DLN: 93493318071939 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization VERMONT ELECTRIC COOPERATIVE INC D Employer identification number B Check if applicable ☐ Address change 03-0164375 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite □ Application pending (802) 635-2331 City or town, state or province, country, and ZIP or foreign postal code Johnson, VT $\,$ 05656 $\,$ G Gross receipts \$ 84,882,133 Name and address of principal officer H(a) Is this a group return for Rebecca Towne □Yes ☑No subordinates? 42 Wescom Road H(b) Are all subordinates Johnson, VT 05656 ☐ Yes ☐No included? Tax-exempt status ☐ 501(c)(3) **☑** 501(c) (12) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW VERMONTELECTRIC COOP L Year of formation 1938 M State of legal domicile VT Summary 1 Briefly describe the organization's mission or most significant activities Electric service to approximately 39,225 metered accounts located in 74 towns in Vermont. Sales of approximately 459,995 MWH's of Activities & Governance 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) . . . 4 12 Number of independent voting members of the governing body (Part VI, line 1b) 123 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 7b b Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 0 8 Contributions and grants (Part VIII, line 1h) . 9 Program service revenue (Part VIII, line 2g) . 77,416,892 79,281,680 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 4,391,008 5,522,550 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 81,807,900 84.804.230 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 6,705,153 14 Benefits paid to or for members (Part IX, column (A), line 4) . 4,295,481 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 11,200,708 11,407,732 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 63,902,039 69,101,017 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 81,807,900 84,804,230 19 Revenue less expenses Subtract line 18 from line 12 . Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 176,829,631 180,688,394 102,089,233 21 Total liabilities (Part X, line 26) . 101,295,365 78,599,161 22 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, 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 2019-05-10 Signature of officer Sign Here Michael Bursell Chief Financial Officer Type or print name and title Date Print/Type preparer's name Preparer's signature Check | If Paid self-employed Firm's name Firm's EIN ▶ Preparer Use Only Firm's address ☐ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018) Cat No 11282Y

Form	990 (2018)					Page 2				
Pa	art III Statement o	of Program Service	e Accomplisi	hments						
	Check if Schedi	ule O contains a respo	onse or note to a	any line in this Part III		<u> </u>				
1	Briefly describe the or	ganızatıon's mıssıon								
	nont Electric Cooperative ibers	e is a member owned	not-for-profit ut	ılıty whose mıssıon ıs	to provide energy and other appropi	rate services to its				
2	Did the organization u	Did the organization undertake any significant program services during the year which were not listed on								
	the prior Form 990 or	🗌 Yes 🗹 No								
	If "Yes," describe thes									
3	Did the organization co	ease conducting, or n	nake significant o	changes in how it cond	ducts, any program					
	services?					☐ Yes 🗹 No				
4				ats for each of its three	e largest program services, as meas	ured by expenses				
•	Section 501(c)(3) and expenses, and revenue	501(c)(4) organization	ons are required	to report the amount	of grants and allocations to others,	the total				
4a	(Code) (Expenses \$	84 804 230	including grants of \$	0) (Revenue \$	84,804,230)				
-14	See Additional Data	, (ΣΑΡΘΙΙΘΟΘ Φ		meraanig grante er p	σ γ (ποτέπασ φ					
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)				
4c	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)				
4d	Other program service (Expenses \$	•	ule O) uding grants of	¢	0) (Revenue \$	0)				
4-	Total program servi		84,804,2	<u> </u>	o / (Nevenue φ					
<u>4e</u>	rotal program servi	ce expenses F	04,004,2	J0		Form 990 (2018)				

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Form	Form 990 (2018)							
Pa	t IV 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		No				
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No				
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		No				
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						
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		No				
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		No				
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		No				
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No				
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		No				
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No				
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	Yes					
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	Yes					
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		No				

Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

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 🕏

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🛸

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Nο

Nο

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Form **990** (2018)

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Yes

Yes

Yes

Pai	Checklist of Required Schedules (continued)			
			Yes	No
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? <i>If "Yes," complete Schedule J </i>	23	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
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		No
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		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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 related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Page 4

1a

1b

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1c

Yes | Form **990** (2018)

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

7d |

10a

10b

11a

11b

12b

13b

13c

7e 7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

Nο

Form **990** (2018)

75,160,493

9,133,750

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

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? 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?

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

d If "Yes," indicate the number of Forms 8282 filed during the year

Sponsoring organizations maintaining donor advised funds.

a 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

b Gross income from other sources (Do not net amounts due or paid to other sources

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders . the following

13

Section C. Disclosure

Page **6**

Νo

Nο

Nο

Nο

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7a

7b

8a

8b

10a

10b

11a

12a

12b

12c

13

14

15a

15b

16a

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Form 990 (2018)

Yes

Yes

Yes

Yes

Yes

Pa	TVI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Ne	o" resp	onse to	lines						
	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			✓						
Section A. Governing Body and Management										
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 12									
	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 committee, explain in Schedule O									
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No						
3	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									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Nο						

Did the organization become aware during the year of a significant diversion of the organization's assets? .

Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,

Did the process for determining compensation of the following persons include a review and approval by independent

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

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest

State the name, address, and telephone number of the person who possesses the organization's books and records

and branches to ensure their operations are consistent with the organization's exempt purposes?

12a Did the organization have a written conflict of interest policy? If "No," go to line 13 . . .

Did the organization have a written whistleblower policy?

Did the organization have a written document retention and destruction policy? .

a The organization's CEO, Executive Director, or top management official

status with respect to such arrangements?

only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website Upon request Other (explain in Schedule O)

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

List the States with which a copy of this Form 990 is required to be filed▶

policy, and financial statements available to the public during the tax year

►Michael Bursell 42 Wescom Road Johnson, VT 05656 (802) 730-1153

b Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . .

persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Did the organization have members or stockholders?

10a Did the organization have local chapters, branches, or affiliates? .

Each committee with authority to act on behalf of the governing body? .

(13) Christine Hallquist

(14) Rebecca Towne

(15) Michael Bursell

Chief Financial Officer

(16) Peter Rossi

Chief Executive Officer-Thru 3/2018

Chief Executive Officer - Began 10/2018

year

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
- 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"

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

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee)
- organization and any related organizations • List all of the organization's former officers, key employees, or 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

Check this box if neither the organization no	r any related oi	ganızat	ion c	omp	ens	ated a	any (current officer, dire	ctor, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Positio tha pers	n (do an on on is	(C) o not e bot both) t che ix, u n an or/tr		ore	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			1			1				
(1) Daniel Carswell Director - President	4 0	x						9,350	0	16
(2) George Lague Director - 1st Vice President	5	х						8,110	0	16
(3) Carol Maroni Director - 2nd Vice President		х						10,030	0	16
(4) John Ward Director - Treasurer	4	х						10,760	0	16
(5) Mark Woodward Director - Secretary	5	×						7,730	0	16
(6) Thomas Bailey Director	6	×						7,750	0	665
(7) Ken Hoeppner Director	4	х						10,630	0	7
(8) Don Worth Director	0	х						6,700	0	7
(9) Rıch Goggın Dırector	6	х						8,030	0	16
(10) Richard Westman Director	4	х						5,400	0	16
(11) Paul Lambert Director	2	х						8,390	0	0
(12) Charlie Van Winkle	16	×						4,450	0	0

Χ 179,199 31,114 Chief Operating Officer Ω 45 (17) Victoria Brown Х 203,199 0 14.592 General Counsel Form 990 (2018)

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71,557

48,508

232,302

6,441

2.854

33,779

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Ω 50

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0 55 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Page 8

Part VII Section A. Officers, Directors	s, Trustees, K	ey cm	pioy	ees	, ar	на під	ines	st Compensated	employees (co	ontii	nuea)	
(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one booth a direct	ox, ι in of tor/t	t ch unle ficer rust	<u> </u>	son	(D) Reportable compensation from the organization (W- 2/1099-MISC)	,		Estima Estima amount o compen from organizat	ated of other sation the ion and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)		relat organiz	
(18) Mark Hinton 1st Class Lineworker-Group Leader	61 					х		188,261		0		62,905
(19) Gary Young 1st Class Lineworker	62 					×		186,318		0		54,385
(20) Christopher Connelley 1st Class Lineworker	58 مــــــــــــــــــــــــــــــــــــ					×		171,357		0		15,404
(21) Alan Esposito 1st Class Lineworker	57 					×		164,913		0		28,255
										+		
										+		
1b Sub-Total					Ь.	Η_						
c Total from continuation sheets to Part V				•	,	\vdash						
d Total (add lines 1b and 1c)	•				,	•		1,542,944	0			250,520
Total number of individuals (including but of reportable compensation from the organization)		those li	sted	abov	/e) v	vho re	ceiv	ed more than \$100,	,000			
3 Did the organization list any former offic line 1a? If "Yes," complete Schedule J for				emp	loye -	e, or h	nghe	est compensated en	nployee on	_	Yes	No
4 For any individual listed on line 1a, is the organization and related organizations grandividual	sum of reporta eater than \$150	ble com 0,000? 1	İf "Ye						ne	4	Yes	No
5 Did any person listed on line 1a receive of services rendered to the organization? If '									lual for	5		No
Section B. Independent Contractors	1											
Complete this table for your five highest from the organization Report compensation.	compensated in ion for the calei								tax year	ens		
Name and b	(A) ousiness address							Descript	(B) ion of services		(C Compen	
Trees LLC 1700 Solutions Center								Tree Clearing			1,	581,315
Chicago, IL 60677 TTS Tree Service LLC								Tree Clearing				981,689
3985 County Route 27 Russell, NY 13684												
New England Tree Experts Inc PO Box 504								Tree Clearing				914,726
Hardwick, VT 05843 Trees R Us LLC								Tree Clearing				518,269
PO Box 55 Greensboro Bend, VT 05842 Goodhue Excavation Inc								Contractor - Ex	cavation			303,172
327 Barry Road Fairfield, VT 05455												·
2 Total number of independent contractors (in compensation from the organization ► 17	ncluding but not	t limited	to t	hose	e list	ed abo	ove)	who received more	than \$100,000		Form 99 () (2010)
1											rorm 991	

Part	•	Statement of	Revenue									rage 3
		Check if Schedul	e O contains a	a respo	nse or note t	o any line in	this Part VIII					🗆
							(A) revenue	Rel e> fu	(B) ated or cempt nction	Unre busii reve	lated ness	(D) Revenue excluded from tax under sections
	1a	Federated campaig	ns	1a				re	venue			512 - 514
nts ints		Membership dues		1b								
Gifts, Grants illar Amounts	С	Fundraising events		1c								
\$, T	d	Related organizatio	ns	1d								
<u>≣</u>	e	Government grants (co	ontributions)	1e		<u> </u>						
ns, Sim	f	All other contributions	, gıfts, grants,									
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts n above	ot included	1f								
들		Noncash contribution										
Cont and		In lines 1a - 1f \$ Total. Add lines 1a-	_1f									
S P	"	Total. Add lines 1a	-11	•			0					
ЖIе	3- B	Related Electric Operatii	na Income		Bu	siness Code	78,	846,522	78,84	16,522		0 0
Revenue		Related Electric Non-Op				221000		435,158	43	35,158		0 0
ar C⊈	-	telated Electric Holl op	eracing meetine			221000						
۲۷۹C	c -			_								
38	d -											
Program Service	f A	All other program se						0		0		0 0
Pro		otal. Add lines 2a-2				79,281,680)					
		ivestment income (ii			nterest and	other		1				
	sın	nılar amounts) .				▶]	5,594,09			D	0	5,594,093
		come from investme			ond proceeds			0		0	0	0
	5 K	oyalties	(ı) Real		(II) Perso	nal nal		1		1	0	
	6a (Gross rents	(i) itea		(11) 1 2130	- I						
		Lana routal avenues										
	b	Less rental expenses										
		Rental income or (loss)		0		0						
		Net rental income o	r (loss)									
	_	Tree remainments	(i) Securit		(II) Othe	er er						
	7a 🤄	Gross amount from sales of		0		6,360						
	а	issets other han inventory		U		6,360						
		·										
	_	Less cost or other basis and sales expenses		0		77,903						
		Gain or (loss)		0		-71,543						
	d	Net gain or (loss) .		•		<u> </u>	-71,54	3	(ס	0	-71,543
as.		Gross income from fi not including \$	_	ents of								
'n H	c	contributions reporte	ed on line 1c)									
Other Revenue		See Part IV, line 18 Less direct expense		a b								
r R		less direct expense Net income or (loss)			ents	<u> </u>						
the	9a (Gross income from g	jaming activiti									
0	5	See Part IV, line 19		a								
	bц	_ess direct expense	s	ь								
		Net income or (loss)		activit	ies	<u> </u>						
	10a	Gross sales of invent eturns and allowand	tory, less									
		cturns and anoward		a								
	bι	ess cost of goods s	sold	b								
	c N	Net income or (loss)		invent	ory	<u> </u>						
	11a	Miscellaneous	Revenue		Business C	Code						
	114											
	ь ⁻									1		
	,											
	c -									1		
	~											
	d Ā	All other revenue .								1		
		Fotal. Add lines 11a				•						
	12 T	Г otal revenue. See	Instructions			, 		0				
						-	84,804,23	0	79,281,680	기	0	5,522,550 Form 990 (2018)

Forr	m 990 (2018)				Page 10
	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anizations must com	olete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .			<u> \square</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	0			
4	Benefits paid to or for members	4,295,481			
5	Compensation of current officers, directors, trustees, and key employees	534,624			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	8,008,278			
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,016,001			
9	Other employee benefits	1,217,570			
10	Payroll taxes	631,259			
11	Fees for services (non-employees)				
ā	a Management	0			
ı	o Legal	165,410			
•	C Accounting	47,940			
•	1 Lobbying	70,375			
•	e Professional fundraising services See Part IV, line 17	0			
1	Investment management fees	0			
9	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	572,375			
12	Advertising and promotion	1,850			
13	Office expenses	882,036			
14	Information technology	509,490			
15	Royalties	0			
16	Occupancy	126,872			
17	Travel	703,717			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings	163,748			
20	Interest	3,749,496			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,938,910			
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a Purchased Power Expense	33,934,777			
	b Transmission Expense	10,809,381			
	c Tree Trimming Expense	3,374,783			
	d Property Tax Expense	3,096,971			
	e All other expenses	4,952,886			
25	Total functional expenses. Add lines 1 through 24e	84,804,230	0	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)				
	Check liefe F Li II following 50r 30-2 (ASC 350-720)				1

101111 330	(2010)			raye 11
Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part IX .			🗆
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	0	1	0
2	Savings and temporary cash investments	1,418,514	2	2,029,000
3	Pledges and grants receivable, net	0	3	0
4	Accounts receivable, net	12,928,099	4	11,247,457

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

persons Complete Part II of Schedule L .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

0 5

0 6

9

10c 11

12

13

15

16

17

18

20

21

22

23

24

25

26

27 28

29

30

31

32

33

34

5.061.766

475.939

117,956,626

32,981,578

1.636.302

4.370.807

176.829.631

11,249,334

89,629,539

416.492

101.295.365

75,534,266

75,534,266

176,829,631

0 14

0 19 0

0

4,954,850

117,524,338

37,250,739

2.653.678

4,577,610

180.688.394

13.078.636

0 0

0

n

0

0

88.615.217

395.380

102.089.233

78,599,161

78,599,161

180,688,394

Form **990** (2018)

450.722

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	2
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•	
•	
•	

Liabilities 22

Fund Balances

Assets or 30

Net

23

24

26

27

28

29

31

32

33

34

Form 990 (2018)

	Pledges and grants receivable, net		•					
4	Accounts receivable, net							
6	Loans and other receivables from current and fo trustees, key employees, and highest compensa Part II of Schedule L Loans and other receivables from other disqualif section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations (voluntary employees' beneficiary organizations (Part II of Schedule L	ted em ied pei 14958 tions o	rsons (as defined under (c)(3)(B), and f section 501(c)(9)					
7	Notes and loans receivable, net							
8	Inventories for sale or use							
9	Prepaid expenses and deferred charges							
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	166,997,480					
b	Less accumulated depreciation	10 b	49,473,142					
11	Investments—publicly traded securities .							
l	·							
12	Investments—other securities See Part IV, line :	11 .						
13	Investments—other securities See Part IV, line : Investments—program-related See Part IV, line							
	· ·		· · · · · · · · · · · · · · · · · · ·					
13	Investments—program-related See Part IV, line		· · · · · · · · · · · · · · · · · · ·					
13 14	Investments—program-related See Part IV, line Intangible assets	11 .						
13 14 15	Investments—program-related See Part IV, line Intangible assets	11 .						
13 14 15 16	Investments—program-related See Part IV, line Intangible assets	11 .						
13 14 15 16	Investments—program-related See Part IV, line Intangible assets	11 .						
13 14 15 16 17 18	Investments—program-related See Part IV, line Intangible assets	11 .						
13 14 15 16 17 18 19	Investments—program-related See Part IV, line Intangible assets	11 ·						

If the organization changed either its oversight process or selection process during the tax year, explain in 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?

3b Yes

1c If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3b Yes

Form 990 (2018)

Additional Data

Software ID: 18007995 Software Version: v1.00

EIN: 03-0164375

Name: VERMONT ELECTRIC COOPERATIVE INC.

Form 990 (2018)

Form 990, Part III, Line 4a:

Providing reliable electric service to approximately 39,225 metered accounts, with sales of approximately 459,995 MWH's

SCHEDULE D

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

DLN: 93493318071939 OMB No 1545-0047

Open to Public

Department of the Treasury

(Form 990)

		ov/Form990 for the latest information.		Inspection
Na VER	me of the organization RMONT ELECTRIC COOPERATIVE INC		Employer identifica	tion number
Pa	Organizations Maintaining Donor Advis Complete if the organization answered "Yes			
	complete if the organization anomered for	(a) Donor advised funds	(b)Funds and ot	her accounts
	Total number at end of year			
	Aggregate value of contributions to (during year)			
	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor organization's property, subject to the organization's exc		vised funds are the	☐ Yes ☐ No
	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?			e 🗌 Yes 🗌 No
Pa	rt II Conservation Easements. Complete if th	ie organization answered "Yes" on Form	າ 990, Part IV, line 7	
	Purpose(s) of conservation easements held by the organ	nization (check all that apply)		
	\square Preservation of land for public use (e g , recreation	n or education) \square Preservation of an $!$	historically important la	and area
	Protection of natural habitat	Preservation of a ce	ertified historic structur	re
	Preservation of open space			
	Complete lines 2a through 2d if the organization held a ceasement on the last day of the tax year	qualified conservation contribution in the form		nd of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic	c structure included in (a)	2c	
d	Number of conservation easements included in (c) acquistructure listed in the National Register	red after 7/25/06, and not on a historic	2d	
	Number of conservation easements modified, transferred tax year ▶	d, released, extinguished, or terminated by t	the organization during	the
	Number of states where property subject to conservation	n easement is located ►		
	Does the organization have a written policy regarding th and enforcement of the conservation easements it holds		of violations,	es 🗆 No
	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing co	nservation easements o	during the year
	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violations, and enforcing conserv	ation easements during	g the year
	Does each conservation easement reported on line 2(d)	above satisfy the requirements of section 17	70(h)(4)(B)(ı)	
	and section 170(h)(4)(B)(II)?		☐ Ye	es 🗌 No
	In Part XIII, describe how the organization reports consibalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement	footnote to the organization's financial stater		
ar	Organizations Maintaining Collections Complete if the organization answered "Yes		er Similar Assets.	
а	If the organization elected, as permitted under SFAS 11: art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, education, or research in fu		
b	If the organization elected, as permitted under SFAS 11: historical treasures, or other similar assets held for publ following amounts relating to these items			
((i) Revenue included on Form 990, Part VIII, line 1		▶ \$	
(i	ii)Assets included in Form 990, Part X		> \$	
	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1		ncial gain, provide the	

Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Par	t III	Organizations Ma	aintaining Collection	ns of A	Art, Hist	orical	Treas	sures, o	r Other	Similar A	ssets (cont	:inued)
3		ig the organization's acq is (check all that apply)	uisition, accession, and	other re	cords, che	ck any	of the	following	that are a	significant i	use of its co	lection
а		Public exhibition				d [Loa	n or exch	ange prog	ırams		
b		Scholarly research				e _] Oth	ner				
С		Preservation for future	e generations									
4		vide a description of the XIII	organization's collection	s and ex	kplain how	they fu	rther t	he organı	zation's ex	kempt purpo	se in	
5		ing the year, did the org ets to be sold to raise fur								ular	☐ Yes	□ No
Pa	rt IV		odial Arrangement ganızatıon answered		on Form 9	90, Pa	ırt IV,	line 9, o	r reporte	ed an amou	unt on Forr	n 990, Part
1a		ne organization an agent uded on Form 990, Part I		ther int	ermediary	for con	tributio	ons or oth	er assets	not	☐ Yes	□ No
ь	If "Y	res," explain the arrange	ement in Part XIII and co	omplete	the follow	ına tab	e			A	mount	
c		inning balance		,					1c			
d	_	itions during the year							1d			
е	Dıst	ributions during the year	r						1e			
f	End	ing balance							1f			
2a	Did	the organization include	an amount on Form 990	D. Part X	(. line 21.	for escr	ow or	custodial a	account lia	ability?	☐ Ves	 □ No
		es," explain the arrange										_ 110
	rt V		ds. Complete if the o									
			·	Current y		b) Prior y				(d)Three year		Four years back
1 a	Begin	ning of year balance .										
b	Contr	ibutions										
c	Net ır	nvestment earnings, gair	ns, and losses									
d	Grant	s or scholarships										
е		expenditures for facilities	es									
f	Admı	nistrative expenses .										
g	End c	f year balance										
2	Prov	vide the estimated perce	ntage of the current yea	ir end ba	alance (lin	e 1g, co	lumn ((a)) held a	as			
а	Boa	rd designated or quasi-e	ndowment 🟲									
b	Perr	manent endowment 🟲										
c	Tem	porarily restricted endov	wment 🟲									
3а	Are	percentages on lines 2a there endowment funds anization by				that are	held a	and admin	ustered fo	r the		Yes No
	_	unrelated organizations									3a(i)	+
	(ii)	related organizations .									3a(ii)	,†
b		'es" on 3a(II), are the re	-								3b	
4	Des	cribe in Part XIII the inte		zation's	endowme	nt fund	s					
Pa	rt VI			UV = = U		- 00	** (000	ا بر سا	
	Desc	ription of property	ganization answered (a) Cost or other basis (investment)		b) Cost or of					rm 990, Pa		Book value
_							247.25					4 247 252
	Land			0			,347,25			4 242 555		1,347,259
	Buildi	-		0			,204,69			1,313,553		2,891,143
		chold improvements		0				0		0		0
d	Equip	ment		0		59	,098,94	4		23,110,992		35,987,952

102,346,581

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

77,297,984

117,524,338

25,048,597

Part VII Investments—Other Securities. Complete See Form 990, Part X, line 12.	ıf the organization answer	ed "Yes" on Form 990, Part IV, lir	ne 11b.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market v	عاله
(Including name of security)		Cost of end-of-year market v	alue
2) Closely-held equity interests			
A) Vermont Electric Power Company - Stock	36,812,700	С	
B) New England Hydro Transmission - Stock C)	438,039	С	
D)			
E)			
F)			
G)			
Н)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 37,250,739		
Part VIII Investments—Program Related.			
Complete if the organization answered 'Yes' ((a) Description of investment	on Form 990, Part IV, line (b) Book value	11c. See Form 990, Part X, line 1 (c) Method of valuation	3.
	(-,	Cost or end-of-year market v	alue
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. Complete if the organization answ (a) Description			e 15 I Book value
1)	·		
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 15	1		
Part X Other Liabilities. Complete if the organization			
See Form 990, Part X, line 25. (a) Description of liability	(b) Book	value	
1) Federal income taxes		0	
Capital Leases		157,180	
Current Portion of Capital Leases Deferred Compensation		21,135 217,065	
4)			
5)			
6)			
7)			
8)			
9)			
	. 1	205 200	
Fotal. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the te	•	395,380	

Part XI

3

4

b

c

Part XII

5

1

2

c

d

3

4

b

Schedule D (Form 990) 2018

Page 4

1,838,594

84,458,157

346,073

84,804,230

78,251,774

1,838,594

76,413,180

8,391,050

84.804.230

Schedule D (Form 990) 2018

C	Recoveries of prior year grants
d	Other (Describe in Part XIII)
е	Add lines 2a through 2d

2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities	
С	Recoveries of prior year grants	
d	Other (Describe in Part XIII)	

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Other (Describe in Part XIII)

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Other losses

Other (Describe in Part XIII)

Add lines 2a through 2d . .

2b

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2c 2d

2a

4a

4b

2a 2b

2c

2d

4a

4b

1.838.594

346,073

1,838,594

8,391,050

2e

3

2e 3 4c

Schedule D (Form 990) 2018						
Part XIII Supplemental Info	nation (continued)					
Return Reference	Explanation					

Schedule D (Form 990) 2018

Additional Data

Software ID: 18007995
Software Version: v1.00

EIN: 03-0164375

Name: VERMONT ELECTRIC COOPERATIVE INC

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2	The Cooperative is a non-profit and non-stock membership corporation organized under provisions of the Electric Cooperative Act of Vermont. The Cooperative is an organization described in Section 501(c)(12) of the Internal Revenue Code and has been recognized by the Internal Revenue Service as an organization exempt from taxes on related income under Section 501(a). Consideration has been given to uncertain tax positions. The federal income tax returns for the years ended after December 31, 2015 remain open for potential examination by major tax jurisdictions, generally for three years after they were filed.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 2d	This amount equals the sale of excess purchased power, which is netted in purchased power expense on Form 990. Part IX. Line 24a

_ _ _

Supplemental Information	
Return Reference	Explanation
	This amount includes the following 1) Costs of \$319,758, which offsets related electric n on-operating for book purposes and 2) Renewable Energy costs of \$26,315, which offsets Renewable Energy Credits revenue for book purposes

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 2d	This amount equals the sale of excess purchased power, which is netted in purchased power expense on Form 990, Part IX, Line 24a

_ _ _

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4b	This amount includes the following 1) VEC Financial Statements list interest charges sepa rately from operating expenses. Interest charges are included on the Form 990, Part IX, Li ne 20 - \$3,749,496, 2) Non-Operating expense of \$319,758 was netted against non-operating revenue in the audited financials, however, is separated for purposes of the Form 990, 3) VEC's net income of \$4,295,481 is included in Functional Expenses Part IX, Line 4 for purpose of the Form 990, 4) Renewable Energy expense of \$26,315 was netted against Renewable Energy Credits revenue in the audited financials, however, is separated for purpose of the Form 990

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19331	8071	.939
Sch	nedule J	Co	mpensati	ion Information	10	1B No	1545-0	0047
(Forr	m 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.						3
Depar	tment of the Treasury	▶ Go to <u>www.irs.go</u>		to Form 990. instructions and the latest infori	mation.	pen t	o Pul	olic
	al Revenue Service me of the organiza	ation			Employer identificat		ectio	
	MONT ELECTRIC CO					ion ne	illibei	
Pa	rt I Questi	ons Regarding Compensa	tion		03-0164375			
	Questi	ons regarding compensati					Yes	No
1a				the following to or for a person liste y relevant information regarding the				
		s or charter travel		Housing allowance or residence for	•			
		companions	님	Payments for business use of perso				
		nification and gross-up payments	\$ ∐ □	Health or social club dues or initiati				
	□ Discretion	nary spending account	Ш	Personal services (e g , maid, chau	rreur, cner)			
b		xes in line 1a are checked, did th all of the expenses described abo		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1 b		
2				or allowing expenses incurred by all r, regarding the items checked in line	2 1 2 2	2		
	directors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked in line	e lar			
3	organization's C	EO/Executive Director Check all	I that apply Dor	d to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain				
	☐ Compens	ation committee	\checkmark	Written employment contract				
	· ·	ent compensation consultant	\checkmark	Compensation survey or study				
	☐ Form 990	of other organizations	\checkmark	Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cont	rol payment?			4a		No
b		r receive payment from, a suppl		ified retirement plan?		4b		No
c	Participate in, o	r receive payment from, an equi	ty-based comper	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	f provide the app	olicable amounts for each item in Par	t III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5	For persons liste		n A, line 1a, did t	the organization pay or accrue any				
а	The organization	n?				5a		
b	Any related orga					5b		
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any				
а	The organization	n?				6 a		
b	Any related orga					6b		
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Sectio escribed in lines 5 and 6? If "Yes		the organization provide any nonfixe rt III	d	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		
For F	Paperwork Redu	iction Act Notice, see the Ins	tructions for Fo	orm 990. Cat No. 5	50053T Schedule J	(Form	990)	2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MISC	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990	
Michael Bursell Chief Financial Officer	(i)	210,593	16,640	5,070	9,471	24,308	266,082	0	
	(ii)	0	0	0	0	0	0	0	
Peter Rossi Chief Operating Officer	(i)	157,379	12,563	9,256	7,689	23,425	210,312	0	
	(ii)	0	0	0	0	0	0	0	
3 Victoria Brown General Counsel	(i)	162,112	39,028	2,059	7,924	6,668	217,791	0	
Jeneral Counsel	(ii)	0	0	0	0	0	0	0	
4 Mark Hinton 1st Class Lineworker-Group	(i)	185,854	0	2,407	46,326	16,579	251,166	0	
Leader	(ii)	0	0	0	0	0	0	0	
5 Gary Young 1st Class Lineworker	(i)	185,714	0	604	37,917	16,468	240,703	0	
ISC CIdSS LINEWOLKER	(ii)	0	0	0	0	0	0	0	
6 Christopher Connelley 1st Class Lineworker	(i)	169,657	0	1,700	5,980	9,424	186,761	0	
TSC CIOSS FILLEMOLVEL	(ii)	0	0	0	0	0	0	0	
7 Alan Esposito 1st Class Lineworker	(i)	164,800	0	112	5,980	22,275	193,167	0	
1St Class Lineworker	(ii)	0	0	0	0	0	0	0	
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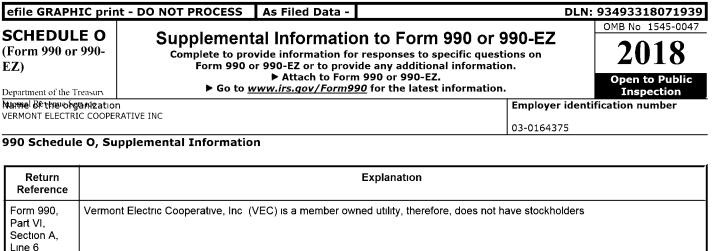
Schedule 3 (Form 990) 2010	Page 3			
Part IIII Supplemental Infor	mation			
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information				
Return Reference	Explanation			
Schedule J, Part I, Line 3	The CEO's compensation is performance based. The Board of Directors, as a whole, sets the CEO's goals and assesses performance during the CEO's contract year. The CEO's goals are primarily VEC's Strategic Plan and other objectives as given by the Board of Directors. If the core competencies in our strategic plan and other			

budgeting purpose The increase percentage amount, once approved, is the same for the CEO as it is for all other non-union employees. The Board of Directors does an assessment of the CEO's performance and awards the appropriate percentage of increase, which does not exceed the salary budget or the salary range

lobjectives have been met, the CEO has been successful Each year the Manager of Human Resource proposes a percentage increase to salaries as part of VEC's

Schedule 1 (Form 990) 2018

2018 Schedule 1



Return Explanation
Reference

Line 7a

Form 990, VEC has members who vote to elect a director to represent their district Part VI, Section A,

Return Explanation
Reference

Line 7b

Form 990,
Part VI,
Section A.

Yes, the organization needs approval from the members to make changes to bylaws or articles of incorporation

Return Explanation

s Board of Directors for their review, prior to submission

Line 11b

Form 990,
Part VI,
Section B,
The form is prepared in detail by VEC's Assistant Controller, then reviewed in detail by V
EC's Controller After the Controller's review is complete, the Form 990 is sent to VEC's
independent audit firm for their review Copies are also provided to the CEO, CFO and VEC'

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	Board Policy B 4 was initially approved on 1/25/2000 and was reviewed and revised on 6/24/ 14 The policy covers all Board Members of Vermont Electric Cooperative, Inc. Additionall y, all members of the Board are provided an IRS Form 990 questionnaire annually for comple tion and the responses are reviewed by VEC's Finance department for completeness. The Board d is responsible for enforcement of this policy on an ongoing basis. The Board's policy pr ovides all the requirements to be met by Directors and the process by which a violation wi. II be handled. All Directors are required to sign this policy. VEC also has Management Pol icy for Conflict of Interest that was approved 4/16/14 and reviewed by the Board of Direct ors on 5/12/14. The policy covers all employees of Vermont Electric Cooperative, Inc. All officers, highly compensated employees and key employees complete the IRS Form 990 questi onnaire annually. In addition, Human Resource provides a copy of VEC's Conflict of Interes t policy to employees during the on-boarding process. We review the details of the policy and obtain the employee's initials that we've reviewed the information. Previous to the fo rmal policy adoption, VEC posted the Conflict of Interest policy for employees on the Intr anet. The Chief Executive Officer is responsible for the administration and enforcement of this policy.

Return Reference	Explanation	
Form 990, Part VI, Section B, Line 15	VEC's Human Resource Department works with a third party to gather formal market data of a li positions at least every three years. All non-union positions were assessed by Hickok & Boardman in December, 2018. In the off years, VEC has access to the Vermont Salary Survey administered by Gallagher Flynn & Co., LLC, NRECA Compensation Survey, SHRM Compensation Data, VHRA Compensation data and our own compilation of local utility data are used in comparative analysis and to assess salary placement and increases to salary. A new salary bracket structure was recommended by Hickok & Boardman in 2018 and was implemented as part of the 2018 year-end and 2019 year start process. The salary brackets will be increased by 2 /3rds of the average non-union increase to salary annually. The salary survey data and comparisons mentioned above are used when preparing the headcount and salary budget and to he lip determine the increase pool. All employee officers, key employees and remaining non-union employees fall under the same assessment. This information is shared with the VEC Board of Directors and they use this information to determine the CEO's compensation.	

Return Explanation
Reference

Line 19

Form 990,
Part VI,
Section C,

VEC Bylaws are posted on our Website Governing documents are available upon member reques
t VEC Financial Statements are available on our Website, in the lobby at annual meeting o

Return Explanation Reference

Form 990. Other changes in net assets or fund balances of \$3,064,895 is a net of the following VEC' Part XI. Line s 2018 net income of \$4,295,481, less patronage retirements in the amount of \$1,230,586