Form 990

(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)

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

2019
Open to Public Inspection

<u>A</u>	For the	е 2019 с	alendar year, or tax year beginning , and ending	_	
В	Check if a	ipplicable	C Name of organization NORTHEASTERN RURAL ELECTRIC	D Employ	er identification number
$\sqcup$	Address c	change	MEMBERSHIP CORPORATION		
	Name cha	ange	Doing business as		)756490
一	Initial retui	uro.	Number and street (or P 0 box if mail is not delivered to street address)  Room/suite 4901 EAST PARK 30 DRIVE	E Telepho	-413-6111
님	Final retur		City or town, state or province, country, and ZIP or foreign postal code	1000	410 0111
Ц	terminated		COLUMBIA CITY IN 46725		ceipts \$ 106,530,702
Ц	Amended	return	F Name and address of principal officer	G Gross re	ceipis \$ 100,000,702
$\Box$	Application	n pending	· ·	group return for :	subordinates? Yes X No
_	••			subordinates incl	uded? Yes No
					(see instructions)
_	<del>_</del>			,	(
<u>+</u>	Website	npt status	THE NETTER COM		_
<u>, , , , , , , , , , , , , , , , , , , </u>				exemption number	737
	Part I	organization	X   Corporation   Trust   Association   Other ▶   L Year of formation	1930	M State of legal domicile L N
	' '		scribe the organization's mission or most significant activities TRIC DISTRIBUTION COOPERATIVE DELIVERING ELECTRICTY IN PART	C OF CT	v
၁င					
ı.		INDI	ANA COUNTIES; WHITLEY, ALLEN, HUNTINGTON, WABASH, NOBLE AND	NOSCIO	SNO.
& Governance	, ,	Chaak thi	is box ▶  if the organization discontinued its operations or disposed of more than 25% of its net ass	a ta	
တိ	1			3	9
•ර ග	1		of voting members of the governing body (Part VI, line 1a)  RECEIVED  RECEIVED	$\frac{3}{4}$	9
Activities					84
ţį			nber of individuals employed in calendar year 2019 (Part V, line 2a)  Discrete for volunteers (estimate if necessary)  Discrete for the property of the proper	5 6	0
ĕ	i		elated business revenue from Part VIII, column (C), line 12		0
			ated business taxable income from Form 990-T, line 39	7b	0
_	<u> </u>	NET UITTER		Year-J	Current Year
4	8 (	Contributi	ions and grants (Part VIII, line 1h)	<u>,, , , , , , , , , , , , , , , , , , ,</u>	0
Revenue	1			66,214	105,895,088
š		•	nt income (Part VIII, column (A), lines 3, 4, and 7d)	77,812	
ď			· · · · · · · · · · · · · · · · · · ·	24,844	
	1			68,870	
			nd similar amounts paid (Part IX, column (A), lines 1–3)	3,235	
	1		paid to or for members (Part IX, column (A), line 4)		0
G	1			57,060	8,625,975
Se	I		nal fundraising fees (Part IX, column (A), line 11e)		0
Expenses			draising expenses (Part IX, column (D), line 25) ▶ 0		
ŭ	1			04,558	94,286,667
	1			64,853	102,912,642
	19 F			04,017	3,559,059
20 0			Beginning of	Current Year	End of Year
Net Assets or Fund Balances	<b>20</b> T	Total asse	ets (Part X, line 16) 114, 9	08,393	114,883,232
t As	21 T	Total liabi	lities (Part X, line 26) 59, 6	14,884	57,510,157
		Vet asset	s or fund balances Subtract line 21 from line 20 55, 2	93,509	57,373,075
_ <u>P</u>	art II	Sig	gnature Block		
Ą	nder pen	nalties of p	perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the	pest of my kno	owledge and belief, it is
35	e, corre	ect, and co	omplete Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	ige	
3		-	Est.		
Sig	jn	Sı	ignature of officer	Date	
He	re	<b> </b>	perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the emplete Declaration of preparer (other than officer) is based on all information of which preparer has any knowled agnature of officer  ERIC JUNG  PRESIDENT &	<u>CEO</u>	
		13	ype or printi name and title		
M A Pai∉	.	Print/Type	preparer's name Preparer's signature Date	Check	If PTIN
		MARK J		03/20 self-em	
_	parer	Firm's nam		Firm's EIN	<u> 35-1679361</u>
ડુ∪se	Only	1	110 W BERRY STREET, STE. 2202		0.00 .00 0.00
<u> </u>		Firm's add		Phone no	260-423-9405
_			s this return with the preparer shown above? (see instructions)		X Yes No
For DAA	Paperwo	ork Redu	ction Act Notice, see the separate instructions		Form <b>990</b> (2019)

Form 990 (2019)	NORTHEASTERN RURA		0756490	Page <b>2</b>
	Statement of Program Serv	•	Daw III	
	Check if Schedule O contains cribe the organization's mission	s a response or note to any line in this	Part III	
ELECTR	IC DISTRIBUTION CO	OPERATIVE DELIVERING EL Y, ALLEN, HUNTINGTON, W		
prior Form	ganization undertake any significant p 990 or 990-EZ? escribe these new services on Sched	rogram services during the year which were not ule O	listed on the	Yes X No
services?	-	e significant changes in how it conducts, any prog	gram	Yes X No
4 Describe the expenses		complishments for each of its three largest progr inizations are required to report the amount of gr		
4a (Code DISTRIE	)(Expenses \$ BUTION OF ELECTRIC	including grants of \$ ITY TO RURAL CUSTOMERS	) (Revenue \$	)
4b (Code N/A	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c (Code N/A	) (Expenses \$	including grants of \$	) (Revenue \$	)
(Expenses			(Revenue \$	)
4e Total progr	am service expenses >			Form <b>990</b> (2019)

candidates for public office? If "Yes," complete Schedule C, Part I



Yes

Partily

**Checklist of Required Schedules** 

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"
	complete Schedule A
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to

- 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
- 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
- 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
- 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
- Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 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
- 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
- If the organization's answer to any of the following questions is "Yes." then complete Schedule D. Parts VI. VII, VIII, IX, or X as applicable
  - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- 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
- c 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
- 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
- Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X
- Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII
  - 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
- 13 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?
- 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
- 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
- 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
- 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)
- 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
- 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
- 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?
- 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

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20b X			X
21 X			_X_
21 X Form <b>990</b> (2019)	20b		
Form <b>990</b> (2019)	21		X
	 Forr	<sub>n</sub> 990	(2019)

<u> P</u>	art IV Checklist of Required Schedules (continued)		Ιν	T
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	Γ	Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	}
24a				T
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		Ì	
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1	ì	
	to defease any tax-exempt bonds?	24c	<u> </u>	<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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	<u> </u>	↓
b	3-9			1
	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	ļ	₩
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%		İ	1 ,
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	<del> </del>	X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part		-	$\vdash $
20	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? <i>If</i>			ļ
<u> </u>	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	100	İ	1
_	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	ļ
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		<del> </del>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		•	1,,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		v	
	19? Note: All Form 990 filers are required to complete Schedule O	_ 38	X	
	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1-	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	ſ-	162	INO
1a h	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1a 36			1
b c	Did the organization comply with backup withholding rules for reportable payments to vendors and	$\dashv$		
·	reportable gaming (gambling) winnings to prize winners?	1c	X	
				4

F <sub>i</sub> , C	Statements Regarding Other IRS Filings and Tax Compliance (Continu	ea)			r	r
2-	False the number of applications are ded as Farm W. 2. Transmitted of Ware and Tax			Alirtykyd;	Yes	No Æ#:₩
28	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	,	84			
L	Statements, filed for the calendar year ending with or within the year covered by this return	_2a	04	15415		RIM
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
3a	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	ority o	or	30		
<del>-</del> 1a	a financial account in a foreign country (such as a bank account, securities account, or other financial acc			42		Х
b	If "Yes," enter the name of the foreign country	county	•	4a		<b>一位</b>
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial According to the following th	ounte (l	ERAD)	屬款		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Junis (i	FDAR)	5a	mitte as	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	2		5b	<u> </u>	X
c	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			- <del></del>		-
Vu.	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions of	or		- 00		<del>                                     </del>
-	gifts were not tax deductible?	<b>.</b>		6b		
7	Organizations that may receive deductible contributions under section 170(c).			and the second	Marie 15	1973年
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	1c				
_	and services provided to the payor?			7a	estante.	311111111111111111111111111111111111111
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
Ī	required to file Form 8282?			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra			7e	ANT HOUSE	de -del 47
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 8		s required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		•	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained b		0 1000 0			
	sponsoring organization have excess business holdings at any time during the year?	,		8	intitional in the	era Smiram
9	Sponsoring organizations maintaining donor advised funds					马类雕
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a	Haddis.dictle	sinns ndake
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b	-	
10	Section 501(c)(7) organizations. Enter			建酶性	推作	THE
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		数		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a	105,895,088		激频	
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them )	11b	576,613			基件的
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	•		12a		. Judy Judy
b		12b		JYN	MA	
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	•				
а	is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O			調網	建锤	
b	Enter the amount of reserves the organization is required to maintain by the states in which					法問
	the organization is licensed to issue qualified health plans	13b				ZW
С	Enter the amount of reserves on hand	13c				强罚
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	n or	:			
	excess parachute payment(s) during the year?			15		Χ
	If "Yes," see instructions and file Form 4720, Schedule N				Mil	
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income	me?		16		X
	If "Yes," complete Form 4720, Schedule O					

X

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management				_	,				
		ı		n.e. erato	Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9							
	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 on Schedule O									
ь	Enter the number of voting members included on line 1a, above, who are independent	_1b_	9_							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			7 1"19, 1,4") 4,4.4E 11 4	VET P					
	any other officer, director, trustee, or key employee?			2	X	<b>.</b>				
3	Did the organization delegate control over management duties customarily performed by or under the direct									
	supervision of officers, directors, trustees, or key employees to a management company or other person?			3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5	3.7	X				
6	Did the organization have members or stockholders?			_6_	X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			_	٠,					
	one or more members of the governing body?			7a	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,									
_	stockholders, or persons other than the governing body?			7b	X TEST HIST	hall Cales				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	by the fo	llowing							
a	The governing body?			8a	X					
b	Each committee with authority to act on behalf of the governing body?			8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					١,,				
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	L	X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte-	rnai Re	<u>əvenu</u>	e Code )	T	٠				
					Yes					
	Did the organization have local chapters, branches, or affiliates?			10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,									
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	.,,	-				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	e form?		11a	X	n satisfaret				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	_	_	12a	X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflic	ts?	12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					.,				
	describe in Schedule O how this was done			12c	3.7	Х				
13	Did the organization have a written whistleblower policy?			13	X					
14	Did the organization have a written document retention and destruction policy?			14	X	siri otracij				
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 and decision?					errenta				
a	The organization's CEO, Executive Director, or top management official			15a	X					
b	Other officers or key employees of the organization			15b	X	ber in the				
40-	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 similar arrangement			ŽĖ.	は関	hiniranë				
L	with a taxable entity during the year?			16a	X s films	ं अंग्रीमा । <sub>व</sub>				
þ	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				Zordi we i					
<del></del>	organization's exempt status with respect to such arrangements?	-		16b	Χ					
	tion C. Disclosure									
17 40	List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an association to make its Forms 1022 (1024 or 1024 A. if prohipple), 200, and 200 T. (Section 6104 requires an association to make its Forms 1022 (1024 or 1024 A. if prohipple).	on E041	· a\							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Sect	on 501(	C)							
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply									
40	Own website X Another's website X Upon request Other (explain on Schedule O)	جداميس	~~-							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interes	policy,	and							
20	financial statements available to the public during the tax year									
20 NG	State the name, address, and telephone number of the person who possesses the organization's books and records									
	ORTHEASTERN REMC 4901 E PARK 30 DRIVE	) <u>5</u>		000 /1	2 6	111				
	DLUMBIA CITY IN 4672	<u> </u>		<u>888-41</u>	<u>ა-ს</u>	<u> </u>				

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

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

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

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

(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(vv-2/1099-W13C)	(W-2/1099-MIGC)	organization and related organizations	
(1) ERIC JUNG	4.5	[	[								
DDECIDENM ( CDO	45.00			\ ,				222 722	0	(0 053	
PRESIDENT & CEO (2) MICHAEL D DEFREE	0.00			Х				232,722	0	69,853	
(2) MICHAEL D DEFREE	40.00										
DIRECTOR OF MARKETIN	0.00	ŀ				Х		123,565	0	48,622	
(3) JAMES EITSERT	0.00			<u> </u>	<del>                                     </del>	71		123,303		40,022	
(0,000000000000000000000000000000000000	45.00										
VP DISTRIBUTION SERV	0.00		i			Х		159,181	ol	33,186	
(4) ANDREW MITCHELL										,	
	40.00				1						
ENGINEERING SUPERVIS	0.00					Χ		124,882	0	55,251	
(5) TODD MYERS											
	47.55									00.005	
JOURNEYMAN LINEMAN	0.00	_				Х		127,140	0	32,865	
(6) ROB HIGGINS	5.25										
SECRETARY	0.00	X		Х				21,025	0	0	
(7) DOUGLAS SCHRADER	0.00	^		$\stackrel{\wedge}{\vdash}$				21,025			
(,, 50002115 5011111521	3.08										
BOARD MEMBER	0.00	X						12,525	200	0	
(8) INGRID TIPPMANN	NICHOLSC							,			
	5.31										
BOARD MEMBER	0.00	X						18,900	0	0	
(9) THOMAS WESTERN											
	3.96									_	
VICE CHAIR	0.00	Х		Χ				18,025	200	0	
(10) DONALD DAFFORN	2 22										
DOADD MEMBER	3.38							13 000		^	
BOARD MEMBER (11) JOSEPH KRUYER	0.00	Χ		<u> </u>				13,000	0	0	
(II) UUSEPA KKUIEK	3.55										
TREASURER	0.00	Х		Х				16,325	0	0	

Form **990** (2019)

Part VII Section A. Office	ers, Directors, Tru	stee	s, K	ey Er	nplo	yees	s, an	d Highest Compensated	Employees (continued)	
(A) • Name and title	(B) Average hours per week (list any	bo	ox, uni	Pos check ess pe ind a c	rson i	than o s both r/truste	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(12) CATHY EGOLE	3.84									
BOARD MEMBER	0.00	X	ļ	<u> </u>	_			14,800	0	(
(13) ERIK LINNEM BOARD MEMBER	1.43 0.00	X						15,325	0	(
(14) CAROL COOPE								,		
BOARD MEMBER	0.00	Х						4,600	0	(
										· · · · · · · · · · · · · · · · · · ·
1b Subtotal		ا	L	<u>!</u>	l		<b>&gt;</b>	902,015	400	239,777
c Total from continuation s d Total (add lines 1b and 1 2 Total number of individuals reportable compensation fr	c) (including but not lin	nited		ose	listed	l abo	▶ ve) v	902,015 who received more than \$10	4 0 0 00,000 of	239,777
<ul> <li>Did the organization list any employee on line 1a? If "Ye</li> <li>For any individual listed on</li> </ul>	s," complete Schedu	ıle J	for s	uch i	ndıvı	dual		,	n tho	Yes No
organization and related or individual  5 Did any person listed on lin	ganizations greater ti	nan S	150	,000	P If "	Yes,"	con	nplete Schedule J for such		4 X
for services rendered to the Section B. Independent Contra	e organization? If "Ye									5 X
Complete this table for your compensation from the org								tors that received more than year ending with or within the		
	(A) e and business address			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		<u> </u>		<del></del>	(B) ion of services	(C) Compensation
NELSON TREE SERVIC				4	148	9 S	OL	UTIONS CENTER	101 01 3011003	Compensation
CHICAGO	IL		06					REE TRIMMING		435,379
TECHNOLOGY FOR ENE KNOXVILLE			N 79	32			I	XINGTON DR NST/MAINT		209,760
ROBERT HENRY CORP SOUTH BEND	IN	4	66	24			D	407 DIST PLANT CON	S	207,340
PREMIER POWER MAIN INDIANAPOLIS MWM INC.	TENANCE IN	4	62	68		5 C	S	MPIONSHIP DR <u>UBSTATION MAI</u> 000 S-92	N	189,122
ROANOKE	TN	4	67		: 33	UE		NST/MAINT		164,600
2 Total number of independe received more than \$100,0	nt contractors (includ	ıng t	out n	ot lim					5	C

Form 990 (2019) NORTHEASTERN RURAL ELECTRIC 35-0756490 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded (A) (B) Related or exempt (C) Total revenue Unrelated from tax under sections 512-514 function revenue husiness revenue 1a 1a Federated campaigns b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 1<u>g</u> h Total. Add lines 1a-1f Business Code 221000 105,895,088 2a PROGRAM SERVICE REVENUE Program Service d f All other program service revenue 105,895,088 Total Add lines 2a-2f ▶ Investment income (including dividends, interest, and other similar amounts) 53,486 53,486 Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6a Gross rents 6a 6b Less rental expenses Rental inc or (loss) 6c Net rental income or (loss)  $\triangleright$ Gross amount from (i) Secunties (II) Other sales of assets 27,620 other than inventory b Less cost or other Other Revenue 24,433 basis and sales exps 7b 3,187 c Gain or (loss) 7c ,187 187 d Net gain or (loss) 8a Gross income from fundraising events (not including of contributions reported on line 1c) See Part IV, line 18 8a 8b b Less direct expenses c Net income or (loss) from fundraising events > 9a Gross income from gaming activities See Part IV. line 19 9a b Less direct expenses 9b c Net income or (loss) from gaming activities > 10a Gross sales of inventory, less 29,400 returns and allowances 10a 34,568 b Less cost of goods sold 10b c Net income or (loss) from sales of inventory -5.168-5,168 Business Code 221000 224,795 224,795 11a PATRONAGE ALLOCATIONS 206,326 206,326 FORFEITED DISCOUNTS 93,987 MISCELLANEOUS INCOME 93,987 All other revenue Total. Add lines 11a-11d ▶

106, 471, 701 105, 895, 088

 $\blacktriangleright$ 

Total revenue. See instructions

Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, (A) Total expenses **(B)** (C) (D) Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 408,605 trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 5,750,442 Other salaries and wages Pension plan accruals and contributions (include 990,210 section 401(k) and 403(b) employer contributions) 014,232 Other employee benefits 462,486 Payroll taxes Fees for services (nonemployees) Management 26,835 b Legal Accounting 23,000 c Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 44,919 (A) amount, list line 11g expenses on Schedule O) 138,437 12 Advertising and promotion 363,947 13 Office expenses 14 Information technology 15 Royalties Occupancy 16 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 2,151,432 20 Interest Payments to affiliates 21 5,329,914 22 Depreciation, depletion, and amortization 336,866 23 Insurance 24 Other expenses Itemize expenses not covered. above (List miscellaneous expenses on line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list tine 34e expenses on Schedule (C). PURCHASED POWER 82,769,826 a OTHER TAXES 476,097 MAINTENANCE - DISTRIBUTIO 952,965 CUSTOMER SELLING/SERVICE 329,865 342,564 e All other expenses 102,912,642 0 0 25 Total functional expenses. Add lines 1 through 24e 0 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 ▶ 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) Beginning of year End of year 569,482 476,311 1 Cash-non-interest-bearing Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3  $\overline{1}1.771,$ 697 10,551,375 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 1,067,028 ,125,080 8 Inventories for sale or use 1,268,781 5,394,656 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 148,152,806 basis. Complete Part VI of Schedule D. 10a 78,976,710 82,295,339 65,857,467 b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 14,224,444 13,838,742 12 12 Investments—other securities See Part IV, line 11 Investments-program-related See Part IV, line 11 13 13 14 Intangible assets 14 1,108,558 15 Other assets See Part IV, line 11 1,123,422 15 114,908,393 114,883,232 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 11,305,072 11,211,900 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other 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 22 45,732,312 43,936,034 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X ,577,500 of Schedule D 59,614,884 26 26 Total liabilities. Add lines 17 through 25 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 Net assets with donor restrictions X Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 57,373,075 55,293,509 31 31 Retained earnings, endowment, accumulated income, or other funds 55,293,509 57,373,075 Total net assets or fund balances 32 114,908, 114,883,232 33 Total liabilities and net assets/fund balances

Form 990 (2019)

Forn	1 990 (2019) NORTHEASTERN RURAL ELECTRIC 35-0756490			Pa	ge <b>12</b>
P	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	106,4	71,	701
2	Total expenses (must equal Part IX, column (A), line 25)	2	102,9	12,	642
3	Revenue less expenses Subtract line 2 from line 1	3	3,5	559,	059
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	55,2		
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			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-1,4	79,	<del>493</del>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		-		
	32, column (B))	10	57,3	73,	075
Pa	rt XIII 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 X Accrual Other		2.2	<b>溶腫</b>	跨網
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	-	3.73.00 P		
	Schedule O				2 125 14 4 14 14 14
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				Li
	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?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		144.48 144.48		· 野山門
	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 oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on			題語	
	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?		3a		Χ
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any stens taken to undergo such audits		36		

Form 990 (2019)

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 **2019** 

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of organization

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

NORTHEASTERN RURAL ELECTRIC

- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- · Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	MEMBERSHIP CORPORAT	ION		35-07564	90
Pa	rt I-A Complete if the organization is exem	pt under section 501(c	or is a section	n 527 organizatio	n.
1	Provide a description of the organization's direct and indirect	t political campaign activities in	Part IV (see instruc	ctions for	
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)			▶ \$	3,000
3	Volunteer hours for political campaign activities (see instruct	ions)		0	
Pa	rt I-B Complete if the organization is exem	pt under section 501(c	)(3).		
1	Enter the amount of any excise tax incurred by the organizat	ion under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		<b>▶</b> \$	
3	If the organization incurred a section 4955 tax, did it file Form	n 4720 for this year?			Yes No
4a	Was a correction made?		Yes No		
	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the organization is exem			on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	for section 527 exempt function	n		
	activities			▶ \$	3,000
2	Enter the amount of the filing organization's funds contribute	d to other organizations for sec	tion		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Enter	here and on Form 1120-POL,			2 222
	line 17b			▶ \$	3,000
4	Did the filing organization file Form 1120-POL for this year?				X Yes No
5	Enter the names, addresses and employer identification num				
	organization made payments. For each organization listed, e	·	0 0		
	the amount of political contributions received that were prom				
	as a separate segregated fund or a political action committee	e (PAC) If additional space is r	ieeded, provide infoi T	mation in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly
				funds If none, enter -0-	delivered to a separate
					political organization
		TUDTANADOTTO			If none, enter -0-
	INDIANA FORE	INDIANAPOLIS	25 1000007	2 000	
	720 N HIGH SCHOOL RD	IN 46214	35-1998087	3,000	
(2)					
(3)					
(4)					
.~)					
(5)					
6)					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule C (Form 990 or 990-EZ) 2019

31600 06/03/2020 10 24 AM								
chedule C (Form 990 or 990-EZ) 2019 NORTH	IEASTERN RU	JRAL ELECTRI	:C		35-075649	0		Page 2
Part II-A Complete if the organiz	ation is exemp	t under section 5	01(c)(3) an	d filed	Form 5768 (ele	ection	under	,
section 501(h)).					•			
Check ▶ ☐ If the filing organization	belongs to an affile	ated group (and list	ın Part IV ea	ch affilia	ited group memb	er's nar	ne,	
address, EIN, expenses	, and share of exc	ess lobbying expend	ditures) .					
Check > if the filing organization	checked box A an	d "limited control" pr	ovisions app	ly				
Limits on Lob	bying Expendit	tures			(a) Filing		(b) Affiliated	1
(The term "expenditures" i	means amounts p	paid or incurred.)		org	ganization's totals		group totals	1
1a Total lobbying expenditures to influence pub	lic opinion (grassroo	ts lobbying)					<u>_</u>	
<b>b</b> Total lobbying expenditures to influence a le	gislative body (direct	lobbying)						
c Total lobbying expenditures (add lines 1a ar	nd 1b)							
d Other exempt purpose expenditures								
e Total exempt purpose expenditures (add line	es 1c and 1d)							
f Lobbying nontaxable amount. Enter the amount	ount from the following	ig table in both						
columns								
If the amount on line 1e, column (a) or (b) is:	The lobbying nor	ntaxable amount is						
Not over \$500,000	20% of the amoun	nt on line 1e		1				
Over \$500,000 but not over \$1,000,000	\$100,000 plus 159	% of the excess over \$50	0,000					
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 109	% of the excess over \$1,0	00,000					
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	of the excess over \$1,50	0,000					EM
Over \$17,000,000	\$1,000,000			<b>ASSET</b>				
g Grassroots nontaxable amount (enter 25% of	of line 1f)							
h Subtract line 1g from line 1a If zero or less,	enter -0-							
i Subtract line 1f from line 1c If zero or less, e	enter -0-							
j If there is an amount other than zero on eith	er line 1h or line 1i, d	lid the organization file l	Form 4720			_		
reporting section 4911 tax for this year?							Yes	No
	4-Year Averag	ing Period Under S	ection 501(l	h)				
(Some organizations that mad	•	•	•	•	of the five colur	mns bel	low.	
_	•	nstructions for line	-			,		
Lo	bbying Expendit	ures During 4-Year	Averaging	Period				
Calendar year (or fiscal year	(2) 2016	(b) 2017	(a) 201	10	(4) 2010		(a) Tai	lal.
beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 201		( <b>d)</b> 2019		(e) Tot	.aı
2a Lobbying nontaxable amount								
b Lobbying ceiling amount								
(150% of line 2a, column (e))								

Calendar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	( <b>d)</b> 2019	(e) Total
2a Lobbying nontaxable amount					
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column (e))</li> </ul>					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2019

Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	s NOT filed I	Form	5768		
	(6	a)		b)	
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Am	ount	
<ul> <li>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of</li> <li>Volunteers?</li> <li>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li> <li>Media advertisements?</li> <li>Mailings to members, legislators, or the public?</li> </ul>					
<ul> <li>e Publications, or published or broadcast statements?</li> <li>f Grants to other organizations for lobbying purposes?</li> <li>g Direct contact with legislators, their staffs, government officials, or a legislative body?</li> <li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li> </ul>					
<ul> <li>i Other activities?</li> <li>j Total Add lines 1c through 1i</li> <li>2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?</li> <li>b If "Yes," enter the amount of any tax incurred under section 4912</li> <li>c If "Yes," enter the amount of any tax incurred by organization managers under section 4912</li> </ul>				71.; e15.00°, c 1-25.1 (2-14)	r z Elostic Szelőtése
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), c	or se	ction	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior part III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	501(c)(5), c			3, is	
<ul> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying</li> </ul>	-	1 2a 2b 2c 3			
and political expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)  Part IV: Supplemental Information  Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Fee instructions), and Part II-B, line 1. Also, complete this part for any additional information.	Part II-A, lines 1	<b>4 5</b> and			
SCHEDULE C, PART IV, ADDITIONAL INFORMATION					

CONTRIBUTIONS TO POLITICAL ACTION COMMITTEES

Schedule C (Form 990 or 990-EZ) 2019 NORTHEASTERN RURAL ELECTRIC

35-0756490

Page 4

Part IV: Supplemental Information (continued)

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

	ORTHEASTERN RURAL ELECTRIC		a = a.	T. C. 4.0.0
_	EMBERSHIP CORPORATION			<u>756490</u>
Pa	Organizations Maintaining Donor Advised Fun	ds or Other Similar Funds or Ad	ccounts	•
	Complete if the organization answered "Yes" on F	Т		
		(a) Donor advised funds	(b	) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)	,		
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the	e assets held in donor advised		
	funds are the organization's property, subject to the organization's exclusi	ve legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wr	iting that grant funds can be used		
	only for charitable purposes and not for the benefit of the donor or donor a	advisor, or for any other purpose		
	conferring impermissible private benefit?	<del></del>		Yes No
Pa	art II Conservation Easements.			
	Complete if the organization answered "Yes" on F	orm 990, Part IV, line 7		
1	Purpose(s) of conservation easements held by the organization (check all	that apply)		
	Preservation of land for public use (for example, recreation or education	on) Preservation of a historically in	nportant la	ind area
	Protection of natural habitat	Preservation of a certified histo	oric structu	ıre
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conserva	tion contribution in the form of a conservati	ion	
	easement on the last day of the tax year			Held at the End of the Tax 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 structure include	ed in (a)	2c	
	Number of conservation easements included in (c) acquired after 7/25/06,			
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, exting	guished, or terminated by the organization	during the	
_	tax year ▶	g,	<b>3</b>	
4	Number of states where property subject to conservation easement is local	ated ▶		
5	Does the organization have a written policy regarding the periodic monitor			
•	violations, and enforcement of the conservation easements it holds?	g,eposion, nanamig o		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of vi	olations, and enforcing conservation easer	nents duru	- · · · · ·
٠	b	olations, and emoreing conservation easer	nems dan	ing the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violation	ons, and enforcing conservation easement	s during th	e vear
•	\$	ons, and emorcing conservation easement	s during an	e year
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of section 170(h)(4)(R)(i)		
٠	and section 170(h)(4)(B)(ii)?	requirements of section 17 o(1)(4)(b)(i)		Yes No
9	In Part XIII, describe how the organization reports conservation easement	s in its revenue and evnense statement an	ч	
3	balance sheet, and include, if applicable, the text of the footnote to the org	· ·		
	organization's accounting for conservation easements	and described that described	500 (110	
Pa	art III Organizations Maintaining Collections of Art, F	listorical Treasures or Other Si	milar A	ssets
	Complete if the organization answered "Yes" on Fe			
1a	If the organization elected, as permitted under FASB ASC 958, not to repo		eet works	
	of art, historical treasures, or other similar assets held for public exhibition			
	service, provide in Part XIII the text of the footnote to its financial statemen	·	00110	
h	If the organization elected, as permitted under FASB ASC 958, to report in		works of	
~	art, historical treasures, or other similar assets held for public exhibition, e			
	provide the following amounts relating to these items	ducation, or rescarcing fundamentalise of pas	no oci vico:	•
	(i) Revenue included on Form 990, Part VIII, line 1			•
				e e
2	(ii) Assets included in Form 990, Part X	per cimilar accord for financial acid	the	•
2	If the organization received or held works of art, historical treasures, or oth		uic	
_	following amounts required to be reported under FASB ASC 958 relating to	o uiese rems	<b>.</b>	c ·
a	Revenue included on Form 990, Part VIII, line 1			<b>5</b>
<u>b</u>	Assets included in Form 990, Part X			<b></b>

Saba	odulo D (Form 000) 2010 NODTHENS	TERN RURAL	FIFCTRIC		35-0756	1 9 N		Page 2
_	edule D (Form 990) 2019 NORTHEAS  art III Organizations Maintainir			easures of			continue o	_
3	Using the organization's acquisition, access						00.7	·/
	collection items (check all that apply)	. 🗆						
a	Public exhibition	d	Loan or exchange prog	gram				
b		e	Other					
c	Preservation for future generations	Handan and American	the Cate of			O 4		
4	Provide a description of the organization's co	ollections and explain f	now they further the org	anization's exe	mpt purpose in	Part		
_	XIII							
5	During the year, did the organization solicit of assets to be sold to raise funds rather than the solicit of th				ar		Yes	□ No
Pa	art IV Escrow and Custodial A						<del></del> -	
<b></b>	Complete if the organization	on answered "Yes'	' on Form 990, Pai	rt IV, line 9,	or reported	an amount o	n Form	
	990, Part X, line 21							
1a	Is the organization an agent, trustee, custod	ian or other intermedia	ry for contributions or o	ther assets no	t			
	included on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the follo	owing table					
							Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on F	orm 990, Part X, line 2	1, for escrow or custod	ial account liab	ollity?		Yes	No
b	If "Yes," explain the arrangement in Part XIII	Check here if the exp	lanation has been prov	ided on Part XI	11			
Pa	art V Endowment Funds.							
	Complete if the organization	n answered "Yes"	on Form 990, Par	rt IV, line 10				
		(a) Current year	(b) Pnor year	(c) Two years	back (d) 1	Three years back	(e) Four ye	ars back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the curr	rent year end balance	(line 1g, column (a)) he	ld as		<u>-</u> -		
а	Board designated or quasi-endowment	%						
b	Permanent endowment ▶ %	i.						
С	Term endowment ▶ %							
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%						
3a	Are there endowment funds not in the posse	ssion of the organization	on that are held and ad	ministered for t	he			
	organization by						Y	es No
	(i) Unrelated organizations						3a(i)	
	(ii) Related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as require	d on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the							
Pa	rt VI Land, Buildings, and Equ							
	Complete if the organization	n answered "Yes"	on Form 990, Par	t IV, line 11	a See Form	990, Part X	line 10	
	Description of property	(a) Cost or other b			(c) Accumulat		(d) Book valu	ie
		(investment)	(Othe	er)	depreciation	<u> </u>		
1a	Land		1,6	89,017	1 7		1,689	,017
	Buildings			83,301	2,122	962	4,560	
	Leasehold improvements					1		
	Equipment		139,7	80,488	63,734	,505	76,045	,983
	Other				*		<u></u>	
	Add lines 1a through 1e (Column (d) must e	equal Form 990, Part X	(, column (B), line 10c )			<b>&gt;</b>	82,295	,339

<ul> <li>Complete if the organization answered "Yes"</li> <li>(a) Description of security or category</li> </ul>	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
) Financial derivatives		
2) Closely held equity interests	346,043	
3) Other PATRONAGE CAPITAL	12,954,342	
(A) FEDERATED INSURANCE EXCHANGE	241,787	
(B) HEARTLAND EMERGENCY EQUIPMENT	208,270	
(C) CERTIFCATES OF INVESTMENT	51,145	·
(D) NRUCFC-MEMBER CAPITAL SECURITIES	25,000	
(E) COOPERATIVE RESPONSE CENTER	10,000	
(F) MEMBERSHIPS	2,155	
(G)		
(H)		
otal. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>▶</b> 13,838,742	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 11c	See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
9)		
(9) otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<b>b</b>	
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets.	<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes"	<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes"  (a) Description	<u> </u>	See Form 990, Part X, line 15
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets.  Complete if the organization answered "Yes"  (a) Description  (1)	<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets.  Complete if the organization answered "Yes"  (a) Description  (1)	<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets.  Complete if the organization answered "Yes"  (a) Description  (1)  (2)	<u> </u>	
part IX Other Assets. Complete if the organization answered "Yes"  (a) Description  (1)  (2)  (3)	<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets.  Complete if the organization answered "Yes"  (a) Description  (1)  (2)  (3)  (4)	<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets.  Complete if the organization answered "Yes"  (a) Description  (1)  (2)  (3)  (4)  (5)	<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets.  Complete if the organization answered "Yes"  (a) Description  (1)  (2)  (3)  (4)  (5)  (6)  (7)	<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets.  Complete if the organization answered "Yes"  (a) Description  (1)  (2)  (3)  (4)  (5)	<u> </u>	

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

	Time 20		
1	(a) Description of liability		(b) Book value
(1)	Federal income taxes		
(2)	CONSUMER DEPOSITS		2,105,150
(3)	CONTRIBUTIONS IN AID OF CONSTRUCTION		257,073
_(4)			
(5)			
(6)			
(7)			
(8)			<del></del>
(9)			
Total	(Column (b) must equal Form 990, Part X, col (B) line 25)	<b>&gt;</b>	2,362,223

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

4c

102,912,642

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	5 turn.

Part XIII Supplemental Information.

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information PART X - FIN 48 FOOTNOTE

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

THE CORPORATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION

501(C)(12)OF THE INTERNAL REVENUE CODE. THE CORPORATION HAS ADOPTED FASB

ASC 740-10-25, AND DETERMINED NO MATERIAL UNRECOGNIZED TAX BENEFITS OR

LIABILITIES EXIST AS OF DECEMBER 31, 2019. THE ADOPTION OF FASB

ASC 740-10-25 DID NOT IMPACT THE CORPORATION'S FINANCIAL POSITION OR

RESULTS OF OPERATIONS. IF APPLICABLE, THE CORPORATION WILL RECOGNIZE

INTEREST AND PENALTIES RELATED TO UNDERPAYMENT OF INCOME TAXES AS INCOME

TAX EXPENSE. AS OF DECEMBER 31, 2019 AND 2018, THE CORPORATION HAD NO

AMOUNTS RELATED TO UNRECOGNIZED INCOME TAX BENEFITS AND NO AMOUNTS RELATED

TO ACCRUED INTEREST AND PENALTIES. THE CORPORATION DOES NOT ANTICIPATE ANY

SIGNIFICANT CHANGES TO UNRECOGNIZED INCOME TAX BENEFITS OVER THE NEXT YEAR.

Rant XIII Supplemental Information (continued)

THE CORPORATION IS GENERALLY NO LONGER SUBJECT TO EXAMINATION BY FEDERAL AND STATE AGENCIES FOR YEARS BEFORE 2016.

## SCHEDULE J

(Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

►Go to www.irs gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

NORTHEASTERN RURAL ELECTRIC MEMBERSHIP CORPORATION

Employer identification number 35-0756490

際F	Questions Regarding Compensation				
				Yes	No
1	a Check the appropriate box(es) if the organization provided any				
	990, Part VII, Section A, line 1a Complete Part III to provide an				
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
	<b>b</b> If any of the boxes on line 1a are checked, did the organization	follow a written policy regarding payment			i gira
	or reimbursement or provision of all of the expenses described	above? If "No," complete Part III to	İ		
	explain		1b		
2	Did the organization require substantiation prior to reimbursing	or allowing expenses incurred by all			ŀ
	directors, trustees, and officers, including the CEO/Executive D	rector, regarding the items checked on line			
	1a?		2		
					齫
3	Indicate which, if any, of the following the organization used to e	establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do	o not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Exec	cutive Director, but explain in Part III	F.F.	韢	
	X Compensation committee	Written employment contract			
	X Independent compensation consultant	X Compensation survey or study			
	Form 990 of other organizations	X Approval by the board or compensation committee			置置
	_				AL PR
4	During the year, did any person listed on Form 990, Part VII, Se	ection A, line 1a, with respect to the filing	1,116,14		
	organization or a related organization	•		閉鎖	
	Receive a severance payment or change-of-control payment?		4a		X
	Participate in, or receive payment from, a supplemental nonqua	alified retirement plan?	4b		X
	c Participate in, or receive payment from, an equity-based compe		4c	-	X
	If "Yes" to any of lines 4a-c, list the persons and provide the ap				143
	, , , , , , , , , , , , , , , , , , , ,	production of the case with th			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organization	ons must complete lines 5–9			
5					
	compensation contingent on the revenues of	The organization pay or accree any			
	a The organization?		5a	45-35-55-81	
	b Any related organization?		5b		$\vdash \vdash$
	If "Yes" on line 5a or 5b, describe in Part III			宇宙軍	decina l
	in 100 on mic ou or ob, accorde arr archi				摩封
6	For persons listed on Form 990, Part VII, Section A, line 1a, did	the organization hav or accrue any			
·	compensation contingent on the net earnings of	the organization pay or accrue any			
	a The organization?		記事時	Manifest.	
	Any related organization?		6a		
,	If "Yes" on line 6a or 6b, describe in Part III		6b	of Harwide	and a
	ii 103 on line oa or ob, describe in Fait III	•			
7	For persons listed on Form 000, Bort VIII, Control & Line 4 and 4	the executation arounds any manifest of			wegeninger Talenthier
,	,				
0	payments not described on lines 5 and 6? If "Yes," describe in P		7		
8	Were any amounts reported on Form 990, Part VII, paid or accri				
	to the initial contract exception described in Regulations section	53 4958-4(a)(3) <sup>7</sup> If "Yes," describe			
	ın Part III		8	ises sue	Edgil din
_	If the all the second s		#7t,_Pt.]  -pT-f2;#f1		455
9	If "Yes" on line 8, did the organization also follow the rebuttable is	presumption procedure described in		ı	

Regulations section 53 4958-6(c)?

35-0756490

NORTHEASTERN RURAL ELECTRIC

481600 06/03/2020 10 24 AM

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2019

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

(B) Breakdown of W-2 and/or 1099-MISC compensation (c) Retirement and (D) Nontaxable (E) Total of colu		B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(a)(ı)(a)	in column (B) reported as deferred on pnor Form 990
	ε	232,722	0	0	41,358	28,495	302,575	0
1 PRESIDENT & CEO	Ξ	0	0	0	0	0	0	0
O DEFREEUW	Ξ	123,565	0	0	25,220	23,402	172,18	0
FOR OF MARKETIN	Ξ	0	0	0	- 1	- 1		0
	Ξ	159, 181	0	0	30,854	2,332	192,36	0
SERV	Ξ	0	0	0	0	0	0	0
HELL	Ξ	124,882	0	0	26,582	28,669	180,133	
G SUPERVIS	Ξ	0	0	0	0	0	0	0
TODD MYERS	ε	127,140	0	0	19,299	13,566		
5 JOURNEYMAN LINEMAN	Ξ	0	0		0	0	0	
	Ξ							
9	Ξ							
	Ξ							
2	Ξ	•						
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	Ξ							
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	Ξ							
16	Ξ							
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Schedule J (Form 990) 2019 NORTHEASTERN RURAL ELECTRIC

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

Schedule J (Form 990) 2019

SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

▶ Go to www irs gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

NORTHEASTERN RURAL ELECTRIC MEMBERSHIP CORPORATION

Employer identification number

OMB No 1545-0047

Open to Public

Inspection

35-0756490

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

TOM WESTERN

DOUGLAS SCHRADER

DIRECTOR

DIRECTOR

BUSINESS

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS ALL ENTITIES PURCHASING POWER FROM THE REMC ARE MEMBERS OF THE MEMBERSHIP CORPORATION.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE BOARD OF DIRECTORS ARE ELECTED BY THE MEMBERS AT THE ANNUAL MEETING OF

THE CORPORATION.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS
THE MEMBERS APPROVE OR DISAPPROVE OF THE BOARD OF DIRECTORS ACTIONS AT THE
ANNUAL MEETING.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 MANAGEMENT REVIEWS THE 990 AND AUDIT REPORT WITH THE BOARD OF DIRECTORS AT A BOARD MEETING. THE FORM IS APPROVED BY THE BOARD PRIOR TO FILING OF THE TAX RETURN.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

A CEO COMPENSATION COMMITTEE MADE UP ENTIRELY OF BOARD OF DIRECTORS

MEMBERS MEEETS TO EVALUATE AND DETERMINE THE APPROPRIATE SALARY LEVEL OF

Name of the organization

Employer identification number

35-0756490

NORTHEASTERN RURAL ELECTRIC

THE CEO INCLUDING THE USE OF COMPARABLE DATA.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
THE ORGANIZATION REVIEWS COMPENSATION TO ESTABLISH ALL SALARIES.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE BYLAWS OF THE COOPERATIVE, 2 YEARS OF ANNUAL REPORTS AND THE LISTING OF
THE BOARD OF DIRECTORS AND CONTRACT INFORMATION IS MAINTAINED ON THE
COOPERATIVE'S WEBSITE. FORM 990 IS MAINTAINED IN HOUSE AND IS AVAILABLE
FOR INSPECTION OR COPYING DURING BUSINESS HOURS.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

CHANGE IN MEMBERSHIPS

\$ 8,790

RETIREMENT OF CAPITAL CREDITS

\$ -1,488,283

TOTAL

\$ -1,479,493

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(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information

NORTHEASTERN RURAL ELECTRIC

MEMBERSHIP CORPORATION

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33

Sopenito Public OMB No 1545-0047

Employer Identification number

35-0756490

Section 512(b)(13) controlled entity? (f)
Direct controlling entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year (f)
Direct controlling
entity End-of-year assets (e) (e)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section Legal domicile (state or foreign country) (c)
Legal domicile (state
or foreign country) Pnmary activity (b) Primary activity (a)
Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization Partil

(2)

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Schedule R (Form 990) 2019

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Schedule R (Form 990) 2019

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NORTHEASTERN RURAL ELECTRIC

Schedule R (Form 990) 2019 (k), Percentage ownership (I) Section 512(b)(13) controlled Yes No General or managing partner? Yes No 451,213 100.000000 Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Percentage ownership Ξ Code V—UBi amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets (h)
Disproportionate
alloc ? Yes No (g) Share of end-of-year assets 105,990 Share of total (f) Share of total income Type of entity (C corp, S corp, or trust) Ö (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) Direct controlling entity Ð N/A(d)
Direct controlling
entity Legal domicile foreign country) (state or NI (c) Legal domicile (state or foreign country) R.E. DEVEL Primary activity Primary activity IN 46725 (1) CUSTOMER CHOICE SERVICES CORP Name, address, and EIN of related organization (a)
Name, address, and EIN of
related organization 4901 EAST PARK 30 DR COLUMBIA CITY 35-1990896 PartIII Part IV δ 3  $\Xi$ |ର | ල <u>4</u> | ල €

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Transactions With Related Organizations. Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				-	<u></u>	٩,
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	storganizations listed in Pa	ırts II–IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	×	
<b>b</b> Giff, grant, or capital contribution to related organization(s)				1p	_	×
c Gift, grant, or capital contribution from related organization(s)				10		×
d Loans or loan guarantees to or for related organization(s)				1d	×	
e Loans or loan guarantees by related organization(s)				1e		X
f Dividends from related organization(s)				7		<b>!</b> >
G. Sale of assets to related organization(s)				- 5		٠\×
				2 +		٠l×
				į	1	< ×
j Lease of facilities, equipment, or other assets to related organization(s)				=   ;=		⟨│×
				40	温温調	
k Lease of facilities, equipment, or other assets from related organization(s)				+		$ \times $
<ul> <li>Performance of services or membership or fundraising solicitations for related organization(s)</li> </ul>				1	×	
m Performance of services or membership or fundraising solicitations by related organization(s)				13		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1 L	×	ŀ
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				9	×	
				4. 794	10.5	阿姆
p Reimbursement paid to related organization(s) for expenses				1р		×
q Reimbursement paid by related organization(s) for expenses				19	×	
				a dek		
<ul> <li>Other transfer of cash or property to related organization(s)</li> </ul>				1		$\times$
ام.				18		$\times$
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	e, including covered relation	inships and transaction this	resholds			
(a)	(q)	(0)	(p)			
Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	nt involved		
(1) CUSTOMER CHOICE SERVICES CORPORATIO	A	105,990	BILLED			
(2)						
(3)						
(4)						
(5)						:
(9)						ļ
			Schedule R (Form 990) 2018	R (Form	990) 2	2

Schedule R (Form 990) 2019

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37 PartVI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

				l		-				
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legai		(e) Are all partners	(f) ners Share of		(h) Oisproportionate		(I) General or	(k) Percentage
		domicile (state or	고	section 501(c)(3)		end-of-year assets	allocations	of Schedule K-1 (Form 1055)	managing partner?	ownership
	_	foreign	from tax under sections 512-514)	organizations?	ns?					
		1	(L. 10. 21.0 curano	Yes	0		Yes		Yes	
(1)										_
(2)										
			•							
(3)										
(4)	·							-		
(5)										
(9)										
(2)										
(8)								-		
(6)										
(10)										
(11)								,		

Schedule R (Form 990) 2019 NORTHEASTERN RURAL ELECTRIC

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Part VII Supple

Supplemental Information.

Provide additional information for responses to questions on Schedule R See Instructions