print - DO NOT PROCESS **SCHEDULE 0** (Form 990 or

990-EZ)

Treasury

Service

Department of the

Internal Revenue

Name of the organization WEB Water Development Association Inc.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493214012067

Employer identification number

46-0352027

2015

Open to Public Inspection

990 Schedule O. Supplemental Information

Return Reference	Explanation	
Form 990, Part VI, Section A, line 4	The Organization's bylaw's amendments included the following - Modified the purpose statem ent in Article III from building a water distribution system to operating a water distribution system - Added a corporate dissolution clause requiring that upon dissolution of the entity, the assets will be distributed for one or more exempt purposes within the meaning of the Code or will be distributed to the federal government, or to a state or local gove rnment, for a public purpose, as determined by the Board of Directors - Shortened the mem ber definition to include reference to WEB Water Rules and Regulations rather than having all the requirements stated in the bylaw's - Modified the member definition section for en tity ownership for bulk users - Added a new section permitting members to vote by proxy - Added a new section defining board action in lieu of a meeting, including through authen ticated electronic communications - Added provisions for board meeting attendance and resignation of the directors - Added a new article stating the sole WEB Water officer will be the General Manager and included the duties of the General Manager - Added a new article regarding Conflicts of Interest includes definition of coverage and disclosure requirements	

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	General Members Membership in the Corporation shall be limited to persons, rural water sy stem associations or corporations, and bodies political situated within the area to be ser ved by the Corporation, and reasonably accessible thereto, who have made application for membership in the Corporation, and who have agreed to pay the membership fee, and who have signed and entered into such agreements with the Corporation for the purchase of water for domestic, municipal and other approved beneficial use as are required by the corporation from time to time and have been accepted for membership by the Corporation's Board of Directors Individuals or entities who (1) tamper with or damage WEB property, (2) cause a cross-connection or otherwise put the water quality of the system at risk, (3) obstruct WEB staff from performing their assigned duties, (4) make use of water services without reporting it, (5) have established a record of failing to pay their water bill in a timely manner, (6) otherwise engage in or display acts or behaviors not in the best interest of the corporation and which are disruptive its operation or business pan shall not be eligible for membership. The Corporation's Board of Directors shall have the right to deny membership request or to terminate the membership of any individual or entity engaging in such acts or behaviors as defined in Article VII and the by-laws

990 Schedule O, Supplemental Information
Return

urality vote

Reference Form 990, Part | Six rural directors shall be elected by secret ballot, one from each district, with only m

Explanation

VI, Section A, line 7a embers residing within each district being entitled to vote for a director from that district. Three municipal directors shall be elected by secret ballot, by and from members that are bodies politic (municipalities) or bulk users receiving water service by towin bulk contract rate, within the district boundary, with each such member being entitled to cast on e vote for a municipal director for their district area. Directors shall be selected by pl

Return
Reference

Form 990 Part | Yes in some cases There is a section in the By-law s that deals with recall of directors

Form 990, Part
VI, Section A,
Inne 7b

Yes, in some cases There is a section in the By-law's that deals with recall of directors
and referral of issues or Board decisions. For example the Board recommends By-law changes
but the members must approve by a 60% vote

990 Schedule O, Supplemental Information Return Explanation Reference Form 990, Part There are no committees with authority to act on behalf of the governing board VI, Section A.

line 8b

990 Schedule O. Supplemental Information Return Explanation Reference Form 990. Part At a board meeting prior to filing the Form 990 with the IRS, the 990 draft was provided to the governing board for review

VI, Section B, line 11

990 Schedule O, Supplemental Information

Return Reference	Explanation	
Form 990, Part VI, Section B, line 12c	The Organization's conflict of interest policy applies to all Board Members, Members of Bo and committees, agents, WEB Water General Manager and all other Entity employees and all of their immediate family members. It also includes independent contractors providing services or materials to WEB Water. Collectively all such individuals will be referred to as "Covered Persons." It is the obligation of the Board and WEB Water General Manager to public ize this policy to all Covered Persons on a recurring basis. All Covered Persons must discovered all real or apparent conflicts or dualities of interest with WEB Water's activities. Additionally, Covered Persons must annually complete a conflict of interest disclosure for mas specified by the Board which includes providing a written description of the facts comprising the real or apparent conflict or duality of interest to the WEB Water General Manager or a Board Officer. Where a Covered Person believes there may exist a real or apparent conflict or duality of interest, that person must, in addition to filing the notice of disclosure, abstain from making motions, participating in relevant deliberations, voting, executing agreements, attempting to influence others' votes, or taking any other similar direct action on behalf of WEB Water where the conflict or duality of interest might pertain	

990 Schedule O, Supplemental Information

Reference Form 990. Part

The Board reviews the General Manager's performance and sets the rate of pay. They are awa
re of compensation paid to similar CEOs in the region (REA co-ops, grain elevator managers

Explanation

VI, Section B, line 15a re of compensation paid to similar CEOs in the region (REA co-ops, grain elevator managers, other Rural Water General Managers etc.) Each year the General Manager receives a review from the Board of Directors. For the other managers, the General Manager does an annual review and sets the rate of pay. The Board reviews the pay policy with the General Manager on an annual basis.

990 Schedule O, Supplemental Information Return Explanation Reference Form 990, Part Financial Statements are available only to the members VI, Section C,

line 19

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Form 990, Part Amortization of Contributions for Construction -2,529,634 Membership Contributions 612,21
XI, line 9 1 Advanced Bioenergy, LLC K-1 Income -504 Advanced Bioenergy, LLC Book Income 478

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R**

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

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

OMB No 1545-0047 2015

DLN: 93493214012067

Open to Public

Inspection

Schedule R (Form 990) 2015

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

WEB Water Development Association Inc.

(Form 990)

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

46-0352027 Part I Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (b) (c) (d) (f) (e) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year. (b) (c) (d) (e) (f) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No

Cat No 50135Y

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990	, Part IV,	line 34
	because it had one or more related organizations treated as a partnership during the tax year.		

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or aging	(k) Percentage ownership
				314)			Yes	No	1	Yes	No	
Part IV Identification of Polated Organizations Taxable	os a Carna	ation	or Truct C	omplote if th	0.000000	tion and	uorod	"''	on Form 0	00 [) 2 r + .	IV line

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	Section (b)(1 contro entit	l3) illed y?
(1) Web Water Bottling Company PO Box 51 Aberdeen, SD 57401 38-3930884	Bottled Water Retailer		Web Water Development Association Inc	C	133,959	106,456	100 000 %	Yes	No No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Part V	Transactions With	Related Organizations	Complete if the organization	answered "Yes" on Form 990	, Part IV, line 34, 35b, or 36.

1 During the tax year, did the orgranization engage in any of the following transaction	with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled e	ity	1a	Yes	
$oldsymbol{b}$ Gift, grant, or capital contribution to related organization(s)		1b		No
${f c}$ Gift, grant, or capital contribution from related organization(s)		1 c		No
$oldsymbol{d}$ Loans or loan guarantees to or for related organization(s)		1d	Yes	
f e Loans or loan guarantees by related organization(s)		1e		No
f Dividends from related organization(s)		1f		No
$oldsymbol{g}$ Sale of assets to related organization(s)		1 g		No
f h Purchase of assets from related organization(s)		1h		No
i Exchange of assets with related organization(s)		1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)		1j		No
k Lease of facilities, equipment, or other assets from related organization(s)		1k		No
Performance of services or membership or fundraising solicitations for related or	anization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related or	anızatıon(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organiz	tion(s)	1n		No
$oldsymbol{o}$ Sharing of paid employees with related organization(s)		10	Yes	
p Reimbursement paid to related organization(s) for expenses		1 p		No
q Reimbursement paid by related organization(s) for expenses		1 q	Yes	
r Other transfer of cash or property to related organization(s)		1r		No
$oldsymbol{s}$ Other transfer of cash or property from related organization(s)		1 s		No
<u> </u>	who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) (c) (d) Transaction Amount involved Method of determining am type (a-s)	ount ir	nvolve	d
1)Rental Income	A 6,000 Cash Paid			
2)Interest Income	A 8,782 Cash Paid			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	nd-of-year allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1 I	
													<u>. </u>

