(Rev. January 2020)

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)

OMB No. 1545-0047

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.

**Open to Public** 

A	For the	2019 calend	dar year, or tax year beginning January 1 , 2019, and ending	Decemb	er, 31	, 20 19		
В	Check if	applicable:	C Name of organization San Miguel Power Association, Inc.	10.00	D Emplo	yer identification number		
П	Address		Doing business as		84-0312816			
$\overline{\Box}$	Name cl	-		om/suite	E Teleph	one number		
П	Initial ret	ŭ	PO Box 817			970-864-7311		
П		urn/terminated	City or town, state or province, country, and ZIP or foreign postal code					
Ħ			Nucla, CO 81424		G Gross	receipts \$		
$\Box$		ion pending	F Name and address of principal officer: Bradley Zaporski	H(a) Is this a or		r subordinates? Yes No		
I	. deferience	an panang	PO Box 1150 Ridgway, CO 81432	1 * *	•	es included? Yes No		
<u></u>	Tax-exe	mpt status:	501(c)(3)			t, (see instructions)		
J	Website	: ► www.sn		H(c) Group e	xemption	number >		
*		organization: ✓				of legal domicile: CO		
	art l	Summa						
	1		cribe the organization's mission or most significant activities: Electric	Distribution C	ooperati	Ve		
ø	-	,				H-W		
Activities & Governance			***************************************					
e.T	2	Check this	box $\blacktriangleright \Box$ if the organization discontinued its operations or disposed	of more than	25% of	its net assets.		
Š	3		voting members of the governing body (Part VI, line 1a)		3	7		
8	4		independent voting members of the governing body (Part VI, line 1b)		4	7		
8	5				5	64		
Σį	6		per of volunteers (estimate if necessary)		6			
Act	7a		ated business revenue from Part VIII, column (C), line 12		7a	***************************************		
`	b		ted business taxable income from Form 990-T, line 39		7b			
	<del>  "</del>	110t di li Old	tod business taxasis mostle neith offices 1, and 50 1, 1, 1, 1, 1	Prior Yea		Current Year		
	8	Contributio	ons and grants (Part VIII, line 1h)...............		0			
Πe	9		ervice revenue (Part VIII, line 2g)	20	026,856	29,781,026		
Revenue	10	-	t income (Part VIII, column (A), lines 3, 4, and 7d)		228,474	214,240		
å	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		(1,124)	(16,908)		
	12		nue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	20	254,206	29,978,358		
_	13		d similar amounts paid (Part IX, column (A), lines 1–3)	23,	0	29,970,330		
	14		aid to or for members (Part IX, column (A), line 4)		0	0		
	1		ther compensation, employee benefits (Part IX, column (A), lines 5–10)	7	269,075	7,849,769		
Ses	16a		nal fundraising fees (Part IX, column (A), line 11e)	,	209,079	7,849,709		
Expenses	b		raising expenses (Part IX, column (D), line 25)		- 0	V		
Ä	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	20	507,025	21 512 276		
	18		nses. Add lines 13–17 (must equal Part IX, column (A), line 25)		776,100	21,512,376 29,362,145		
	19		ess expenses. Subtract line 18 from line 12		478,106	616,213		
<u>- X</u>		Tievenue i		aginning of Cur		End of Year		
ets or	20	Total acco	ts (Part X, line 16)			87,787,244		
SSE	21		90 / /D J. V. B. J. GOV		821,971			
Net Asse	22		or fund balances. Subtract line 21 from line 20		861,276 960,695	41,161,505 46,625,739		
_	art II	<del> </del>	re Block	40	900,099	40,023,739		
			, I declare that I have examined this return, including accompanying schedules and state	ments and to th	a hast of n	ny knowledge and helief it le		
			te. Declaration of preparer (other than officer) is based on all information of which prepare			ly knowledge and belon, it is		
_		1 1 1	1.00 Th 1/42 D		172	1		
Si	gn	Signat	ure of officer	Date	- / /	<i></i>		
	ere	1 7			1020			
		! <b></b>	JULLIAM H. MERTZ LU'	<u> </u>				
		3 7		ıte	Check [	T # PTIN		
	iid		Trapator o algunda		self-emp	' '		
	epare			Elem	s EIN ▶	<u> </u>		
Us	se On	Firm's nat		Phor				
Ma	v the li		this return with the preparer shown above? (see instructions)	F1101		. Yes No		
IVIC	y are i	10 0100000	and reterm with the property enewer above types methodology	, , , ,	*	· i'''169   I''140		

	90 (2019)	Page 2
Pari		
1	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
•	We are a not-for-profit electrical cooperative serving approximately 13,850 meters.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	✓ No
	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?	[√] No
	If "Yes," describe these changes on Schedule O.	<u></u>
4	Describe the organization's program service accomplishments for each of its three largest program services, as meas	sured 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 \$including grants of \$) (Revenue \$	
	Sale of electric power to members - 13,847 active members were provided power at year end at a cost on a cooperative basis t	
	the allocation of patronage capital.	
	**************************************	
		/
	Wannandarabdaannaannaannaannaannaannaannaannaanna	
45.	(Onder All Transport & All Tra	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	)
	***************************************	
	V=====================================	
	**************************************	
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	)
	###~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4ค	Total program service expenses ▶	

Part	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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<b>V</b>
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		1
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		1
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		<b>V</b>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	<b>√</b>	
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		1
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	1	
d	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	11d		<b>√</b>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓	
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	11f		<b>✓</b>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	<b>√</b>	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>                                     </b>
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		1
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		1
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? If "Yes," complete Schedule F, Parts III and IV.	16		1
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		1
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		/
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		1
<b>2</b> 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		<b>√</b>
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		1

Part	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 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
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	<b>√</b>	
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		<b>√</b>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<b>√</b>
С	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 of any of these persons? If "Yes," complete Schedule L, Part II	26		✓
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	·	<b>√</b>
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		✓
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "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		✓_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>✓</b>
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		1
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		1
34	or IV, and Part V, line 1	34 35a		1
35a b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		<b>√</b>
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<b>√</b>
38	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		<b>√</b>
Part		38	<u> </u>	<u></u>
	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 1a 38	5		
þ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		

cli	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	ı ı r	V-140-0314-035	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
1.	Statements, filed for the calendar year ending with or within the year covered by this return 2a 64	OL		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	<b>Y</b>	6831
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		./
3a b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i> .	3b		<b>v</b>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	CD		
4a	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
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	N/South Committee	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
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		<b>√</b>
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		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		<b>/</b>
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		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		5.83
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		<b>/</b>
9	Sponsoring organization have excess business holdings at any time during the year?			l V
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<b>/</b>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<del>                                     </del>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b N/A			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	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		I skeasows
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	l	800	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	ISA		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b> </b>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		-
15	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		<b>  √</b>
46	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		1
16	If "Yes," complete Form 4720, Schedule O.	10		l v

Part \	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	s on Schedule O.	See in		
	Check if Schedule O contains a response or note to any line in this Part VI				
Section	on A. Governing Body and Management				ı
_		1 . 1	20/29/2023/6/7	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4		
	If there are material differences in voting rights among members of the governing body, or		5526		
	if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent .	1b	,		
	Did any officer, director, trustee, or key employee have a family relationship or a business	<u> </u>			
2	any other officer, director, trustee, or key employee?		2	\$3555E	<b>√</b>
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, trustees, or key employees to a management company or o	ther person?.	3		1
4	Did the organization make any significant changes to its governing documents since the prior For		4		<b>√</b>
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets? .	5	,	<b>✓</b>
6	Did the organization have members or stockholders?		6	✓	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		7a	✓	
b	Are any governance decisions of the organization reserved to (or subject to approva		l		,
	stockholders, or persons other than the governing body?		7b		
8	Did the organization contemporaneously document the meetings held or written actions ur	idertaken during			
	the year by the following:		0-		
a	The governing body?		8a 8b	<b>√</b>	
b	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be supported in the province of the provinc	ot be reached at	00	· V	
9	the organization's mailing address? If "Yes," provide the names and addresses on Schedule	0	9		<b>✓</b>
Section	on B. Policies (This Section B requests information about policies not required by the	e internai Reve	nue C	oae., Yes	
40a	Did the organization have local chapters, branches, or affiliates?		10a	168	No /
10a b	If "Yes," did the organization have written policies and procedures governing the activities of				*
	affiliates, and branches to ensure their operations are consistent with the organization's exen		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body bef	-	11a		<b>Y</b>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a		
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	o rico to conflicte?	12b	<b>√</b>	<del> </del>
	Did the organization regularly and consistently monitor and enforce compliance with the		120	\ \ \	<del>                                     </del>
С	describe in Schedule O how this was done	policy in res,	12c	1	
13	Did the organization have a written whistleblower policy?		13	<b>-</b>	1
14	Did the organization have a written document retention and destruction policy?		14	1	<u> </u>
15	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				
а	The organization's CEO, Executive Director, or top management official		15a	✓	
b	Other officers or key employees of the organization		15b	✓	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim with a taxable entity during the year?		16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	n to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?		16b		
Secti	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶ CO				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable	e), 990, and 990			
	(3)s only) available for public inspection. Indicate how you made these available. Check all the ☑ Own website ☑ Another's website ☑ Upon request ☑ Other (explain on S				
19	Describe on Schedule O whether (and if so, how) the organization made its governing doc	•	of inte	rest r	oolicy.
20	and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organizati				. , ,
	Inshua Hainey, 170 W. 10th Ave., Nucla. CO. (970) 864-7311	on a sound and h	. J J I I I I		

Page	

Form 990 (2019)

## 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, 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 if neither the organization nor any related organization compensated any current officer, director, or trustee.

Check this box it fielther the organization no	Tarry Tolato	<u> </u>	uine		) C)	ompo	iiou	Coa any content		1
(A)	(B)	(da m			ition			(D)	(E)	(F)
Name and title	Average	(do not check more than one box, unless person is both an						Reportable	Reportable	Estimated amount
	hours per week		<del>-</del>		F	or/trusi	<del></del>	compensation from the	compensation from related	of other compensation
	(list any	or d	l E	Officer	Key employee	emp High	Former	organization	organizations	from the
	hours for related	/idua	Ę.	ĕ	em Em	lest o	럩	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	organizations	약	na.		ojoye	e SS	ļ			_
	dotted line)	Individual trustee or director	Institutional trustee		%	pens				
			ee			Highest compensated employee				
(1) William Felicelli	15									
President		✓	<u> </u>	✓	<u> </u>			19,551		
(2) David Alexander	15	,		١.						
Vice President	<u> </u>	<b>✓</b>	<u> </u>	✓	$\vdash$			18,163		
(3) Doylene Garvey	20	,		,						
Secretary		<b>✓</b>	<u> </u>	✓	<u> </u>	ļ	-	18,163		
(4) Deborah Cokes	15	,		,						
Vice Secretary		<b>/</b>	-	✓			⊢	17,151		
(5) Terry Rhoades	30	,							e e de caracteristica de la ca	
Director		<b>1</b>			_		_	16,663		
(6) Kevin Cooney	12	,					1	_		
Director	1	<b>/</b>			-	-	-	9,631		
(7) Jack Sibold	6	١,								
Director		✓	├	-	ऻ		<del> </del>	16,361		
(8) Bradley Zaporski	50			١,	١,					
CEO/General Manager	<u> </u>	ļ	ļ	<b>✓</b>	<b>✓</b>		<del> </del>	261,662		146,624
(9) William Mertz	55	ł			١,					
Chief Financial Officer	<u> </u>	<u> </u>	<u> </u>	┢	<b>√</b>		-	145,319		44,004
(10) Elmer Riley	40	-				١,				
Manger of Engineering		-	┡	<u> </u>	<u> </u>	<b>-</b>	-	147,269		6,188
(11) Duane Oliver	50	ł				١,				
Manager of Operations		-	1			<b>-</b>		143,297		23,465
(12) Doug Tea	45					,				
Manager of IT		ļ			-	<b>/</b>	┢	129,980		32,217
(13) Clint Colson	50	-				,				
Working Foreman	<u> </u>		-	<u> </u>	-	<b>/</b>	$\vdash$	124,980		157,127
(14) Jeffery Shea	50	-				,				
Working Foreman			<u> </u>	<u> </u>		✓	L	122,045		83,704

Part	VII Section A. Officers, Directors, 1	Γrustees,	Key I	Emj	plo	yee	s, an	d F	lighest Compe	nsated I	≖mplo	yees (continued)
	(A) Name and title	(B) Average hours	box,	unles	Pos neck ss pe	erson	e than o is both or/trust	ı an	(D)  Reportable compensation	(E) Report compens	able sation	(F) Estimated amount of other
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from rel organiza (W-2/1099	itions	compensation from the organization and related organizations
(15)										<u> </u>		
(16)					•	<u> </u>						
(17)												
(18)			-									
(19)			-									
(20)				<u> </u>	-	ļ		ļ				
(21)				<u> </u>								
(22)			1			-						
(23)												
(24)			-									
(25)			-								<u> </u>	
1b c d	Subtotal	VII, Section	n A					<b>▶</b>	1,190,235			493,329
2	Total (add lines 1b and 1c)  Total number of individuals (including bu reportable compensation from the organ	t not limited						e) w	1,190,235 who received more 19		00,000	493,329 of
3	Did the organization list any former employee on line 1a? If "Yes," complete	officer, dire	ector,	tru uch	iste	e, I	key e	mp	loyee, or highes	st compe	nsatec	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re greater th	porta an \$	ble 150,	con ,000	npe 0? /	nsatic If "Ye	on a s,"	and other compet complete Sched	nsation fr	om the	
5	Did any person listed on line 1a receive of for services rendered to the organization											The second secon
Secti	on B. Independent Contractors		······································									
1	Complete this table for your five high compensation from the organization. Rep											
	<b>(A)</b> Name and business add	lress							(B) Description of serv	lces		(C) Compensation
ASPLU	JNDH TREE EXPERT, LLC							Tre	ee Trimming			605,156
	OLD CHAPMAN & GEYER PC							-	gal			200,168
NISC								Op	perating System			280,410
2	Total number of independent contractor received more than \$100,000 of compens							) ti	hose listed abov	e) who		

Part	VIII	Statement of Revenue			P 1 11 1 12	1.3.4114		
		Check if Schedule O contains a re-	spon	se or note to an	y line in this Pa (A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
					, , , , , , , , , , , , , , , , , , , ,	function revenue	business revenue	from tax under sections 512–514
ıts ts	1a	Federated campaigns	1a					
iran	b	Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	C	Fundraising events	1c					
Sift ar /	d	Related organizations	<u>1d</u>					
imi.	e	Government grants (contributions)	1e		0.000.00		566554	
tion sr S	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
효	g	Noncash contributions included in					6.87500000	666666
ontr od O	-	lines 1a-1f	1g	\$				
ਤੋਂ ਠੱ	h	Total. Add lines 1a-1f		🕨				
<i>a</i> v				Business Code				
Program Service Revenue	2a	Electric Sales & Services		221000		29,089,520	Į.	
Ser	b	Allocated Patronage Credit		221000		691,506		
yram Ser Revenue	c d							
Re	е							
Pro	f	All other program service revenue .						
	g	Total. Add lines 2a-2f		······································	29,781,026			
	3	Investment income (including divid						
	4	other similar amounts)						214,240
	4 5	Royalties	•					
	Ŭ	(i) Real		(ii) Personal				
	6a	Gross rents 6a						
	b	Less: rental expenses 6b					a dresale a	
	C	Rental income or (loss) 6c		<u> </u>				
	d	Net rental income or (loss)	·	/III Other				
	7a	Gross amount from	es	(ii) Other				
		sales of assets other than inventory 7a				8 810 8 5 6 6	662676	Carrier.
Φ	b	Less: cost or other basis						
Revenue		and sales expenses . 7b						
³e∨	C	Gain or (loss) 7c	····					
	d	Net gain or (loss)	•	🕨				
Othe	8a	Gross income from fundraising events (not including \$			0000668	28 (6) (6) (6) (6)		
_		of contributions reported on line						
		1c). See Part IV, line 18	8a		50 July 50 Style 16			
	b	Less: direct expenses	8b					
	C	Net income or (loss) from fundraisin	g eve	nts 🕨		6 4 5 5 5 5 5		
	9a	Gross income from gaming						
	b	activities. See Part IV, line 19 . Less: direct expenses	9a 9b				es de sancembración	
	G	Net income or (loss) from gaming ac		es <b>&gt;</b>				
	10a	Gross sales of inventory, less						
		returns and allowances	10a	23,041				
	b	Less: cost of goods sold	10b				23869S	
	С	Net income or (loss) from sales of in	vento		2,814			
sno	110	Not Fiber Ontic		Business Code	/00 40°			
nec	11a b	Net Fiber Optic Net Asset Disposals		221000 221000	(22,432) 2,710			
Miscellaneous Revenue	C			22 1000	2,730			<u> </u>
<u> </u> ଅକ୍ଷ	d	All other revenue						
2	е	Total. Add lines 11a-11d		>	(19,722)		51 (2015) 52 (2015)	
	12	Total revenue. See instructions .		<u> </u>	29,978,358			

	IX Statement of Functional Expenses				
Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All	other organizations	must complete coll	ımn (A).
	Check if Schedule O contains a response	or note to any line	in this Part IX .		<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> 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				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	1,000,000 713,292			
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	4,024,772			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,072,632			
9	Other employee benefits	976,099			
10	Payroll taxes	400,349			
11	Fees for services (nonemployees):				
а	Management				
b	Legal	204 642			
C	Accounting	294,643			
_		16,611			
d	Lobbying				
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 (A) amount, list line 11g expenses on Schedule O.) .				
12	Advertising and promotion	109,784			
13	Office expenses	147,734			
14	Information technology				
15	Royalties		71,70		
16	Occupancy				
17	Travel	21,658			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	21,000			
19	Conferences, conventions, and meetings .	103,077			
20	Interest	1,192,369			
21	Payments to affiliates			<u> </u>	
22	Depreciation, depletion, and amortization .	2,349,822			
23	Insurance	174,364			
24	Other expenses, Itemize expenses not covered	24 (2) (a) (b) (c) (b)			
	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.)				
а	Cost of Power	16,415,406			
b	Dine	79,508			
C	Maint of Canaral Plant	270,025			
d	***************************************	210,025			
	All other expenses				
e 05	All other expenses		-		
25	Total functional expenses. Add lines 1 through 24e	29,362,145			
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)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . . (A) (B) End of year Beginning of year Cash-non-interest-bearing . . . . . . . . . . . . . 1 1 640,443 2,378,326 2 Savings and temporary cash investments . . . . . . 2 3,629,092 2,056,886 3 3 4 3,414,471 2,992,324 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 Assets 8 1,128,619 8 1,045,668 Prepaid expenses and deferred charges 9 9 114,875 494,184 Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D . . . 10a Less: accumulated depreciation . . . . . 10b b 30,755,316 57,843,794 10c 60,696,961 Investments—publicly traded securities . . . . . 11 11 Investments—other securities. See Part IV, line 11 . 12 12 13 Investments—program-related. See Part IV, line 11. 17,935,990 13 18,008,206 14 14 Other assets. See Part IV, line 11 . . . . . . . . . 15 15 114,687 114,688 16 Total assets. Add lines 1 through 15 (must equal line 33) . . . . . 16 84,821,971 87,787,244 17 Accounts payable and accrued expenses . . . . . . . 17 3,459,025 3,759,422 18 18 19 19 850,000 1,250,000 Tax-exempt bond liabilities . . . . . . . . . . . . 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . . 21 22 Loans and other payables to any current or former officer, director, iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . 22 Secured mortgages and notes payable to unrelated third parties . . . 23 23 30,099,058 32,833,778 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 3,453,193 3,318,305 26 Total liabilities. Add lines 17 through 25 . . . . . . 26 37,861,276 41,161,505 Organizations that follow FASB ASC 958, check here ▶ □ Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions . . . . . 27 28 28 Organizations that do not follow FASB ASC 958, check here ▶ □ and complete lines 29 through 33. 29 29 30 Pald-In or capital surplus, or land, building, or equipment fund . . . . . 30 31 Retained earnings, endowment, accumulated income, or other funds . . . 31 46,960,695 46,625,739 32 46,960,695 32 46,625,739 33 33 84,821,971 87,787,244

m		4	1
raq	е	- 1	4

	(40.00)			ı cış	90
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<b>√</b>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		29,97	8,358
2	Total expenses (must equal Part IX, column (A), line 25)	2		29,36	2,145
3	Revenue less expenses. Subtract line 2 from line 1	3		61	6,213
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		46,96	0,695
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		(931	,627)
9	Other changes in net assets or fund balances (explain on Schedule O)	9		(19	,542)
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
		10		46,62	5,739
Part XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				
			,	Yes	No
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," ex	plain	in 🔚		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .	F			✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	· · · · · · · · · · · · · · · · · · ·			-022-0-00-00-1
	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:				
	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 over				
	the audit, review, or compilation of its financial statements and selection of an independent accountar		2c	✓	Bodiosodiosii
	If the organization changed either its oversight process or selection process during the tax year, ex	plain c	m   n		
_	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in th			,
	Single Audit Act and OMB Circular A-133?		За		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	idits .	3b		
	F				(2019)