

DELIVERANCE TAX & INSURANCE SERVICE

2435 S FRENCH AVE STE A Sanford, FL 32771

Phone: (407)322-5456 | Fax:

April 08, 2023

MIDWAY CANAAN COMMUNITY WATER ASSOC PO BOX 1322 Sanford, FL 32772

MIDWAY CANAAN COMMUNITY WATER ASSOC:

Enclosed is the 2021 federal return for a tax-exempt organization, prepared for MIDWAY CANAAN COMMUNITY WATER ASSOC from the information provided. The return will be e-filed with the IRS once we receive a signed Form 8879-TE, IRS e-file Signature Authorization for an Exempt Organization.

The federal return reflects neither a refund nor a balance due.

Thank you for the opportunity to be of service. For further assistance with the organization's tax return needs, contact our office at (407)322-5456.

Sincerely,

PATINA POWELL
DELIVERANCE TAX & INSURANCE SERVICE

Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information. For the 2021 calendar year, or tax year beginning , 2021, and ending 20 Check if applicable: C Name of organizationMIDWAY CANAAN COMMUNITY WATER ASSOC D Employer identification number Address change Doing business as 23-7024689 Name chance Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number Initial return PO BOX 1322 (407) 323-1714 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Amended return Sanford, FL 32772 293,759 Application pending Name and address of principal officer: VIOLA POSLEY Yes X No H(a) is this a group return for subordinates? 2090 DIXIE AVE Sanford FL 32771 H(b) Are all subordinates included? Yes Tax-exempt status: X 501(c) (12) ◀ (insert no.) 4947(a)(1) or 527 If "No." attach a list. See instructions Website: ► N/A H(c) Group exemption number X Corporation Trust Association Form of organization: L Year of formation: 1966 M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: THE WATER ASSOCIATION IS A COMMUNITY WATER UTILITIES ORAGAIZATION COMPRISED OF THE CIIIZENS OF MIDWAY ITS MISSION IS TO PROVIDE SAFE AND Activities & Governance CLEAN DRINKING WATER SERVICES TO THE COMMUNITY OF MIDWAY Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . Number of independent voting members of the governing body (Part VI, line 1b) 4 0 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 7 Total number of volunteers (estimate if necessary) 6 4 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 . . . 0 **Current Year** 4,900 4,900 2,000 2,000 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 286,859 190,167 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 293,759 197,067 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 77,219 20,017 Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 42,411 36,700 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 119,630 56,717 19 174,129 140,350 Net Assets or und Balances **Beginning of Current Year** End of Year Total assets (Part X, line 16) 173,921 140,350 21 Total liabilities (Part X, line 26) 173,921 Net assets or fund balances. Subtract line 21 from line 20 22 140,350 Part II Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. VIOLA POSLEY Sign Signature of officer Here VIOLA POSLEY, CHAIRMAN Type or print name and title Print/Type preparer's name Preparer's signature Date Check Paid PATINA POWELL 04-08-2023 self-employed XXXXXXXX Preparer Firm's name DELIVERANCE TAX & INSURANCE SERVICE Firm's EIN Use Only Firm's address 2435 S FRENCH AVE STE A Phone no Sanford FL 32771 407-322-5456 May the IRS discuss this return with the preparer shown above? See instructions

Form	1 990 (2021) MIDWAY CANAAN COMMUNITY WATER ASSOC 23-7024689 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE WATER ASSOCIATION IS A COMMUNITY WATER UTILITIES ORAGAIZATION COMPRISED OF THE CILIZENS OF
	MIDWAY ITS MISSION IS TO PROVIDE SAFE AND CLEAN DRINKING WATER SERVICES TO THE COMMUNITY OF
	MIDWAY.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 56,717 including grants of \$) (Revenue \$)
	FORM 990 PART VI, SEC B LINE 11A A COPY OF FORM 990 IS PROVIDED TO THE BOARD OF DIRECTIORS PRICE
	TO AM MEETING
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	, (in the second of the second
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
4.0	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 56.717

1) MIDWAY CANAAN COMMUNITY WATER ASSOC Checklist of Required Schedules Part IV

1	ls the organization described in section FOM NOV - 40 (F) Avenue		Yes	No
9.69	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	1		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		X
	candidates for public office? If "Yes," complete Schedule C, Part I	١.		1000
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3	-	X
	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
	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		х
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, 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			
10	debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9	_	X
	or in quasi endowments? If "Yes," complete Schedule D, Part V	222		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		Х
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	- 1	x
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		x
С	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	11c		X
d	and an amount for other assets in rarry, line 15, that is 5% or more or its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	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			
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	-	X
	Schedule D, Parts XI and XII	42-		122
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12a		X
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			44
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions Did the organization report more than \$15,000 tests of fundamental and a second	17		X
	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	924		
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
100	If "Yes," complete Schedule G, Part III	40		
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	-	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-	<u>x</u>
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? If "Yes," complete Schedule I, Parts I and II	21		x

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	040		
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
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			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		X
	\$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		x
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?	24c		
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, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
•••	persons? If "Yes," complete Schedule L, Part III	27		х
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):			5.V.
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV			l.
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	28b		x
~	"Yes," complete Schedule L, Part IV	28c	1	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23		_x_
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		x
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		x
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		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
000	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		_X_
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	Smark		
Dar	19? Note: All Form 990 filers are required to complete Schedule O.	38	х	
Par				
_	Check if Schedule O contains a response or note to any line in this Part V	• • •	· · ·	11
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	L. A		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
-5///	reportable gaming (gambling) winnings to prize winners?	1c	х	
CUL III			•	

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ı a	Statements Regarding Other IRS Fillings and Tax Compliance (continued)		Yes	No
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 7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
1230-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country			
	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
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
С	If "Yes" 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 \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts 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		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year · · · · · · · · · · · · · · · · · · ·			
e	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		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		x
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
423	sponsoring organization have excess business holdings at any time during the year?	8		x
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
Ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		х
10	Section 501(c)(7) organizations. Enter:		5 5	
а	Initiation fees and capital contributions included on Part VIII, line 12	20	134	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders		A.,	
Ь	Gross income from other sources (Do not net amounts due or paid to other sources	8 10		
40-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	Hali		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		- 1	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which		53	
_	the organization is licensed to issue qualified health plans	1		
C 140	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>x</u>
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	_	_
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	0.000	_X_
16	If "Yes," see instructions and file Form 4720, Schedule N.	4.0	0 1	Vocal
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	35		
1555		4-		
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	n res, complete i unii uuus.		Street H	

MIDWAY CANAAN COMMUNITY WATER ASSOC 23-7024689 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

_	Check if Schedule O contains a response or note to any line in this Part VI			. X
Se	ction A. Governing Body and Management		unc	
			Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year			
	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	1,9		
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
200	any other officer, director, trustee, or key employee?	2		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
1477	one or more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
200	stockholders, or persons other than the governing body?	7b		X
В	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b		х
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 on Schedule O	9		Х
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
420 C.Tu			Yes	No
0a	Did the organization have local chapters, branches, or affiliates?	10a		х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		x
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	174500		
_	describe in Schedule O how this was done	12c		
3	Did the organization have a written whistleblower policy?	13		X
4	Did the organization have a written document retention and destruction policy?	14		x
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		х
b	Other officers or key employees of the organization	15b		x
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	A		
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		x
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?	16b		
ec	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed Florida			
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain on Schedule O)			
9	Describe on 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.			
0	State the name, address, and telephone number of the person who possesses the organization's books and records			
	VIOLA POSLEY (407) 619-6620, 2090 DIXIE AVE. Sanford, FL 32771			

	(2021)	

EEA

MIDWAY CANAAN COMMUNITY WATER ASSOC

23-7024689

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Form 990 (2021)

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
 organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box it fielther the organization nor any rela	ted organizati	on comp	ensa	ted a	ny current	officer, director, or	trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, ur officer	check nless p	erson directo	than one s both an infrustee) Highest compensated employee	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations W-2/ 1099-MISC/ 1099-NEC	(F) Estimated amount of other compensation from the organization and related organizations
(1) VIOLA POSLEY CHAIRMAN			,			0		
(2)			T-				0	0
(3)								
(4)								
(5)								
<u>(6)</u>								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
<u>(13)</u>			+					
(14)								

	rm 990 (2021) MIDWAY CANAAN COMMUNITY WATER ASSOC				23-7024689 Pa										
Part '	VII	Section A. Officers, Directors, Trustee	s, Key Emplo	yees,	and			Com	pens	ated Employees	(continued)				
	(A) Name and title	(B) Average hours per week	box	unles	Pos eck m ss per	rson is	nan one s both a /trustee	n	(D) Reportable compensation from the organization (W-2/	(E) Reporta compensa from rela	ble ation ited	com	(F) ated among of other appensation the		
		(list any hours for related organizations below dotted line)	urs for director or director o		Officer Institutional trustee		Highest compensated employee Key employee		1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)		organiza related or			
(15)															
(16)										,					
<u>(17)</u>															
<u>(18)</u>									1						
(19)								4							
(20)							1								
(21)	222				_	9									
(22)							1	4	•						
	_			7			d								
(25)															
С		from continuation sheets to Part VII, So (add lines 1b and 1c)	V005		• •					0		0			0
2	Total r	number of individuals (including but not limited to the compensation from the organization	nited to those I					75	22		of				
3		e organization list any former officer, direc		ey emp	loye	e, or	high	nest co	ompe	ensated			for Ya	Yes	No
	237777	yee on line 1a? If "Yes," complete Schedu											3		x
4	organ	ny individual listed on line 1a, is the sum o ization and related organizations greater th	nan \$150,000?	If "Ye.	s, " co	omp	lete .	Sched	iule .	l for such					
5	Did ar	ny person listed on line 1a receive or accre	ue compensati	ion fror	n an	y un	relat	ed org	ganiz		****		4		X
Secti		rvices rendered to the organization? If "Ye Independent Contractors	s," complete S	chedu	le J f	or s	uch į	persor	7				5		X
1	Comp	olete this table for your five highest compensation from the organization. Report con	water and a second of the first feet of the second of the									av vear			
	comp	(A)	mpensation to	i ine ca	alenc	aar y	ear	enang	Witt	(B)	200.000.00	ax year.	(C)		
		Name and business add	dress		_					Description of serv	ices		Compens	ation	
_															
	NEW CONTRACTOR		040 18 W 180 2945												
2		number of independent contractors (included wed more than \$100,000 of compensation	Santa et Sant e an antica			se lis	ted	above) wh	0					

MIDWAY CANAAN COMMUNITY WATER ASSOC 23-7024689 Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (A) **(B)** (C) (D) Total revenue Revenue excluded Related or exempt Unrelated function revenue business revenue from tax under sections 512-514 Federated campaigns 1b Contributions, Gifts, Grants and Other Similar Amounts 2,400 1c 1d d Related organizations Government grants (contributions) . . 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 2,500 Noncash contributions included in 1g | \$ 4,900 h Total. Add lines 1a-1f **Business Code** 2a Program Service Revenue 2,000 f All other program service revenue 561499 2,000 2,000 Investment income (including dividends, interest, and Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents 6a b Less: rental expenses . . 6c c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from (i) Securities sales of assets 7a other than inventory b Less: cost or other basis Other Revenue and sales expenses . . 7b c Gain or (loss) 7c 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . 8a b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities, See Part IV, line 19 9a b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances . . . 10a 10b b Less: cost of goods sold 96,692 c Net income or (loss) from sales of inventory (96,692) (96,692)**Business Code** Miscellanous Revenue 11a 221000 286,859 286,859 e Total. Add lines 11a-11d ▶ 286,859 12 Total revenue. See instructions ▶ 0 197,067 288,859 (96,692)

23-7024689

MIDWAY CANAAN COMMUNITY WATER ASSOC

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to	any line in this Part IX			
	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		U.P.O. 1000	30.55 5.45	
₹6	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
-	individuals. See Part IV, line 22				
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	8			
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	15,000	A 15,000		
8	Pension plan accruals and contributions (include	15,000	13,000		
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,017	5,017		
11	Fees for services (nonemployees):	5,017	3,017		
''a	Management	4			
b	Legal	-			
c	Accounting	850	850		
d	Lobbying	830	830		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	2,063	2,063		
14	Information technology	2,063	2,063		
15	Royalties				
16	Occupancy	b			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		77-114		
20	Interest				
	Payments to affiliates				
21					
22	Depreciation, depletion, and amortization	4 200	4 200		
23	Insurance	4,329	4,329		1 N N N C - 1982
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a		120	120		
b		450	450		
C	PRINTING	2,032	2,032		
d		957	957		
е		25,899			
25	Total functional expenses. Add lines 1 through 24e	56,717	56,717	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2021) 23-7024689 MIDWAY CANAAN COMMUNITY WATER ASSOC **Balance Sheet** Part X (B) (A) Beginning of year End of year 1 173,921 140,350 1 2 2 3 Pledges and grants receivable, net 3 4 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net Assets 8 8 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10c Less: accumulated depreciation 10b b 11 11 12 Investments - other securities. See Part IV, line 11 12 13 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 33) 16 173,921 16 140,350 17 17 173,921 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 26 0 173,921 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 27 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 29

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

140,350 Form 990 (2021)

140,350

140,350

30

31

32

173,921

31

32

33

Form	990 (2021) MIDWAY CANAAN COMMUNITY WATER ASSOC	23-7024	689	Pa	age 12
Par	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI			• • •	· []
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1			067
2	Total expenses (must equal Part IX, column (A), line 25)			56,	717
3	Revenue less expenses. Subtract line 2 from line 1) 	140,	350
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4			
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities				
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10		140,	350
Pai	rt XII Financial Statements and Reporting				
3	Check if Schedule O contains a response or note to any line in this Part XII				$\cdot \Box$
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			1 30	
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.			3	6
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				Tool or
	reviewed on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis			1.75	
b	Were the organization's financial statements audited by an independent accountant?		2b		x
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:		1570		
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		x
	If the organization changed either its oversight process or selection process during the tax year, explain on				17.5
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		За	}	x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
			3b		

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