e-FILING REPORT COVER SHEET

REPORT NAME:	2012 Affiliated Interest				
COMPANY NAME:	Sunriver Water LLC				
If yes, please s	ubmit only the	DENTIAL INFORMATION? No Yes cover letter electronically. Submit confidential information e terms of an applicable protective order.			
If known, please selec	t designation:	☐ RE (Electric) ☐ RG (Gas) ☐ RW (Water) ☐ RO (Other)			
Report is required by:	○ OAR ○ Statute ○ Order ○ Other	860-036-0816 ORS 757.005 Enter Commission Order No.; e.g., 95-1335 Enter reason; e.g., at Request of Lee Sparling			
-	-	Tic docket/case? No Yes Enter docket number; e.g.; UM 1484			
Key words: Sunriver	Water 2012 At	filiated Interest			
If known, please selec	t the PUC Sect	tion to which the report should be directed:			
Corporate A	Analysis and W	Vater Regulation			
Economic a	and Policy Ana	alysis			
☐ Electric and	d Natural Gas I	Revenue Requirements			
☐ Electric Ra	tes and Plannir	ng			
☐ Natural Gas	s Rates and Pla	nning			
Utility Safe	ty, Reliability	& Security			
Administrative Hearings Division					
Consumer S	Consumer Services Section				

PLEASE NOTE: Do NOT use this form or e-filing with the PUC Filing Center for:

- Annual Fee Statement form and payment remittance or
- OUS or RSPF Surcharge form or surcharge remittance or
- Any other Telecommunications Reporting or
- Any daily safety or safety incident reports or
- Accident reports required by ORS 654.715.

Must be electronically filed with the Public Utility Commission of Oregon at: http://www.oregon.gov/puc/pages/efiling/ereports/index.aspx on or before May 31, 2013.

If you have questions about the form call Celeste Hari at (503)378-6628 email: celeste.hari@state.or.us

Mail the original to: Public Utility Commission of Oregon PO Box 2148 Salem, OR 97308-2148

Affiliated Interest Annual Report for Water Utilities

OAR 860-036-0816

Utility Company Name: Sunrive	r Water LLC		
Address: PO Box 3589 , Sunrive	r OR 97707		
Telephone: 541-593-3705			
Email: jchojnacky@sunriver-res	ort.com		
An	nual Transactions for Jan	. 1 through Dec. 31, 2012	
	Please use this format and attach	n additional sheets if needed.	
Docket and Order No.	Name of Affiliate	Purpose of Transaction	Annual Dolla
			Amount
Dockets: UW 86 & UI 168 Order 02-662	Sunriver Resort Limited Partnership	Management Fee	\$155,196
•		e, or the affiliated relationshi	p that affect
any affiliated interest o ⊠ NO			
YES Please explain the cl	hanges and provide any other pe	rtinent information, use a separate s	heet if necessary.
Signature of responsible party	Imhynch =	Date: 5/9/2013	
Printed name: Jessica Chojna	cky Position held in utility	y: Sunriver Resort LP - Controller	