## As Corrected

_	990 (2017) SPRING VALLEY WATER SUPPLY 74-1603	<u> 363</u>	Р	age <b>5</b>
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter ·0· if not applicable			1
b	Enter the number of Forms W-2G included in line 1a Enter 0 if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
	(gambling) winnings to prize winners?	1c	Х	
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 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	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		X
b	If "Yes," enter the name of the foreign country: ▶			İ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	}		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886 T?	5c		L
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u>_x</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	\		١
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f_		<u> X</u>
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		<b>├</b> ─
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		⊢—
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	. 8		
9	Sponsoring organizations maintaining donor advised funds.	_		1
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		├
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	_9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			1
	Section 501(c)(12) organizations. Enter			l
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			ĺ
	amounts due or received from them) 11b 9,660.	40-		ĺ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<del> </del>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1
	Section 501(c)(29) qualified nonprofit health insurance issuers.	46		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		<del></del>
	Note. See the instructions for additional information the organization must report on Schedule O			
	Enter the amount of reserves the organization is required to maintain by the states in which the			i
	organization is licensed to issue qualified health plans  Enter the amount of recovery and head.			
	Enter the amount of reserves on hand  [13c]  Did the organization reserves my neumants for understanding accuracy to the device of the control of the contro	4.		v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	900	(2017)
		rurm	23U	(2017)

## As corrected

Form 990 (2017) SPRING VALLEY WATER SUPPLY								363 Page 9
Pa	rt VI							
_		Check if Schedule O contain	ns a <u>response</u>	or note to any lin		(7)		
			<i>:</i>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a					012 014
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
اغ اغ		Fundraising events	10 1c		ļ			}
# is		Related organizations	1d					
S,E		Government grants (contribution	, <del>                                    </del>					
<u>6</u> 2		All other contributions, gifts, grants,	· — —					
E E	•	similar amounts not included above	1f	185,732.				ĺ
들이	a	Noncash contributions included in lines 1a		182,871.				
9 2	_	h Total. Add lines 1a-1f			185,732.	}		}
				Business Code				
9	2 a	WATER REVENUE		221000	674,350.	674,350.		l
٥	b			221000	12,960.	12,960.		
S &	c	THE MEDICAL TOTAL	TALLAT	221000	8,575.	8,575.		
E 8		MISCELLANEOUS RE		221000	7,061.	7,061.		
Program Service Revenue	e	VENDEDGUEDG		221000	4,190.	4,190.		
F		All other program service revenu	18	1221000		1,200		
}		Total. Add lines 2a-2f	.0		707,136.			
	3	Investment income (including di	vidends, intere					
	_	other similar amounts)	,	•	2,599.	i		2,599.
1	4	Income from investment of tax e	xempt bond r	*				, , , , , , , , , , , , , , , , , , , ,
	5	Royalties			^			
İ			(i) Real	(ii) Personal	·		-	
J	6 a	Gross rents						,
		Less rental expenses	.*					
ļ		Rental income or (loss)		t		Į.		
		Net rental income or (loss)	٠٠-	<b>•</b>				1
		, , , , , , , , , , , , , , , , , , ,	(i):Securities	(II) Other				
İ		assets other than inventory	10,0000111100	(ii) Oti III				
	b	Less cost or other basis						
	_	and sales expenses	•					ļ
	c	Gain or (loss)						
		Net gain or (loss)						
enne		Gross income from fundraising e	•					
Ven			of	[		į		
Other Rev		contributions reported on line 1c		l i				
ē	<b>.</b>	Less direct expenses	, a b	· · · · · ·		Ì		
δ		Net income or (loss) from fundra		<b>—</b>				
		Gross income from gaming activ	-			-		
	<i>3</i>	Part IV, line 19						
	ь	Less: direct expenses	. b					
		Net income or (loss) from gaming						
		Gross sales of inventory, less ret	-					
		and allowaness	<u>.</u> a		1			
ļ	b	Less: cost of goods sold	b					
İ		Net income or (loss) from sales of	_					
Γ		Miscellaneous Revenue		Business Code				
Ì	11 a					]	_	
	ь							
ļ	С		5					
	d	All other revenue	بأ					
	e	Total. Add lines 11a-11d		▶↓				<u> </u>
	12	Total revenue. See instructions.			895,467.	707,136.	0.	<u>2,599.</u>
732009	11-28	-17						Form <b>990</b> (2017)