Received	
Examined	CLASS D
	WATER UTILITIES
	1
U#	
	2016
Δ	NNUAL REPORT
	OF
THE	CASMITE CORPORATION
(NAME UNDER WILLOUD CORROR	ATION, PARTNERSHIP, OR INDIVIDUAL IS DOING BUSINESS)
(NAME UNDER WHICH CORPOR.	ATION, PARTNERSHIP, OR INDIVIDUAL IS DOING BUSINESS)
	6020, San Ramon, CA 94583
(OFFICIA	L MAILING ADDRESS) ZIP

TO THE PUBLIC UTILITIES COMMISSION STATE OF CALIFORNIA FOR THE YEAR ENDED DECEMBER 31, 2016

REPORT MUST BE FILED NOT LATER THAN MARCH 31, 2017

TABLE OF CONTENTS

	Page
Instructions	2
General Information	3
Excess Capacity and Non-Tariffed Services	4
Safe Drinking Water Bond Act/State Revolving Fund Data	5-6
Schedule A - Balance Sheet	7
Schedule B - Water Plant In Service	8
Schedule C - Reserve for Depreciation of Utility Plant	8
Schedule D - Capital Stock Outstanding (As of December 31, 2016)	9
Schedule E - Long-Term Debts	10
Schedule F - Income Statement	11
Schedule G - Source of Supply and Water Developed Wells	12
Schedule H - Water Delivered to Metered Customers	12
Schedule I - Employees and Their Compensation	12
Schedule J - Advances for Construction	13
Schedule K - Total Meters and Services (Active and Inactive)	13
Schedule L - Meter Testing Data	13
Schedule M - Service Connections at End of Year	13
Schedule N - Storage Facilities	13
Schedule O - Footages of Pipe (Excluding Service Pipes)	13
Facility Fees Data	14
Declaration	15

INSTRUCTIONS

1. Two completed and signed hard copies of this report and one electronic copy must be filed **NOT LATER THAN MARCH 31, 2017**, with:

CALIFORNIA PUBLIC UTILITIES COMMISSION WATER DIVISION ATTN: BRUCE DEBERRY 505 VAN NESS AVENUE, ROOM 3106 SAN FRANCISCO, CALIFORNIA 94102-3298 bmd@cpuc.ca.gov

- 2. Failure to file the report on time may subject a utility to the penalties and sanctions provided by the Public Utilities Code.
- 3. The Oath on Page 15, must be signed by an authorized officer, partner, or owner.
- 4. The report must be prepared in ink, typed or computer generated.
- 5. The report must be filled in, and every question answered. LEAVE NO SCHEDULE BLANK. Insert the words "none" or "not applicable" or "n/a" when appropriate.
- 6. Certain balance sheet and income statement accounts flow to supplemental schedules. The totals of the details in the latter must agree with the balances of the accounts to which they refer.
- 7. Some schedules provide for a "balance at beginning of year." The amount shown should agree with the "balance at end of year" as shown in the report for the previous year. If there is a difference it should be explained by footnote.
- 8. When there is insufficient space in a schedule to permit a complete statement of the requested information, insert sheets should be prepared and identified by the number of the schedule to which it refers. Be certain that the inserts are securely attached to the report. If inserts are needed, prepare all inserts in one separate electronic file in Microsoft Excel format and file it with the electronic file of this report.
- 9. This report must cover the calendar year from January 1, 2016, through December 31, 2016. Fiscal year reports will not be accepted.

CLASS D WATER UTILITIES

(HAVING LESS THAN 500 SERVICE CONNECTIONS)

	41		MITE CORPORATION			
	(Na	•	partnership or individual is doing b	usiness)		
			D, San Ramon, CA 94583 al mailing address)			
		CASMALIA AND NEARBY	Y AREA, SANTA BARBARA COUN	ITY		
		(Service Ar	ea - Town and County)			
Tele	ephone Number:	925-842-1213	Fax Number:		20-0335	
Em	ail Address:			(cover sh	eet requ	uired)
		GENER/	AL INFORMATION			
			ntary statement, if necessary)			
			COMMISSION, NO PHOTOCOPIES	-		
1.	If a corporation show: (A) Date of organization	10/30/1936 incor	porated in the State of	Ne	vada	
	- · ·	dresses of principal officers:	·			
			Road, San Ramon, CA 94528			
			01 Bollinger Canyon Road, San I	Ramon, C	4 94528	3
			ı Road, San Ramon, CA 94528 6001 Bollinger Canyon Road, Saı	Ramon	CΔ 945	28
	Reny A. Duran, Regular	tory Real Froperty Officer,	ooor Bonniger Carryon Road, Car	i italiioli,	OA 343.	20
2	If unincorporated provide	e the name and address of th	e owner(s) or the partners:			
3		ne number of: love to receive corresponden or operations and services:	ce: Kelly Duran, Regulatory Rea			
4.	management of your bus If so, what was the natur payments made, and to	siness affairs during the year	syment made under the agreement			and/or
5.	intermediaries, control, o		and the after the same to the same the			
		ociated companies or persons or are controlled by, or are un	s which, directly or indirectly, or thro der common control with responde	ough one o	r more	
	PUBLIC HEALTH STAT	or are controlled by, or are un	s which, directly or indirectly, or thro der common control with responde	ough one o	r more	Latest Date
6.	PUBLIC HEALTH STAT	or are controlled by, or are un	der common control with responde	nt:		
6. 7.	PUBLIC HEALTH STAT Has state or local health	or are controlled by, or are un	der common control with responde	nt:	No	Date
	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter	or are controlled by, or are un TUS department inspection been	der common control with responde made during the year?	Yes	No	Date 4/16/2015
7.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn	or are controlled by, or are un TUS department inspection been sts of water being made? nent water supply permit bee	der common control with responde made during the year?	Yes X	No	Date 4/16/2015 Monthly
7. 8. 9.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn	or are controlled by, or are un FUS department inspection been sts of water being made? nent water supply permit been tained, state whether applica	der common control with responde made during the year? n obtained? (Indicate date)	Yes X	No	Date 4/16/2015 Monthly 9/7/2006
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Li	or are controlled by, or are un FUS department inspection been sts of water being made? nent water supply permit been tained, state whether applica	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Li Donovan Grife, D1 Lice Michael White, D2 Lice	department inspection been sts of water being made? nent water supply permit been stained, state whether applicate the permit is temporary. License Number of all License state #31114; T2 License #39148; T2 License #3869; T2 License #3869; T2 License #3869; T2 License #3669; T2 License #36699; T2 License #36699; T2 License #366999; T2 License #3669999; T2 License #36699999999999999999999999999999999999	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Li Donovan Grife, D1 Lice Michael White, D2 Lice Jack Bratcher, D3 Lice	department inspection been sts of water being made? nent water supply permit been stained, state whether applicate the permit is temporary. License Number of all License state permit is temporary. License #31114; T2 License #3 mse #38369; T2 License #3 mse #37835; T2 License #3 mse #37835; T2 License #3 mse #37835; T2 License #3	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732 4726	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Lic Donovan Grife, D1 Lice Michael White, D2 Lice Jack Bratcher, D3 Lice Nick "Marcus" Carra, D	department inspection been sts of water being made? nent water supply permit been state permit is temporary. License Number of all License state permit is temporary. License #31114; T2 License #3 anse #37835; T2 License #3 anse #37835; T2 License #3 License #3 License #43 License #44 License #44 License #45 License	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732 4726 1640 nse #35214	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Li Donovan Grife, D1 Lice Michael White, D2 Lice Jack Bratcher, D3 Lice Nick "Marcus" Carra, D Andrew Wentzel, D1 Lic Jeremy Logue, D3 Lice	department inspection been sts of water being made? nent water supply permit been state permit is temporary. License Number of all License cense #31114; T2 License #3114; T2 License #314;	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732 4726 1640 nse #35214 #40029	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Lic Michael White, D2 Lice Jack Bratcher, D3 Lice Nick "Marcus" Carra, D Andrew Wentzel, D1 Lic Jeremy Logue, D3 Lice Krista Ackermann, D1	department inspection been sts of water being made? ment water supply permit been stained, state whether applicate tate permit is temporary. License Number of all License state permit is temporary. License #31114; T2 License #3 mse #37835; T2 License #3 mse #37835; T2 License #3 mse #37835; T2 License #3 License #46892, T1 License #3 mse #16599; T2 License #2 License #46896	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732 4726 1640 nse #35214 #40029	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Lic Michael White, D2 Lice Jack Bratcher, D3 Lice Nick "Marcus" Carra, D Andrew Wentzel, D1 Lic Jeremy Logue, D3 Lice Krista Ackermann, D1 Lice Carinna Butler, D1 Lice	department inspection been sts of water being made? ment water supply permit been stained, state whether applicate the permit is temporary. License Number of all License state permit is temporary. License #31114; T2 License #3 mse #37835; T2 License #3 mse #37835; T2 License #3 mse #37835; T2 License #3 License #46892, T1 License #3 mse #16599; T2 License #2 License #46896 mse #46696	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732 4726 1640 nse #35214 #40029	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Lic Michael White, D2 Lice Jack Bratcher, D3 Lice Nick "Marcus" Carra, D Andrew Wentzel, D1 Lic Jeremy Logue, D3 Lice Krista Ackermann, D1	department inspection been sts of water being made? ment water supply permit been stained, state whether applicate the permit is temporary. License Number of all License state permit is temporary. License Number of all License state permit is temporary. License #31114; T2 License #3 mse #37835; T2 License #3 mse #37835; T2 License #3 mse #37835; T2 License #3 mse #46896; T2 License #46896; T2 License #46896; T3 License #46896; T3 License #46896; T3 License #46696; T3 License #4669	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732 4726 1640 nse #35214 #40029	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
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7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory ter Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Lic Michael White, D2 Lice Jack Bratcher, D3 Lice Nick "Marcus" Carra, D Andrew Wentzel, D1 Lic Jeremy Logue, D3 Lice Krista Ackermann, D1 I Carinna Butler, D1 Licens Kyle Gorter, D1 Licens Kyle Gorter, D1 Licens	department inspection been sts of water being made? ment water supply permit been state permit is temporary. License Number of all License state permit is temporary. License #31114; T2 License #3 anse #37835; T2 License #3 anse #37835; T2 License #3 anse #46896; T2 License #4 anse #46896; T2 License #46896; T2 License #46896; T3 License #46896; T4 License #46896; T4 License #47493; T4 License #47505; T5 License #47507	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732 4726 1640 nse #35214 #40029	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A
7. 8. 9. 10.	PUBLIC HEALTH STAT Has state or local health Are routine laboratory te: Has state health departn If no permit has been ob Show expiration date if s List Name, Grade, and L Michael Wentzel, D3 Lic Donovan Grife, D1 Lice Michael White, D2 Lice Jack Bratcher, D3 Lice Nick "Marcus" Carra, D Andrew Wentzel, D1 Lic Jeremy Logue, D3 Lice Krista Ackermann, D1 Lic Carinna Butler, D1 Lice Cara Aguiar, D1 Licens Kyle Gorter, D1 Licens Daren Johnson, D1 Licens	department inspection been sts of water being made? ment water supply permit been state permit is temporary. License Number of all License cense #31114; T2 License #31114; T2 License #31114; T2 License #318369; T2 License #318369; T2 License #3192 License #41917; T2 License #46896; T2 License #46896; T2 License #46896; T3 License #46696; T3 License #47507; T3 License #47	made during the year? n obtained? (Indicate date) tion has been made and when. ed Operators: #27752 6732 4726 1640 nse #35214 #40029	Yes X	No	Date 4/16/2015 Monthly 9/7/2006 N/A

714-536-4418

Phone Number of firm or consultant:

Excess Capacity and Non-Tariffed Services

NOTE: In D.00-07-018, D.03-04-028, and D. 04-12-023, the CPUC set forth rules and requirements regarding water utilities provision of non-tariffed services using excess capacity. These decisions require water utilities to: 1) file an advice letter requesting Commission approval of that service, 2) provide information regarding non-tariffed goods/services in each company's Annual Report to the Commission.

Based on the information and filings required in D.00-07-018, D.03-04-028, and D.04-12-023, provide the following information by each individual non-tariffed goods and services provided in calendar year 2016:

	Applie	s to All N	on-Tariffed Go	ods/Servi	ces that requir	e Approva	l by Advice L	etter			
								Total		Gross	
							Advice	Income		Value of	
			Total		Total		Letter	Tax		Regulated	
			Revenue		Expenses		and/or	Liability		Assets	
			Derived		Incurred		Resolution	Incurred		Used in the	
			From		to Provide		Number	Because of	Income	Provision of a	
			Non-Tariffed		Non-Tariffed		Approving	Non-Tariffed	Tax	Non-Tariffed	Regulated
		Active	Goods/	Revenue	Goods/	Expense	Non-Tariffed	Goods/	Liability	Goods/	Asset
Row		or	Services	Account	Services	Account	Goods/	Services	Account	Services	Account
No.	Description of Non-Tariffed Good/Service	Passive	(by account)	Number	(by Account)	Number	Services	(by Account)	Number	(by Account)	Number

Not Applicable

FOR ALL WATER COMPANIES SAFE DRINKING WATER BOND ACT/STATE REVOLVING FUND DATA

Not Applicable

Please provide the following information relating to each Safe Drinking Water Bond Act (SDWBA) or Safe Drinking Water State Revolving Fund (SRF) loan surcharge collection for the calendar year. Please use one page per loan.

1.	Current Fiscal Agent:			
	Name: Address: Phone Number: Account Number:			
	Date Hired:			
2.	Total surcharge collected from customers during t	he 12 month reporting period:		
	\$	Meter Size	No. of Metered Customers	Monthly Surcharge Per Customer
		5/8 X 3/4 inch		
		3/4 inch 1 inch		
		1 1/2 inch		
		2 inch		
		3 inch		
		4 inch 6 inch		
		Number of Flat Rate		
		Customers		
		Total		<u> </u>
3.	Summary of the bank account activities showing:			
	Balance at beginning of year Deposits during the year		\$	
	Interest earned for calendar year			
	Withdrawals from this account			
	Balance at end of year			
4.	Reason or Purpose of Withdrawal from this bank a	account:		

FOR ALL WATER COMPANIES SAFE DRINKING WATER BOND ACT/STATE REVOLVING FUND DATA (Continued)

Not Applicable

5. Plant amounts included in Schedule A-1a, Account No. 101--Water Plant in Service which were funded using SDWBA or SRF funds:

			Balance	Plant	Plant	Other	
			Beginning	Additions	Retirements	Debits*	Balance
Line	Acct.	Title of Account	of Year	During Year	During Year	or (Credits)	End of Year
No.	No.	(a)	(b)	(c)	(d)	(e)	(f)
1		NON-DEPRECIABLE PLANT					
2	301	Intangible Plant					
3	303	Land					
4		Total non-depreciable plant					
5		DEPRECIABLE PLANT					
6	304	Structures					
7	307	Wells					
8	317	Other Water Source Plant					
9	311	Pumping Equipment					
10	320	Water Treatment Plant					
11	330	Reservoirs, Tanks and Standpipes					
12	331	Water Mains					
13	333	Services and Meter Installations					
14	334	Meters					
15		Hydrants					
16	339	Other Equipment					
17	340	Office Furniture and Equipment					
18	341	Transportation Equipment					
19		Total depreciable plant					
20		Total water plant in service					

		SCHEDULE A - BALANCE SHEET (AS OF DECEMBER 31, 2016)	
Line	Acct.	Assets	Balance
1	101	Water Plant in Service (Excluding SDWBA/SRF)	1,794,188
2	101.1	Water Plant in Service - SDWBA/SRF	
3	101.2	Water Plant in Service - Prop 50	
4	103	Water Plant Held for Future Use	
5	104	Water Plant Purchased or Sold	
6	105	Water Plant Construction Work in Progress	
7	100.3	Construction Work in Progress (Prop 50)	
8	108	Accumulated Depreciation of Water Plant	(390,328)
9	108.1	Accumulated Amortization of SDWBA/SRF Loan	
10	114	Water Plant Acquisition Adjustments	
11	121	Non-water Utility Property and Other Assets	
12	121.3	Cash - Miscellaneous Special Deposits (Prop 50)	
13	122	Accumulated Depreciation of Non-water Utility Property	
14	124	Other Investments Cash	
15 16	131 131.3		
17	131.3	Cash - Miscellaneous Special Deposits (Prop 50) Special Deposits	
18	141	Accounts Receivable - Customers	
19	141	Receivables from Associated Companies	
20	143	Accumulated Provision for Uncollectible Accounts	
21	151	Materials and Supplies	
22	174	Other Current Assets	
23	180	Deferred Charges	
24		Dolonou charges	
25			
26		Total Assets	1,403,860
Line	Acct.	Equity and Liabilities	Balance
27	201	Common Stock (for corporations only)	500
28	204	Preferred Stock (for corporations only)	
29	211	Other Paid-in Capital (for corporations only)	3,546,733
30	215	Retained earnings (for corporations only)	(2,406,268)
31	218	Proprietary Capital (for proprietorships and partnerships only)	
32	224	Long-Term Debt	000 005
33	231	Accounts Payable	262,895
34 35	232	Short-Term Notes Payable	
36	233 236	Customer Deposits Taxes Accrued	
37	237	Interest Accrued	
38	241	Other Current Liabilities	1
39	250	Reserve for Depreciation of Utility Plant (Prop 50)	
U J		INCOCIACIOI DODICCIGNON ON CHINA I IGIN NI TODICA	1
40	252	Advances for Construction	
40 41	252 253	Advances for Construction Other Credits	
40 41 42	252 253 255	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits	
40 41 42 43	252 253 255 266.0	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits Contributions - Publicly Grant-Funded Plant (Prop 50)	
40 41 42	252 253 255	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits Contributions - Publicly Grant-Funded Plant (Prop 50) Accumulated Amortization of Contributions - Publicly Grant-Funded	
40 41 42 43 44	252 253 255 266.0 266.1	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits Contributions - Publicly Grant-Funded Plant (Prop 50) Accumulated Amortization of Contributions - Publicly Grant-Funded Plant (Prop 50)	
40 41 42 43	252 253 255 266.0	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits Contributions - Publicly Grant-Funded Plant (Prop 50) Accumulated Amortization of Contributions - Publicly Grant-Funded Plant (Prop 50) Contributions in Aid of Construction	
40 41 42 43 44 45	252 253 255 266.0 266.1	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits Contributions - Publicly Grant-Funded Plant (Prop 50) Accumulated Amortization of Contributions - Publicly Grant-Funded Plant (Prop 50)	
40 41 42 43 44 45 46	252 253 255 266.0 266.1 271 272	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits Contributions - Publicly Grant-Funded Plant (Prop 50) Accumulated Amortization of Contributions - Publicly Grant-Funded Plant (Prop 50) Contributions in Aid of Construction Accumulated Amortization of Contributions	
40 41 42 43 44 45 46 47	252 253 255 266.0 266.1 271 272 282	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits Contributions - Publicly Grant-Funded Plant (Prop 50) Accumulated Amortization of Contributions - Publicly Grant-Funded Plant (Prop 50) Contributions in Aid of Construction Accumulated Amortization of Contributions Accumulated Deferred Income Taxes - ACRS Depreciation	
40 41 42 43 44 45 46 47 48	252 253 255 266.0 266.1 271 272 282	Advances for Construction Other Credits Accumulated Deferred Investment Tax Credits Contributions - Publicly Grant-Funded Plant (Prop 50) Accumulated Amortization of Contributions - Publicly Grant-Funded Plant (Prop 50) Contributions in Aid of Construction Accumulated Amortization of Contributions Accumulated Deferred Income Taxes - ACRS Depreciation	

		SCHEDULE B - WATER F	PLANT IN S	ERVICE (AS	OF DECEMBER	R 31, 2016)	
			Balance	Plant Additions	Plant Retirements	Other Debits	Balance
Line	Acct	Title of Account	Beg of Year	During year	During year	or (Credits)	End of year
1	301	Intangible Plant	11,868				11,868
2	303	Land	-				-
3	304	Structures	48,087				48,087
4	307	Wells	-				-
5	311	Pumping Equipment	358,439				358,439
6	317	Other Water Source Plant	-				-
7	320	Water Treatment Plant	-				-
8	330	Reservoirs, Tanks and Standpipes	399,046				399,046
9	331	Water Mains	818,048				818,048
10	333	Services and Meter Installations	158,700				158,700
11	334	Meters	-				-
12	335	Hydrants	-				-
13	339	Other Equipment	-				-
14	340	Office Furniture and Equipment	-		•		-
15	341	Transportation Equipment	-		•		-
16		Total water plant in service	1,794,188	-	-	-	1,794,188

^{*} Debit or credit entries should be explained by footnotes or supplementary schedules

	SCHEDULE C - RESERVE FOR DEF	PRECIATION	OF UTILITY F	PLANT (AS OF D	ECEMBER 31, 2016)
				Water Plant	
		Account 108	Account 108.1	Funded by Prop 50	
Line	Item	Water Plant	SDWBA/SRF Loans	(For information only)	
1	Balance in reserves at beginning of year	354,444			A. Method used to compute
2	Add: Credits to reserves during year				depreciation expense
3	(a) Charged to Account No. 272				(Acct. 403) and rate.
4	(b) Charged to Account No. 403	35,884			
5	(c) Charged to Account No. 407				B. Amount of depreciation expense
6	(d) Salvage recovered				or to be claimed on utility property
7	(e) All other credits				in your federal income tax return
8	Total credits	35,884			for the year covered by this
9	Deduct: Debits to reserves during year				report \$
10	(a) Book cost of property retired				
11	(b) Cost of removal				C. State method used to compute
12	(c) All other debits				tax depreciation.
13	Total debits	-			
14	Balance in reserve at end of year	390,328			
15	(1) Explanation of all other credits				
16	(2) Explanation of all other debits				

	SCHEDULE D - CAPIT	AL STOCK OUTSTANDING (AS OF DECEMBER 3	1, 2016	5)	
		Num	ber of		
Line	Description		ares	Par \	/alue
1	Common Stocks	•	10	50)	\$500
2	Common Stocks				
3	Common Stocks				
4	Common Stocks				
5	Common Stocks				
6	Common Stocks				
7	Common Stocks				
8	Common Stocks				
9	Common Stocks				
10	Common Stocks				
11	Common Stocks				
12	Common Stocks				
13	Common Stocks				
14	Common Stocks				
15	Common Stocks				
16	Total - Common Stocks		10	\$	500
17	Preferred Stocks				
18	Preferred Stocks				
19	Preferred Stocks				
20	Preferred Stocks				
21	Preferred Stocks				
22	Preferred Stocks				
23	Preferred Stocks				
24	Preferred Stocks				
25	Preferred Stocks				
26	Preferred Stocks				
27	Preferred Stocks				
28	Preferred Stocks				
29	Preferred Stocks				
30	Preferred Stocks				
31	Preferred Stocks				
32	Total - Preferred Stocks				
33	Total annual dividends declared a	and/or paid to common stockholders	\$		-
34	Percentage of total annual divider	nd to common stockholders as a percentage of total net income	(%)		0.00%
35	Total annual dividends declared a	nd/or paid to preferred stock shareholders	\$	N/	<u>'A</u>
36	Percentage of total annual divider	nd to preferred stockholders as a percentage of total net income	÷ (%)	N/	/A

Note: Please use duplicate page(s) to meet your company's needs if additional lines are needed.

		S	CHEDUL	E E - LON	G-TERM DE	BTS				
Line	Lender Name	CPUC Order No.	Class	Date of Issuance	Date of Maturity	Principal Amount Authorized	Interest Rate (%)	Accrued Interest for Current Year	Interest Paid for Current Year	Outstanding Balance as of 12/31/2016
1										
2										
3	Not Applicable									
4										
5										
6										
7										
8										
9										
10										
11	Total									

Note: Please use duplicate page(s) to meet your company's needs if additional lines are needed.

		SCHEDULE F - INCOME STATEMENT	
Line	Acct.	Description	Balance
1		Operating Revenues:	
2	460	Unmetered Water Revenue	
3	462	Fire Protection Revenue	
4	465	Irrigation Revenue	
5	470	Metered Water Revenue	107,292
6	475	Approved Total Surcharge Revenue(s)	
7	480	Other water revenue	
8		Total Revenue Received	107,292
9		Less: Revenue Deductions	
10		SDWBA/SRF Surcharge Revenue	
11		Total Operating Revenue	107,292
12		Operating Expenses:	
13	610	Purchased Water	
14	615	Power	13,421
15	618	Other Volume Related Expenses	
16	630	Employee Labor	
17	640	Materials	
18	650	Contract Work	74,239
19	660	Transportation Expense	
20	664	Other Plant Maintenance Expenses	69,865
21	670	Office Salaries	
22	671	Management Salaries	
23	674	Employee Pensions and Benefits	
24	676	Uncollectible Accounts Expense	
25	678	Office Services and Rentals	1,741
26	681	Office Supplies and Expense	23,469
27	682	Professional Services	10,950
28	684	Insurance	
29	688	Regulatory Commission Expense	
30	689	General Expense	
31		Total Operating Expenses	193,685
32	403	Depreciation Expense	35,884
33	407	SDWBA/SRF Loan Amortization Expense	
34	408	Taxes Other Than Income Taxes	
35	409	State Corporate Income Tax Expense	
36	410	Federal Corporate Income Tax Expense	(67,827
37		Total Operating Revenue Deductions	161,742
38		Utility Operating Income	(54,450
39	421	Non-utility Income	,
40	426	Miscellaneous Non-utility Expense	
41	427	Interest Expense	
42		Net Income	(54,450

OLL O -SOUNCLS	OF SUPPLY AND W	AIER DEVE	LOPED WELLS	
		Depth	Pumping	Annual
	Diam.	to Water	Capacity	Quantities
No.	Inch	Feet	(g.p.m.)	Pumped
1	12	117	200	8,635.29
				Annual
Flow	in		(Unit)	Quantities
Priority I	Right	Di	versions	Diverted
Claim	Capacity	Max	Min	Unit
I				
			N/A	4
	No. 1 Flow Priority	No. Inch 1 12 Flow in Priority Right Claim Capacity	No. Diam. Inch to Water Feet 1 12 117 Flow in Priority Right Capacity Max	No. Diam. to Water Feet (g.p.m.) 1 12 117 200 Flow in Priority Right (Unit) Diversions Claim Capacity Max Min Annual Quantity

SCHEDU	LE H - WATER DELIVE		CUSTOMERS				
	(If figures are available) (specify unit) Month of Year						
Classification of Service	Maximum	Minimum	Total for Year				
Residential	September - 301.53	January - 107.78	2,366.41				
Commercial	September - 143.44	July - 2.27	241.48 c				
Industrial	N/A	N/A	N/A				
Fire Protection	N/A	N/A	N/A				
Irrigation	N/A	N/A	N/A				
Other (specify)							
CSD	August - 450.7	December - 287.1	4,281.60 c				
Water Troughs	November - 121.83	January - 5.6	537.46 c				
Total	September - 818.39	February - 427.55	7,426.95 c				

	SCHEDULE I - EMPLOYEES AND THEIR COMPENSATION						
			Number at	Salaries Charged	Salaries Charged	Total Salaries	
Line	Acct	Account	End of Year	to Expense	to Plant Accounts	and Wages Paid	
1	630	Employee Labor	N/A	-	-	-	
2	670	Office salaries	N/A	-	•	-	
3	671	Management salaries	N/A	-	•	-	
4		Total		-	•	-	

SCHEDULE J - ADVANCES FOR CONSTRUCT	TION
Balance beginning of year	N/A
Additions during year	N/A
Subtotal - Beginning balance plus additions during year	N/A
Refunds	N/A
Transfers to Acct. 271 - Contributions in Aid of Construction	N/A
Balance end of year	N/A

SCHEDULE K - TOTAL METERS AND SERVICES (Active and Inactive)							
Size	Size Meters Services						
5/8 x 3/4-in	8						
3/4-in	2						
1-in	1						
-in	2						
-in	-						
Total	13						

	SCHEDULE L - METER-TESTING DATA						
Number	Number of meters tested during year						
1	Used, before repair	-					
2	Used, after repair	-					
3	Fast, requiring refund	-					
Numbers of meters in service requiring							
test per	General Order No. 103	-					

SCHEDULE M - SERVICE CONNECTIONS AT END OF YEAR								
		Active	9		Inactive		Total co	nnections
Classification	Metered	Flat	Total	Metered	Flat	Total	Metered	Flat
Residences	4	-	4	-	-	-	4	-
Industrial/Commercial	2	-	2	-	-	-	2	-
Irrigation	-	-	-	-	-	-	-	-
Fire Protection (public)	-	-	-	-	-	-	-	-
Fire Protection (private)	-	-	-	-	-	-	-	-
Other (specify)	1	-	1	-	-	-	1	-
	6	-	6	-	-	-	6	-
Total	13	-	13	-	-	-	13	-

NOTE: Total connections (metered plus flat) should agree with total services in Schedule K.

SCHEDU	LE N - STORA	SCHEDULE O - FOOTAGES OF PIPE (EXCLUDING SERVICE PIPES)						
		Combined capacity		2" and	2 1/4 to			
Description	No.	in gallons	Description	under	3 1/4	4"	Other sizes (specify)	Totals
Concrete	N/A	N/A	Cast Iron	N/A	7,400	N/A	N/A	7,400
Earth	N/A	N/A	Welded steel	N/A	N/A	N/A	N/A	N/A
Wood	N/A	N/A	Standard screw	N/A	N/A	N/A	N/A	N/A
Steel	1	110,000	Cement-asbestos	N/A	N/A	N/A	N/A	N/A
Other			Plastic	N/A	N/A	15,300	N/A	15,300
Black Poly	2	21,000	Other (specify)	N/A	N/A	N/A	N/A	N/A
			+					
Total	3	131,000	Total	N/A	7,400	15,300	N/A	22,700

		FACIL	ITY FEES DATA
		No	ot Applicable
		rovide the following information relating to Resolution No. W-4110.	to Facility Fees collected for the calendar year 2016,
Т	rus	t Account Information:	
В	anl	« Name:	
		ount Number:	
D	ate	Opened:	
F	aci	lities Fees collected for new connections	s during the calendar year:
Α	۱.	Commercial	
		NAME	AMOUNT
			c
			\$ \$ \$
		_	
В	3.	Residential	
		NAME	AMOUNT
			\$ \$ \$
S	um	mary of the bank account activities show	=
			AMOUNT
		Balance at beginning of year	\$
		Deposits during the year	·
		Interest earned for calendar year	
		Withdrawals from this account	
		Balance at end of year	
R	lea:	son or Purpose of Withdrawal from this I	bank account:
_		•	
_			

	DECLARATION
(PLEASE VERIFY THAT	LL SCHEDULES ARE ACCURATE AND COMPLETE BEFORE SIGNING)
I, the undersigned	Kelly A. Duran
i, the undersigned	Officer, Partner, or Owner (Please Print)
	Cincol, Faltier, Cr. Cincol (Fleader Fill)
of	The Casmite Corporation
	Name of Utility
complete and correct statement of	lent; that I have carefully examined the same, and declare the same to be a the business and affairs of the above-named respondent and the operations of ry 1, 2016, through December 31, 2016.
Regulatory Real Prope	ty Officer
Title (Please Pr	nt) Signature
925-842-121	
Telephone Num	er Date