DLN: 93493252004300 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. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 D Employer identification number B Check if applicable PRAIRIE POWER INC □ Address change 37-1013955 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (217) 245-6161 City or town, state or province, country, and ZIP or foreign postal code SPRINGFIELD, IL $\,$ 62711 $\,$ G Gross receipts \$ 150,647,746 Name and address of principal officer H(a) Is this a group return for CRYSTAL RINEY ☐Yes **☑**No subordinates? 3130 PLEASANT RUN H(b) Are all subordinates SPRINGFIELD, IL 62711 ☐ Yes ☐No ıncluded? 501(c)(3) **✓** 501(c) (12) **◄** (insert no) 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW PPI COOP L Year of formation 1963 M State of legal domicile IL Summary 1 Briefly describe the organization's mission or most significant activities MEMBER-OWNED NOT-FOR-PROFIT ELECTRIC GENERATION AND TRANSMISSION COOPERATIVE Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 20 19 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 0 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a -803 **b** Net unrelated business taxable income from Form 990-T, line 39 -803 **Current Year Prior Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenua 149,381,604 148,788,848 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,602,305 1,724,606 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 106,904 134,292 151,090,813 150,647,746 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 7,517 16,373 8,000,000 8,000,000 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 9,036,753 5,038,610 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 134,046,543 137,592,763 151,090,813 150,647,746 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . Net Assets or Fund Balances Beginning of Current Year End of Year 645,464,350 647,937,461 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 529,898,350 529,371,461 22 Net assets or fund balances Subtract line 21 from line 20 . 115,566,000 118,566,000 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 2020-09-01 Signature of officer Sign Here CRYSTAL RINEY VP FINANCE & ACCOUNTING Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-09-01 P00851848 Paid self-employed Firm's name ► EIDE BAILLY LLP Firm's EIN ► 45-0250958 Preparer Use Only Firm's address ≥ 200 E 10TH ST STE 500 Phone no (605) 339-1999 SIOUX FALLS, SD 571046375 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2019)

Form	990 (2019)				Page 2					
Pa	rt III Statement	t of Program Service Ac	complishments							
	Check if Sch	edule O contains a response o	r note to any line in this Part III		🗆					
1		organization's mission	·							
THE	COOPERATIVE'S MISS	SION IS TO MARKET RELIABLE	, COMPETITIVELY-PRICED ENER	GY AND OTHER SERVICES						
2			gram services during the year w							
	the prior Form 990				🗌 Yes 🗹 No					
	,	ese new services on Schedule								
3	Did the organization	n cease conducting, or make s	gnificant changes in how it condi	ucts, any program						
	services?									
	If "Yes," describe th	ese changes on Schedule O								
4	Section 501(c)(3) a		required to report the amount of	largest program services, as measi of grants and allocations to others,						
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)					
	See Additional Data									
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)					
	See Additional Data									
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)					
	See Additional Data									
4d	Other program serv	rices (Describe in Schedule O								
	(Expenses \$	ıncludıng	grants of \$) (Revenue \$)					
4e	Total program ser	rvice expenses ►								
					Form 990 (2019)					

or X as applicable

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete No 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . No Nο

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 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

6

7

8

9

10

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

20a

20h

21

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 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 뉯 . . .

Nο No No

Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or 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, VIII, VIII, IX,

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

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

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

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?

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

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

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 🥦

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

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

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete

total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😼 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

Nο No

Nο

Yes

11a Yes 11b No 11c

Yes

Yes

Yes

Nο

Nο

Nο

Nο

No

No

Nο

No

Nο

Nο

No

Nο

Form **990** (2019)

Form	990 (2019)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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? <i>If "Yes," complete Schedule L,</i> Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	Yes	
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? <i>If "Yes," complete Schedule L,</i> 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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <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? If "Yes," complete Schedule M	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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

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

1a 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

Part V

38

189

0

1a

1b

Yes

Yes

Form **990** (2019)

No

orm	940 (2014)			Page 5
Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	4a		No ——
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	which the organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	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? If "Yes," complete Form 4720, Schedule O	16		No
				0 /2010

orm	990 (2019)			Page (
Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	o" respo	onse to	lines V
Se	ction A. Governing Body and Management			
	5 to the most of the form of the form of the first		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing	-		
	body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 19			
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	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	<u>e Code</u>		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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 with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
10	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

State the name, address, and telephone number of the person who possesses the organization's books and records CRYSTAL RINEY 3130 PLEASANT RUN SPRINGFIELD, IL 62711 (217) 245-6161

20

(A)

Name and title

Part VII

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

Compensation of Officers, Directors, Trustees, Key Employees, 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

(F)

Estimated

amount of other

Page 7

• 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"

(B)

Average

hours per

• 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, 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 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

(C)

Position (do not check more

than one box, unless person

(D)

Reportable

compensation

(E)

Reportable

compensation

is both an officer and a week (list from the from related compensation organizations any hours director/trustee) organization from the for related (W-2/1099-(W-2/1099organization and Individual trustee or director Officer Highest compensate Former organizations MISC) MISC) related In stituti onal. Trustee director below dotted organizations employee line) See Additional Data Table

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

Page 8

See Additional Data Table See See	(A) Name and title	(B) Average hours per week (list any hours	than c	one bo	ox, u n off	t che inles ficer	and a	son	Report comper from organi	table nsation the zation	ı	(E) Reportable compensatio from related organization:	l s	(F) Estimated amount of other compensation from the organization and		
See Additional Data Table		below dotted	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensate employee	Former				(W-2/1099- MISC)		relat	ed	
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 29 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual is easy to reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual is easy to listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual is easy to listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	See Additional Data Table						<u>.</u>									
Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 Dire reportable compensation from the organization ► 29 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 Dire reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000² If "Yes," complete Schedule J for such individual for services rendered to the organizations greater than \$150,000² If "Yes," complete Schedule J for such person																
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 29 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a² If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000² If "Yes," complete Schedule J for such individual for services rendered to the organizations greater than \$150,000² If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) Name and business address BIG D ELECTRICAL CONTRACTORS INC LIOS BARTON STREET PO BOX 156 ELECTRICAL LINE CONSTRUCTION ELECTRICAL LINE CONSTRUCTION DISCASSIVE STEMS OF ILLINOIS INC CONSTRUCTION OBSERVATION/ENVIRONMENTAL S SOD S EWING AVE STILLING SING BIMS ENGINE AVE STILLING SING ELECTRICAL LINE CONSTRUCTION WORK 745,85 SOD S EWING AVE STILLING GOIS BUSINEERS INC ELECTRICAL LINE CONSTRUCTION WORK ELECTRICAL MECHANICAL ENGINEERING CONSUL																
c Total from continuation sheets to Part VII, Section A																
c Total from continuation sheets to Part VII, Section A																
c Total from continuation sheets to Part VII, Section A																
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 29 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a² If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000² If "Yes," complete Schedule J for such individual for services rendered to the organizations greater than \$150,000² If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) Name and business address BIG D ELECTRICAL CONTRACTORS INC LIOS BARTON STREET PO BOX 156 ELECTRICAL LINE CONSTRUCTION ELECTRICAL LINE CONSTRUCTION DISCASSIVE STEMS OF ILLINOIS INC CONSTRUCTION OBSERVATION/ENVIRONMENTAL S SOD S EWING AVE STILLING SING BIMS ENGINE AVE STILLING SING ELECTRICAL LINE CONSTRUCTION WORK 745,85 SOD S EWING AVE STILLING GOIS BUSINEERS INC ELECTRICAL LINE CONSTRUCTION WORK ELECTRICAL MECHANICAL ENGINEERING CONSUL																
Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 Dire reportable compensation from the organization ► 29 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 Dire reportable compensation from the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000² If "Yes," complete Schedule J for such individual for services rendered to the organizations greater than \$150,000² If "Yes," complete Schedule J for such person							L,									
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 29 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	c Total from continuation she	•			·		_ : ⊢		2.20	7.256					016.674	
Yes No	2 Total number of individuals ((including but not limited	to thos		ed al	bove	e) who	rece			\$10	0,000	<u> </u>		810,074	
Iline 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	or reportable compensation	Troin the organization P												Yes	No	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual				ee, ke	ey er •	mplo •	oyee,	or hi	ghest com	pensat • •	ed (employee on	3		No	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	organization and related org											the	4	Yes		
Section B. Independent Contractors 1									_	on or ı	ndıv •	idual for	_		No	
from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Compensation BIG D ELECTRICAL CONTRACTORS INC 1203 BARTON STREET PO BOX 156 ELDORADO, IL 62930 BUILDING SYSTEMS OF ILLINOIS INC 1625 HUSTON DRIVE DECATUR, IL 62526 HANSON PROFESSIONAL SERVICES INC 1525 S SIXTH STREET SPRINGFIELD, IL 62703 L KEELEY CONSTRUCTION CO SO S EWING AVE ST LOUIS, MO 63103 BHMG ENGINEERS INC (B) (C) Compensation ELECTRICAL LINE CONSTRUCTION 2,203,46 CONSTRUCTION OBSERVATION/ENVIRONMENTAL S CONSTRUCTION OBSERVATION/ENVIRONMENTAL S FARDING AND FOUNDATION WORK 745,89 630 JEFFCO BLVD ARNOLD, MO 63010							·								NO	
Name and business address BIG D ELECTRICAL CONTRACTORS INC ELECTRICAL LINE CONSTRUCTION 2,203,46 203 BARTON STREET PO BOX 156 ELDORADO, IL 62930 BUILDING SYSTEMS OF ILLINOIS INC 1625 HUSTON DRIVE DECATUR, IL 62526 HANSON PROFESSIONAL SERVICES INC 1525 S SIXTH STREET SPRINGFIELD, IL 62703 L KEELEY CONSTRUCTION CO 500 S EWING AVE ST LOUIS, MO 63103 BHMG ENGINEERS INC 630 JEFFCO BLVD ARNOLD, MO 63010													mpens	sation		
1203 BARTON STREET PO BOX 156 ELDORADO, IL 62930 BUILDING SYSTEMS OF ILLINOIS INC 1625 HUSTON DRIVE DECATUR, IL 62526 HANSON PROFESSIONAL SERVICES INC 1525 S SIXTH STREET SPRINGFIELD, IL 62703 L KEELEY CONSTRUCTION CO 500 S EWING AVE ST LOUIS, MO 63103 BHMG ENGINEERS INC 630 JEFFCO BLVD ARNOLD, MO 63010	DIG D ELECTRICAL CONTRACTORS INC.											ption of services	TON	Compe	nsation	
BUILDING SYSTEMS OF ILLINOIS INC 1625 HUSTON DRIVE DECATUR, IL 62526 HANSON PROFESSIONAL SERVICES INC 1525 S SIXTH STREET SPRINGFIELD, IL 62703 L KEELEY CONSTRUCTION CO 500 S EWING AVE ST LOUIS, MO 63103 BHMG ENGINEERS INC 630 JEFFCO BLVD ARNOLD, MO 63010	1203 BARTON STREET PO BOX 156									LECTRI	-AL	LINE CONSTRUCT	ION	2	,203,467	
DECATUR, IL 62526 HANSON PROFESSIONAL SERVICES INC 1525 S SIXTH STREET SPRINGFIELD, IL 62703 L KEELEY CONSTRUCTION CO SOUS EWING AVE ST LOUIS, MO 63103 BHMG ENGINEERS INC 630 JEFFCO BLVD ARNOLD, MO 63010	· · · · · · · · · · · · · · · · · · ·													1	,393,080	
DBSERVATION/ENVIRONMENTAL S SPRINGFIELD, IL 62703 L KEELEY CONSTRUCTION CO GRADING AND FOUNDATION WORK T45,89 SOU S EWING AVE ST LOUIS, MO 63103 BHMG ENGINEERS INC 630 JEFFCO BLVD ARNOLD, MO 63010	DECATUR, IL 62526									ONCED	ICT	0.11			760.000	
L KEELEY CONSTRUCTION CO SOO S EWING AVE ST LOUIS, MO 63103 BHMG ENGINEERS INC 630 JEFFCO BLVD ARNOLD, MO 63010 GRADING AND FOUNDATION WORK 745,89 ELECTRICAL/MECHANICAL ENGINEERING CONSUL 742,89 ENGINEERING CONSUL	1525 S SIXTH STREET	•											AL S		769,029	
ST LOUIS, MO 63103 BHMG ENGINEERS INC 630 JEFFCO BLVD ARNOLD, MO 63010 ELECTRICAL/MECHANICAL ENGINEERING CONSUL	L KEELEY CONSTRUCTION CO								G	RADING	3 AN	D FOUNDATION W	VORK		745,892	
630 JEFFCO BLVD ARNOLD, MO 63010	ST LOUIS, MO 63103								E	LECTRI	CAL/	MECHANICAL			742,853	
															· 	
compensation from the organization ▶ 28 Form 990 (201			not lim	ited t	o th	ose	listed	abov	ve) who re	ceived	mo	re than \$100,00				

		(2019)								Page 9
Part	VIII									
		Check if Sched	dule (O contains a	a respo	onse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(6)	1 a	Federated campa	igns		1a			revenue		512 - 514
unts	ı	b Membership dues	s .		1b					
6r2		c Fundraising even	ts .	· j	1c					
tributions, Gifts, Grants Other Similar Amounts		d Related organiza	tions	:	1d					
m 6	•	e Government grants	(cont	tributions)	1e					
ons Sir	1	F All other contribution and similar amounts	ns, gi s not	ıfts, grants, ıncluded	1f					
buti the	١,	above Noncash contributio	ns inc	l cluded in	11					
Contributions, Gifts, Grants and Other Similar Amounts	"	lines 1a - 1f \$			1 g					
Cont	ı	h Total. Add lines :	1a-11	f		•				
						Business Code	122.040.202	122.040.202		
a	2a	ELECTRIC SALES				221000	133,049,292	133,049,292		
Program Service Revenue	b	DISTRIBUTION REVE	NUE			221000	3,018,838	3,018,838		
<u>₹</u>	_	PATRONAGE CAPITAL	DE\/I	ENLIE		1	2,437,282	2,437,282		
MCE	C	TAINONAGE CAITTAE		LIVOL		221000				
₹	d]				
ran						1				
P _C	е									
	f	All other program	serv	ice revenue			10,283,436	10,283,436		
		Total. Add lines 2				148,788,848		,		
	3]	Investment income imilar amounts)		luding divid		nterest, and other	1,643,34	4		1,643,344
	4	Income from invest	men	t of tax-exe	mpt b	ond proceeds	•			
	5	Royalties	<u>.</u>			•	•			
				(ı) Rea	al	(II) Personal	-			
		Gross rents	6a		23,957	7	_			
	b	Less rental expenses	6ь		(
	С	Rental income or (loss)	6 c		23,957	7	7			
	d	Net rental income		loss) .		1		7		23,957
				(ı) Secur	ities	(II) Other				
	7a	7a Gross amount from sales of 7a			81,26	2				
		assets other than inventory								
	b	Less cost or other basis and	7b				0			
		sales expenses					_			
	С	Gain or (loss)	7c			81,26	2			
		Net gain or (loss)				· · · •	81,26	2		81,262
e E	8a	Gross income from fu (not including \$		of						
-F		contributions reported See Part IV, line 18		ine 1c)	8a					
Re	b	Less direct expen	ses		8b		-			
Other Revenue	c	Net income or (los	s) fr	om fundrais	ing ev	ents				
	9a	Gross income from	aamı	na activities						
		See Part IV, line 19			9a					
		Less direct expen			9b					
	С	Net income or (los	is) tr	om gaming	activit	les ▶	7			
	10a	Gross sales of inve								
	b	Less cost of good			10a 10b		-			
		Net income or (los					_			
		Miscellaneo	us Re	evenue		Business Code				
	11	a MISCELLANEOUS	INC	OME		90009	9 110,60	110,602		
	L	TAIL/FOTH				90009	9 -26	7 536	-803	
	O	INVESTMENT IN L	.LC'S)0009	-20		-003	
	c									
	-									
	d	All other revenue								
	е	Total. Add lines 1	1a-1	.1d		•	110,33	5		
	12	Total revenue. S	ee in	structions			150,647,746		-803	1,748,563
							-1-11	,,.,.		Form 990 (2019)

Form 990 (2019)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must c	•	-		
Check if Schedule O contains a response or note to an	y line in this Part IX			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	16,373			
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members	8,000,000			
5 Compensation of current officers, directors, trustees, and key employees	2,115,048			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	640,284			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	817,504			
9 Other employee benefits	1,228,761			
10 Payroll taxes	237,013			
11 Fees for services (non-employees)				
a Management				
b Legal	177,128			
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	5,770			
13 Office expenses	1,108,749			
14 Information technology	746,354			
15 Royalties				
16 Occupancy				
47 Traval	47 220			

	·		
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	817,504		
9 Other employee benefits	1,228,761		
10 Payroll taxes	237,013		
11 Fees for services (non-employees)			
a Management			
b Legal	177,128		
c Accounting			
d Lobbying			
e Professional fundraising services See Part IV, line 17			
f Investment management fees		•	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)			
12 Advertising and promotion	5,770		
13 Office expenses	1,108,749		
14 Information technology	746,354		
15 Royalties			
16 Occupancy			
17 Travel	47,330		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .			
19 Conferences, conventions, and meetings			
20 Interest	26,276,932		
21 Payments to affiliates			
22 Depreciation, depletion, and amortization	22,846,931		
23 Insurance	583,715		
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 $\stackrel{,}{\mathsf{O}}$) 34,859,578 a ELECTRIC PURCHASES **b** POWER PRODUCTION 25,789,967 c TRANSMISSION 22,935,635 d PROPERTY TAXES 551,189 e All other expenses 1,663,485 150,647,746

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part IX			🗆
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	10,756,367	1	7,706,204
2	Savings and temporary cash investments	3,605,410	2	2,201,464
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	12,113,140	4	15,749,181
5	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	33,696	5	4,887
6	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	

	6	section 4958(f)(1)), and persons described in se				6	
S	7	Notes and loans receivable, net			967,453	7	0
	8	Inventories for sale or use			8,898,535	8	8,832,135
ΑS	9	Prepaid expenses and deferred charges			9,309,690	9	12,288,612
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	748,506,860			
	ь	Less accumulated depreciation	10 b	193,224,261	487,802,117	10 c	555,282,599
	11	Investments—publicly traded securities .		11			
	12	Investments—other securities See Part IV, line	11 .		43,927,621	12	45,481,967
	13	Investments—program-related See Part IV, line	11 .	•		13	
	14	14 Intangible assets				14	
	15	Other assets See Part IV, line 11			68,050,321	15	390,412
	7 N 8 II 9 P 10a L b b L 11 II 12 II 13 II 14 II 15 C 16 T	Total assets. Add lines 1 through 15 (must equ	ual line	34)	645,464,350	16	647,937,461
	17	Accounts payable and accrued expenses			17,545,602	17	20,290,676

18

19

20

33

Grants payable .

Deferred revenue .

Tax-exempt bond liabilities

Total liabilities and net assets/fund balances

Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Liabilities 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 22 427,941,986 23 434,862,805 23 Secured mortgages and notes payable to unrelated third parties 23,135,970 24 Unsecured notes and loans payable to unrelated third parties 36,284,436 24 6,608,434 10,563,981 Other liabilities (including federal income tax, payables to related third parties, 25 and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 . . 529.898.350 26

18

19

20

40.518.029

647,937,461

Form **990** (2019)

41.517.892

645,464,350

33

- Organizations that follow FASB ASC 958, check here ▶ complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 27 28
- 529.371.461 28 Net assets with donor restrictions .
- Fund Balances Organizations that do not follow FASB ASC 958, check here complete lines 29 through 33.
- ō 29 29 Capital stock or trust principal, or current funds 0 0 0 0 30 Paid-in or capital surplus, or land, building or equipment fund . . . 30
- Assets 115.566.000 118.566.000 31 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 115,566,000 32 118,566,000

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

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 in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

2c

3a

3b

No

Form 990 (2019)

Additional Data

Software ID: Software Version:

EIN: 37-1013955

Name: PRAIRIE POWER INC

Form 990 (2019)

101111 990 (2019)

Form 990, Part III, Line 4a:

ELECTRIC PURCHASES - PURCHASED AND GENERATED KILOWATT HOURS OF ELECTRICITY FOR SALE TO MEMBER SYSTEMS

Form 990, Part III, Line 4b: TRANSMISSION OF ELECTRICITY - TRANSMISSION OF ELECTRICITY FROM THE GENERATOR TO OUR MEMBER SYSTEMS

Form 990, Part III, Line 4c: DISTRIBUTION OF FLECTRICITY - DISTRIBUTION OF FLECTRICITY FROM THE SUBSTATION TO OUR MEMBER SYSTEMS.

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related /M_ 2/1000_ (11/- 2/1000organization and

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

REGINALD JOHNSON

CRYSTAL RINEY

JEREMY JOHNSON

JOSEPH SMITH

CHARLES FOGLEMAN

DISPATCH SUPERVISOR

SUPERINTENDENT OF OPERATION

..........

VP FINANCE & ACCOUNTING

ENGINEERING MANAGER

CHIEF TECHNOLOGY OFFICER

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	MISC)	(W- 2/1099- MISC)	related related organizations
ERIC HOBBIE PRESIDENT & CEO	40 00			x				404,475	0	81,767
KARL KOHLRUS PLANNING ENGINEER	40 00					х		143,763	0	64,237
ROBERT REYNOLDS SR VP MEMBERS & BUSINESS	40 00			х				198,826	0	101,265
RICHARD CHAPMAN	40 00			х				207,122	0	80,464

Χ

Х

Х

Х

Χ

140,250

166,466

126,191

168,114

119,230

101,249

84,517

40.897

72,845

24,291

46,573

n

0

ROBERT REYNOLDS	40 00		X		198,826	
SR VP MEMBERS & BUSINESS			^		150,020	
RICHARD CHAPMAN	40 00		Х		207,122	
SR VP ENGINEERING & OPERATIONS					207,122	
PHILLIP BREEZEEL	40 00		Х		164,322	
VP MISO MARKET OPERATIONS			^		104,322	

40 00

40 00

0 50 40 00

40 00

40 00

................

......

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee)

10,625

10,625

10,625

10,450

9,925

9,575

0

0

0

0

0

0

0

0

0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours					ustee		organization	organizations from the		
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
CYNTHIA STILES DIRECTOR OF HUMAN RESOURCE	40 00			х				109,100	0	52,254	
DWIGHT ALA DISPATCHER	40 00					x		124,072	0	34,037	
TRACY JOHANSSON MANAGER, REGULATORY, & LEGAL	40 00			х				121,700	0	32,278	
JERRY RIGGINS	4 00	х		х				11,675	0	0	

TRACY JOHANSSON	
MANAGER, REGULATORY, & LEGAL	
JERRY RIGGINS	
CHAIRMAN	
THOMAS MEEHAN III	

......

.....

......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

ROBERT KUHNS

GARY L MARTIN

ASSISTANT SECRETARY/TREASU

BRENT LIVELY

JACK L CLARK

WILLIAM R NEWTON

and Independent Contractors

3 00

1 00

3 00

5 00

2 00

1 00

Х

Х

Х

Х

Х

Х

Χ

......

......

......

...............

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	1 4119 110413	""	u un	CCLO	71 / CI ·	usice,	′ !	(14 2 (4 000	(14, 2/4,000	l moniture .
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
BRADLEY J LUDWIG DIRECTOR	3 00	×						9,575	0	0
KENT METZGER DIRECTOR	2 00	×						8,175	0	0
JAMES BENZ DIRECTOR	1 00	х						7,825	0	0

1,400

1,050

700

700

700

0

0

0

0

1 00

1 00

1 00

1 00

1 00

3 00

2 00

......

......

......

......

Х

Х

Х

Х

Х

Х

Х

Χ

Χ

KENT METZGER
DIRECTOR
JAMES BENZ
DIRECTOR
JOHN BOWERS

......

ALTERNATE DIRECTOR FROM 06/2019

ALTERNATE DIR UNTIL 06/2019

ALTERNATE DIRECTOR FROM 06/2019

MARCIA STANGER

ALAN ACHESON

CHAD LARIMORE

LYLE H NELSON

VICE CHAIRMAN

ALTERNATE DIRECTOR

ROBERT HUNZINGER

JOSH SHALLENBERGER

SECRETARY/TREASURER

ALTERNATE

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JIM THOMPSON	2 00	1				-				
DIRECTOR		×						0	0	0
KIM LEFTWICH ALTERNATE/DIR UNTIL 06/2019	1 00	1						0	0	0
NATALIE PARKERSON ALTERNATE DIR UNTIL 06/2019	0 00	1						0	0	0
HAROLD LOY	0 00									

0

0

0

0

................

......

......

................

1 00

1 00

1 00

0 00

3 00

0.00

Х

Х

Х

Х

Х

Х

1
NATALIE PARKERSON
ALTERNATE DIR UNTIL 06/2019
HAROLD LOY
ALTERNATE DIR UNTIL 06/2019
BRUCE GIFFIN

......

DIRECTOR/ALTERNATE

MICHAEL CASPER

R MICHAEL SMITH

ROBERT DWYER

ALISHA ANKER

STEVE WORNER

.......

DIRECTOR

DIRECTOR

ALTERNATE

DIRECTOR

ALTERNATE

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

and a director/trustee)

organization

organizations

from the

0

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

AMY BORNTRAGER

DIRECTOR FROM 06/2019

ROBERT HOLTHAUS SHELBY

ALTERNATE DIRECTOR FROM 06/2019

	for malakad				,		,	(14, 2/1000	(14/ 2/1000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JOHN M SCOTT ALTERNATE DIR UNTIL 06/2019	0 00	х						0	0	0
WILLIAM R DODDS DIRECTOR	1 00	х						0	0	0
TODD GROTTS	1 00									

0 DIRECTOR

1 00

0 00

......

......

any hours

0

DIRECTOR									
JAY MORRISON	1 00								
		l x	l	l	1	l	l o	o	1
ALTERNATE DIRECTOR		''					_		
TOM TRAVIS	1 00								
		Ιx	l	l			l o	0	ĺ
ALTERNATE DIRECTOR FROM 06/2019		''					_		l

Х

Х

SCHEDULE D

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Supplemental Financial Statements

Cat No 52283D

Schedule D (Form 990) 2019

▶ 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. 2019

DLN: 93493252004300 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

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

Inspection

	ame of tl AIRIE POW	he organization				Emp	loyer identification number
FIX	AIRIE FOW	TEN INC				37-1	013955
Pā	art I	Organizations Maintaining Donor Adv				r Acc	ounts.
		Complete if the organization answered "Ye					(1) 5
	Tatalas	umbay at and af year	(a) Donor	advised fur	nas		(b) Funds and other accounts
L		umber at end of year					
		ate value of contributions to (during year)					
3		ate value of grants from (during year)					
+		ate value at end of year					
5	organi	e organization inform all donors and donor advisor zation's property, subject to the organization's ex	xclusive legal control?	ı			☐ Yes ☐ No
5	charita	e organization inform all grantees, donors, and d ible purposes and not for the benefit of the dono e benefit?					
Pa	rt II	Conservation Easements.					
		Complete if the organization answered "Ye			e 7.		
L	Purpos	se(s) of conservation easements held by the orga	nization (check all th	at apply)			
	∐ P	reservation of land for public use (e g , recreation	n or education)	∟ Prese	rvation of an	histori	cally important land area
	□ P	rotection of natural habitat		Prese	rvation of a c	ertified	d historic structure
	□ Р	reservation of open space					
2		ete lines 2a through 2d if the organization held a ent on the last day of the tax year	qualified conservatio	n contribut	ion in the for	m of a	conservation Held at the End of the Year
а		umber of conservation easements			1	2a	neia at the Bia of the Four
b	Total a	creage restricted by conservation easements				2b	
c		r of conservation easements on a certified histor	ic structure included	n (a)	-	2c	
d	Numbe	r of conservation easements included in (c) acqu re listed in the National Register		` '	historic	2d	
3		er of conservation easements modified, transferr	ed, released, extingui	shed, or te	rminated by t	the org	ganization during the
ı	Numbe	er of states where property subject to conservation	on easement is locate	d ▶			_
5		he organization have a written policy regarding t		g, inspectio	on, handling o	of viola	
					J		∐ Yes ∐ No
5	>tarr a	nd volunteer hours devoted to monitoring, inspe 	cting, nandling of viol	ations, and	d enforcing co	nserva	ation easements during the year
7	Amour ► \$	nt of expenses incurred in monitoring, inspecting	, handling of violation	s, and enfo	orcing conserv	/ation	easements during the year
3		each conservation easement reported on line 2(d ction $170(h)(4)(B)(l)^2$) above satisfy the re	quirements	of section 17	70(h)(<i>4</i>	4)(B)(ı) ☐ Yes ☐ No
9	balanc	: XIII, describe how the organization reports con: e sheet, and include, if applicable, the text of the ganization's accounting for conservation easemer	e footnote to the orga				tement, and
aı		Organizations Maintaining Collections Complete of the organization answered "Ye	of Art, Historica			er Sir	milar Assets.
La	art, his	organization elected, as permitted under SFAS 1 storical treasures, or other similar assets held for e, in Part XIII, the text of the footnote to its fina	16 (ASC 958), not to public exhibition, ed	report in it ucation, or	s revenue sta research in fi		
b	historic	organization elected, as permitted under SFAS 1 cal treasures, or other similar assets held for pub ng amounts relating to these items					
1	(i) Rever	nue included on Form 990, Part VIII, line 1					▶ \$
(ii)Assets	included in Form 990, Part X					▶ \$
2		organization received or held works of art, historing amounts required to be reported under SFAS				ncial g	ain, provide the
а		ue included on Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,	<u> </u>			▶ \$
b	Assets	included in Form 990, Part X					▶ \$

 ${f d}$ Equipment .

Sche	dule D (Form 990) 2019										Page 2
Par	t IIII Organizations Maintaining Co	lections o	of Art, Histo	rical T	reası	ıres, oı	r Other Simila	r Assets	(contin	ued)	
3	Using the organization's acquisition, accession items (check all that apply)	n, and other	records, chec	k any of	the fo	llowing t	hat are a significa	ant use of r	ts colle	ction	
а	Public exhibition		d		Loan	or exch	ange programs				
b	Scholarly research		е		Othe	r					
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	llections and	d explain how t	hey furt	her the	e organiz	zation's exempt pi	ırpose ın			
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to							□ Y	'es	□ N	0
Pa	rt IV Escrow and Custodial Arrange Complete if the organization answ X, line 21.		" on Form 99	90, Pari	t IV, lı	ne 9, o	r reported an ar	mount on	Form	990,	Part
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?	an or other	intermediary f	or contr	ibution	s or othe	er assets not	П.,	_	п	
								⊔ Y	'es	∐ N	o
ь	If "Yes," explain the arrangement in Part XII:	and comple	ete the followi	ng table				Amount	t		_
c	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 Fo	orm 990, Pai	rt X, line 21, fo	or escro	w or cu	stodial a	account liability? .	🗆 Y	'es	□n	_ o
b	If "Yes," explain the arrangement in Part XIII	Check her	e if the explan	ation ha	s been	provide	d in Part XIII	🗆			
	rt V Endowment Funds.										
	Complete if the organization answ	vered "Yes	" on Form 99	90, Pari							
		(a) Curre	nt year (b) Prior ye	ar	(c) Two y	ears back (d) Thre	e years back	(e) Fo	our yea	rs back
	Beginning of year balance										
b	Contributions								<u> </u>		
	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	ent year end	d balance (line	1g, colu	ımn (a)) held a	s				
а	Board designated or quasi-endowment >										
b	Permanent endowment ►										
С	Temporarily restricted endowment ▶										
	The percentages on lines 2a, 2b, and 2c shou	ıld equal 10	0%								
3 a	Are there endowment funds not in the posses	ssion of the	organization tl	nat are h	neld an	d admın	stered for the		_		
	organization by							_		Yes	No
	(i) unrelated organizations							<u> </u>	3a(i)		
	(ii) related organizations							-	Ba(ii)		
b 4	If "Yes" on 3a(II), are the related organization		•		٠.			· L	3b		
4	Describe in Part XIII the intended uses of the		n s endowmer	it lunus							
Pal	rt VI Land, Buildings, and Equipme Complete if the organization answ		" on Form 9	90. Pari	t IV. lı	ne 11a.	. See Form 990.	. Part X. I	ıne 10		
	Description of property (a) Cost or ot (investment)	her basıs	(b) Cost or oth				umulated depreciation		(d) Boo		e
1.2	Land			7 7	32,128					7	,232,128
				-	85,558		55,850,5	30			,635,028
D	Buildings			137,4	.05,556		33,630,3	,50		101	.,055,028

555,796,012

27,993,162

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

418,422,281

27,993,162

555,282,599

137,373,731

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on	Form 990. Part IV	ne 11h	See Form 990	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value		(c) Metho	d of valuation -year market value
(1) Financia	al derivatives			Cost of end-of	year market value
	-held equity interests				
	NTEE CERTIFICATES	4,009,500			С
(B) LOAN C	AP TERM CERTIFICATES	20,380,214			С
(C) SUBSCR	RIPTION CAP TERM CERTIFICATES	2,252,049			С
(D) PATRON	NAGE CAPITAL	12,635,118			С
(E) MISCELI	LANEOUS INVESTMENTS	3,567,613			С
(F) DEBT SE (G)	ERVICE RESERVE FUND	2,637,473			С
(H)					
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	45,481,967			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on		no 110	See Form 000	Part V line 13
	(a) Description of investment	101111 990, Faic 1V, III	ile IIC	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)					10.00
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colun	nn (b) must equal Form 990, Part X, col (B) line 13)		•		
Part IX	Other Assets. Complete if the organization answered 'Yes' on F	Form 990, Part IV, lin	e 11d.	See Form 990, Pa	rt X, line 15
	(a) Descriptio				(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9) ———					
Total. (Colu	umn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.				•
	Complete if the organization answered 'Yes' on F (a) Description of		e 11e	or 11f.See Form	990, Part X, line 25. (b) Book value
1. (1) Federal	Income taxes	парти			(b) book value
(7)					
(8)					
(9)					
	nn (b) must equal Form 990, Part X, col (B) line 25)			<u> </u>	10,563,981
•	for uncertain tax positions In Part XIII, provide the text on a line of the fext of the control		-		

Part XI

1

c

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Schedule D (Form 990) 2019

Page 4

145,474,930

5,172,816

150,647,746

137,474,930

-5,172,816

2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments b e

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

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

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

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

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 . .

Investment expenses not included on Form 990, Part VIII, line 7b . b Add lines **4a** and **4b** c 5

3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Part XII

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

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

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

4a 4b

> 2a 2b

2c

2d

4a 4b

Explanation

2a

2b

2c

2d

5,172,816

-5,172,816

8.000.000

4c 5

2e

3

2e

3

142,647,746 8,000,000

4c 5 150.647.746

Schedule D (Form 990) 2019

Page 5		chedule D (Form 990) 2019	Schedule D (F
	ormation (continued)	Part XIII Supplemental Info	Part XIII
	Explanation	Return Reference	Re

Schedule D (Form 990) 2019

Additional Data

Software Version:
EIN: 37-1013955

Name: PRAIRIE POWER INC

Supplemental Information

Return Reference	Explanation
	THE COOPERATIVE BELIEVES IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN AFFECTING ITS ANNUAL FILING REQUIREMENTS, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THA T ARE MATERIAL TO THE FINANCIAL STATEMENTS THE COOPERATIVE WOULD RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN INCOME TAX EXPENSE IF SUCH INTEREST AND PENALTIES ARE INCURRED

Software ID:

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	MISO SALES INCLUDED IN EXPENSE ON FINANCIALS 3,917,344 EXCESS CAPACITY SALES INCLUDED IN EXPENSE ON FINANCIALS 1,255,472

Supplemental Information Return Reference Explanation PART XII, LINE 2D - OTHER MISO SALES INCLUDED IN REVENUE ON FORM 990 -3,917,344 EXCESS CAPACITY SALES INCLUDED IN REVENUE ON FORM 990 -1.255.472 I ADJUSTMENTS

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	PATRONAGE CAPITAL ALLOCATIONS 8,000,000

-

efil	e GRAPHIC pi	rint - DO NOT PROCESS	s Filed Data	a -	DLN: 93	19325	52004	300		
Schedule J		Cor	npensati	ion Information	10	1B No	1545-0	0047		
(For	n 990)	For certain Officers	hest							
		► Complete if the organ	2019							
Б	e.i . 		Open to Public							
•	► Go to <u>www.irs.qov/Form990</u> for instructions and the latest information.									
	ne of the organiza IRIE POWER INC	ation			Employer identifica	tion nu	ımber			
					37-1013955					
Pa	rt I Questi	ons Regarding Compensation	on				I			
1 a				the following to or for a person liste y relevant information regarding the			Yes	No_		
	☐ First-class	s or charter travel		Housing allowance or residence for	personal use					
		companions		Payments for business use of perso	•					
	☐ Tax ıdemı	nification and gross-up payments		Health or social club dues or initiation	on fees					
	Discretion	nary spending account		Personal services (e g , maid, chauf	ffeur, chef)					
b				follow a written policy regarding pay ve? If "No," complete Part III to expl		1b	Yes			
2				or allowing expenses incurred by all		2	Yes			
	directors, truste	es, officers, including the CEO/Exe	ecutive Director	r, regarding the items checked on Lir	ne la?					
3	organization's C	EO/Executive Director Check all t	hat apply Don	d to establish the compensation of the not check any boxes for methods CEO/Executive Director, but explain						
	Compens	ation committee		Written employment contract						
		ent compensation consultant	✓	Compensation survey or study						
	☐ Form 990	of other organizations	✓	Approval by the board or compensa	ition committee					
4	During the year related organiza		0, Part VII, Sed	ction A, line 1a, with respect to the f	iling organization or a					
а	Receive a sever	ance payment or change-of-contro	ol payment?			4a		No		
b	Participate in, o	r receive payment from, a supplen	nental nonquali	ified retirement plan?		4b		No		
С		r receive payment from, an equity		-		4c		No		
	If "Yes" to any o	of lines 4a-c, list the persons and p	provide the app	licable amounts for each item in Par	t III					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) o	rganizations	must complete lines 5-9.						
5	For persons liste		A, line 1a, did t	the organization pay or accrue any						
а	The organization	n?				5a				
b	Any related orga					5b				
	·	5a or 5b, describe in Part III								
6		ed on Form 990, Part VII, Section of ontingent on the net earnings of	A, line 1a, did t	the organization pay or accrue any						
a	The organization					6a				
b	Any related orga	anization? 6a or 6b, describe in Part III				6b				
7	•	•	A. line 1a did t	the organization provide any nonfixe	d					
•		For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III								
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe					
9		8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9				
For F	Panerwork Redu	action Act Notice, see the Instru	uctions for Fo	orm 990. Cat No 5	50053T Schedule J	(Form	1 990)	2019		

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 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 are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC (C) Retirement (D) Nontaxable (E) Total of (F) and other benefits columns compensation Compensation in deferred (B)(i)-(D)column (B) (iii) Other (i) Base (ii) reported as compensation compensation | Bonus & incentive reportable deferred on prior compensation compensation Form 990 See Additional Data Table

Schedule J (Form 990) 2019

Page : Page 1 Page 2019										
Part III Supplemental Information										
Provide the information, explanation, or	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									
•	THE CEO RECEIVES REIMBURSEMENT OF TRAVEL EXPENSES OF HIS SPOUSE WHEN SHE ACCOMPANIES HIM ON PRAIRIE POWER, INC BUSINESS THIS IS PART OF HIS CONTRACT AS AUTHORIZED BY THE BOARD									
DEFERRED COMPENSATION	INCLUDED IN OTHER COMPENSATION IS THE ESTIMATED CURRENT YEAR INCREASE IN THE ACTUARIAL VALUE OF THE DEFINED BENEFIT PLAN THESE AMOUNTS DO NOT REPRESENT ANY CURRENT YEAR CONTRIBUTIONS TO THE PLAN THEY ARE ESTIMATES OF THE INCREASE IN THE ACTUARIAL VALUE OF THE PLANS RECEIVED FROM THE NRECA THE CURRENT YEAR EXPENSE AND THE INCREASE IN ACTUARIAL VALUE FOR EACH EMPLOYEE ARE REFLECTED IN THE STATEMENT FOR FORM 990, PART VII, COLUMN F									

Schedule 1 (Form 990) 2019

1ERIC HOBBIE

DIRECTOR OF HUMAN RESOURCE

12TRACY JOHANSSON

MANAGER, REGULATORY, &

11DWIGHT ALA

DISPATCHER

LEGAL

(II)

(1)

(1)

(i) Base Compensation

(1)

372,018

118,201

118,792

Software ID:

Software Version:

(ii)

Bonus & incentive

compensation

EIN: 37-1013955

Name: PRAIRIE POWER INC

(iii)

Other reportable

compensation

9,038

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title

(B) Breakdown of W-2 and/or 1099-MISC compensation

(C) Retirement and

(D) Nontaxable

23,419

2,346

PRESIDENT & CEO		3/2,018	23,419	9,038	52,165	33,790	490,430	0
	(11)	0	0	0	0	0	0	0
1KARL KOHLRUS PLANNING ENGINEER	(1)	140,647	0	3,116	41,845	24,807	210,415	0
	(11)	0	0	0	0	0	0	0
2ROBERT REYNOLDS SR VP MEMBERS &	(1)	186,821	2,346	9,659	75,824	28,639	303,289	0
BUSINESS	(11)	0	0	0	0	0	0	0
3RICHARD CHAPMAN SR VP ENGINEERING &	(1)	190,764	4,488	11,870	55,023	28,704	290,849	0
OPERATIONS	(11)	0	0	0	0	0	0	0
4PHILLIP BREEZEEL VP MISO MARKET	(1)	157,392	0	6,930	71,531	33,195	269,048	0
OPERATIONS	(11)	0	0	0	0	0	0	0
5 REGINALD JOHNSON SUPERINTENDENT OF	(1)	132,321	0	7,929	63,296	23,263	226,809	0
OPERATION	(11)	0	0	0	0	0	0	0
6 CRYSTAL RINEY VP FINANCE &	(1)	162,651	2,366	1,449	19,174	23,745	209,385	0
ACCOUNTING	(11)	0	0	0	0	0	0	0
7JEREMY JOHNSON ENGINEERING MANAGER	(1)	120,660	0	5,531	16,242	58,197	200,630	0
	(11)	0	0	0	0	0	0	0
8JOSEPH SMITH CHIEF TECHNOLOGY	(1)	160,406	4,640	3,068	21,350	4,767	194,231	0
OFFICER	(11)	0	0	0	0	0	0	0
9CHARLES FOGLEMAN DISPATCH SUPERVISOR	(1)	115,153	2,451	1,626	15,542	32,470	167,242	0
	(11)	0	0	0	0	0	0	0
10CYNTHIA STILES DIRECTOR OF HUMAN	(1)	106,882	1,564	654	34,231	19,279	162,610	0

5,871

562

other deferred

compensation

52,165

28,620

19,081

(E) Total of columns

(B)(ı)-(D)

490,430

159,749

155,466

benefits

33,790

7,057

14,685

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

0

0

0

0

ef	ile GRAPHIC print - DO NOT	PROCESS As	Filed Data -									DLN: 93	49325	2004300
	te: To capture the full conte	ent of this docum	ent, please select lan	dscape mode	(11" x 8.	.5") wh	en pi	rinting.						
	hedule K	Sui	nnlemental Info	rmation o	n Tav_F	Evami	nt R	onde				OMB N	0 1545-0	047
(F	orm 990)				on Tax-Exempt Bonds orm 990, Part VI, line 24a. Provide descriptions,							2	N19	
		, ,	explanations, and	any additional	informatio				,			_		
	artment of the Treasury rnal Revenue Service	► G	Atta o to www.irs.gov/Form9	ach to Form 99		o latost	inform	nation				Ope	n to Publ spection	ic
Nam	ne of the organization	P 0.	o to <u>www.ns.gov/10/ms</u>	<u>90</u> 101 mstructi	ions and th	e latest	IIIIOIII	ilation.		Emplo	yer iden	tification		
PRA	AIRIE POWER INC									37-10	013955			
Pä	art I Bond Issues													
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP # (d)	Date issued	(e) Issue price (f) Desci			f) Descript	Description of purpose (g) De			(h) (n	(i) Pool
														inancing
										Yes	No	Yes		es No
A	ILLINOIS FINANCE AUTHORITY	86-1091967	45203GAA2 11	1-04-2008	51,2			WASTE D	SPOSAL		X		X	X
							FACILITIES							
Pa	art II Proceeds													
						Α			3				D	
1	Amount of bonds retired			'		7,890	,000							
2	Amount of bonds legally defease													
3	Total proceeds of issue					51,200	,000							
4	Gross proceeds in reserve funds	S				2,560,000								
5	Capitalized interest from procee	ds			4,389,594									
6	Proceeds in refunding escrows .													
7	Issuance costs from proceeds .					1,024	,000							
8	Credit enhancement from proce	eds				400	,883							
9	Working capital expenditures fro	om proceeds												
10	Capital expenditures from proce	eds				42,825	,573							
11	Other spent proceeds													
12	Other unspent proceeds													
13	Year of substantial completion .				20	012								
					Yes	No		Yes	No	Yes	No	,	Yes	No
14	Were the bonds issued as part obonds (or, if issued prior to 201	of a current refunding	g issue of tax-exempt			X								
15	Were the bonds issued as part of bonds (or, if issued prior to 201	of an advance refundi	ing issue of taxable			×								
16	Has the final allocation of proce				Х									
17				l allocation of	Х									
Ð	proceeds?													
	Filvate Business Os					A			з Т				D	
					Yes	No	\dashv	Yes	No	Yes	No		Yes	No
1	Was the organization a partner financed by tax-exempt bonds?	ın a partnership, or a	member of an LLC, which	owned property		X								
2	Are there any lease arrangemen	nts that may result in	private business use of bor			х								
Ear	Panerwork Peduction Act Notic					+ No 50	103E					chedule	(/Form	990) 2019

6

8a

Part IV

а

b

C

Arbitrage

Page 2

D

Schedule K (Form 990) 2019

No

Yes

0 %

0 %

0 %

Х

Χ

Χ

Yes

В

No

C

No

Yes

b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?				
С	Are there any research agreements that may result in private business use of bond-financed property?	X			
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?				

Α

No

Χ

Χ

Χ

Χ

Χ

Yes

Χ

Enter the percentage of financed property used in a private business use by entities other than

organization, or a state or local government

Rebate not due yet?

Exception to rebate?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

В

No

Χ

Explanation

No

Yes

Х

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

REBATE COMPUTATION WAS PERFORMED ON APRIL 2, 2013 AND MARCH 29, 2018

Yes

C

No

Yes

No

Yes

R

No

Yes

Page 3

No

D

D

No

Yes

Yes

Schedule K (Form 990) 2019

(GIC)?

period?

Part VI

Arbitrage (Continued)

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

requirements of section 148? . . .

Return Reference

SCHEDULE K, PART IV, LINE 2C

etile GRAPHI	C print - DO N	OT PROCESS	As File	ed Data -				D	LN: 93	<u> 34932</u>	<u> 25200</u>)430 <u>0</u>
Schedule L		Trans	action	s with In	tereste	d Person	<u> </u>		0	MB No	1545	-0047
(Form 990 or 990)-EZ) ► Comple	ete if the organi					_	, 25b, 2	6,	20	11	<u>n</u>
			8b, or 28c	, or Form 99	0-EZ, Part V,	line 38a or 4		•		Z	19	9
Department of the Tre		Go to www.irs.d		to Form 990			ormatio	n.		Open	to Pi	ıhlic
Internal Revenue Serv			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								pecti	
Name of the org							Emp	oyer id	entific	ation r	numb	er
PRAIRIE POWER IN	NC .						37-1	13955				
Part I Exce	ss Benefit Tra	nsactions (sec	tion 501(c)(3) section 5	01(c)(4) and	section 501(c			ns only)		
	lete if the organiz	•	,	, , , ,		, ,						
) Name of disqua			elationship bet	tween disqual	ıfıed person an		Descrip	tion of		I) Corr	ected?
				0	rganization			transact	ion	Y	'es	No
			_							_		
2 Enter the a	mount of tax incu	rred by the organ	ızatıon ma	inagers or disc	unalified perso	ons during the	ear und	er sectio	n			
4958									; =			
3 Enter the a	mount of tax, if a	ny, on line 2, abo	ve, reimbu	irsed by the or	ganızatıon .			. ▶	\$			
2 2												
	ans to and/or	From Interes	ted Ders	one								
Part II Lo	ans to and/or				Part V, line 3	8a, or Form 99	0, Part I	V, line 2	6, or ıf	the org	ganıza	tion
Part II Lo Cor rep	mplete if the orgai orted an amount	nization answered on Form 990, Par	l "Yes" on t X, line 5,	Form 990-EZ, 6, or 22		· · · · · · · · · · · · · · · · · · ·						
Part II Lo Correp (a) Name of	mplete if the orgai orted an amount (b) Relationship	nization answered on Form 990, Par (c) Purpose of	l "Yes" on t X, line 5, (d) Loan t	Form 990-EZ, 6, or 22 to or from the	(e) Original	(f) Balance	(g) In	1 (h)	(i	i) Writ	ten
Part II Lo Cor rep	mplete if the orgai orted an amount	nization answered on Form 990, Par (c) Purpose of	l "Yes" on t X, line 5, (d) Loan t	Form 990-EZ, 6, or 22		· · · · · · · · · · · · · · · · · · ·	(g) In	Appro	h)	(i		ten
Part II Lo Correp (a) Name of Interested	mplete if the orgai orted an amount (b) Relationship	nization answered on Form 990, Par (c) Purpose of	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 so or from the nization?	(e) Original principal	(f) Balance	(g) In default	Appro boa comn	h) ved by rd or nittee?	(i ag	i) Writ	ten ent?
(a) Name of interested person	mplete if the orgai orted an amount (b) Relationship with organization	nization answered on Form 990, Par (c) Purpose of loan	l "Yes" on t X, line 5, (d) Loan t	Form 990-EZ, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) In default	Approboa commo Yes	h) ved by rd or	Yes	i) Writ	ten
(a) Name of interested person	mplete if the orgai orted an amount (b) Relationship	nization answered on Form 990, Par (c) Purpose of	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 so or from the nization?	(e) Original principal	(f) Balance	(g) In default	Approboa commo Yes	h) ved by rd or nittee?	(i ag	i) Writ	ten ent?
(1) CRYSTAL RINEY (2) Correp (a) Name of interested person	mplete if the orgal orted an amount (b) Relationship with organization OFFICER DIRECTOR,	nization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 to or from the nization?	(e) Original principal amount	(f) Balance due	(g) In default	Approba	h) ved by rd or nittee?	Yes	i) Writ	ten ent?
(a) Name of interested person (1) CRYSTAL RINEY (2)	nplete if the orgal orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG	nization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 to or from the nization? From X	(e) Original principal amount	(f) Balance due	(g) In default Yes N	Approba	h) ved by rd or nittee?	Yes Yes	i) Writ	ten ent?
(a) Name of interested person (1) CRYSTAL RINEY (2)	mplete if the orgal orted an amount (b) Relationship with organization OFFICER DIRECTOR,	nization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 to or from the nization? From X	(e) Original principal amount	(f) Balance due	(g) In default Yes N	Approba	h) ved by rd or nittee?	Yes Yes	i) Writ	ten ent?
(a) Name of interested person (1) CRYSTAL RINEY (2)	nplete if the orgal orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG	nization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 to or from the nization? From X	(e) Original principal amount	(f) Balance due	(g) In default Yes N	Approba	h) ved by rd or nittee?	Yes Yes	i) Writ	ten ent?
(a) Name of interested person (1) CRYSTAL RINEY (2)	nplete if the orgal orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG	nization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 to or from the nization? From X	(e) Original principal amount	(f) Balance due	(g) In default Yes N	Approba	h) ved by rd or nittee?	Yes Yes	i) Writ	ten ent?
(a) Name of interested person (1) CRYSTAL RINEY (2)	nplete if the orgal orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG	nization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 to or from the nization? From X	(e) Original principal amount	(f) Balance due	(g) In default Yes N	Approba	h) ved by rd or nittee?	Yes Yes	i) Writ	ten ent?
(a) Name of interested person (1) CRYSTAL RINEY (2) ALISHA ANKER	nplete if the organorted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG	nization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION	l "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 to or from the hization? From X X	(e) Original principal amount	(f) Balance due	(g) In default Yes N	Approba	h) ved by rd or nittee?	Yes Yes	i) Writ	ten ent?
(a) Name of interested person (1) CRYSTAL RINEY (2) ALISHA ANKER	mplete if the organorted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING	education answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE	I "Yes" on t X, line 5, (d) Loan t orgar	Form 990-EZ, 6, or 22 to or from the hization? From X X	(e) Original principal amount 31,872 30,874	(f) Balance due	(g) In default Yes N	Approba	h) ved by rd or nittee?	Yes Yes	i) Writ	ten ent?
(1) CRYSTAL RINEY (2) ALISHA ANKER Total Part III Gra Cor	mplete if the organorted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING	rization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE ASSISTANCE ASSISTANCE	I "Yes" on t X, line 5, (d) Loan t organ To To g Interesered "Yese	Form 990-EZ, 6, or 22 or or from the nization? From X X X Sted Persor 5" on Form 9	(e) Original principal amount 31,872 30,874	(f) Balance due 4,113 774 4,887 line 27.	(g) In default Yes N N	Appropriate (Appropriate (Appro	h) ved by rd or nittee?	Yes Yes	i) Writ	ten ent?
(1) CRYSTAL RINEY (2) ALISHA ANKER Total Part III Gra Cor	mplete if the organorted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING	rization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE ASSISTANCE ASSISTANCE	I "Yes" on t X, line 5, (d) Loan t organ To To g Interesered "Yese	Form 990-EZ, 6, or 22 or or from the nization? From X X X Sted Persor 5" on Form 9	(e) Original principal amount 31,872 30,874	(f) Balance due 4,113 774 4,887 line 27.	(g) In default Yes N N	Appropriate (Appropriate (Appro	h) ved by rd or nittee?	Yes Yes Yes	i) Writingreem	ten ent?
(1) CRYSTAL RINEY (2) ALISHA ANKER Total Part III Gra Cor	orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING Ants or Assistanplete if the organization (i)	rization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE EDUCATION ASSISTANCE DUCATION ASSISTANCE	To g Intereserted "Yesetween and the	Form 990-EZ, 6, or 22 or or from the nization? From X X X Sted Persor 5" on Form 9	(e) Original principal amount 31,872 30,874	(f) Balance due 4,113 774 4,887 line 27.	(g) In default Yes N N	Appropriate (Appropriate (Appro	h) ved by rd or nittee? No	Yes Yes Yes	i) Writingreem	ten ent?
(1) CRYSTAL RINEY (2) ALISHA ANKER Total Part III Gra Cor	orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING Ants or Assistanplete if the organization (i)	enization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE EDUCATION ASSISTANCE EDUCATION ASSISTANCE	To g Intereserted "Yesetween and the	Form 990-EZ, 6, or 22 or or from the nization? From X X X Sted Persor 5" on Form 9	(e) Original principal amount 31,872 30,874	(f) Balance due 4,113 774 4,887 line 27.	(g) In default Yes N N	Appropriate (Appropriate (Appro	h) ved by rd or nittee? No	Yes Yes Yes	i) Writingreem	ten ent?
(1) CRYSTAL RINEY (2) ALISHA ANKER Total Part III Gra Cor	orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING Ants or Assistanplete if the organization (i)	rization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE EDUCATION ASSISTANCE DUCATION ASSISTANCE	To g Intereserted "Yesetween and the	Form 990-EZ, 6, or 22 or or from the nization? From X X X Sted Persor 5" on Form 9	(e) Original principal amount 31,872 30,874	(f) Balance due 4,113 774 4,887 line 27.	(g) In default Yes N N	Appropriate (Appropriate (Appro	h) ved by rd or nittee? No	Yes Yes Yes	i) Writingreem	ten ent?
(1) CRYSTAL RINEY (2) ALISHA ANKER Total Part III Gra Cor	orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING Ants or Assistanplete if the organization (i)	rization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE EDUCATION ASSISTANCE DUCATION ASSISTANCE	To g Intereserted "Yesetween and the	Form 990-EZ, 6, or 22 or or from the nization? From X X X Sted Persor 5" on Form 9	(e) Original principal amount 31,872 30,874	(f) Balance due 4,113 774 4,887 line 27.	(g) In default Yes N N	Appropriate (Appropriate (Appro	h) ved by rd or nittee? No	Yes Yes Yes	i) Writingreem	ten ent?
(1) CRYSTAL RINEY (2) ALISHA ANKER Total Part III Gra Cor	orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING Ants or Assistanplete if the organization (i)	rization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE EDUCATION ASSISTANCE DUCATION ASSISTANCE	To g Intereserted "Yesetween and the	Form 990-EZ, 6, or 22 or or from the nization? From X X X Sted Persor 5" on Form 9	(e) Original principal amount 31,872 30,874	(f) Balance due 4,113 774 4,887 line 27.	(g) In default Yes N N	Appropriate (Appropriate (Appro	h) ved by rd or nittee? No	Yes Yes Yes	i) Writingreem	ten ent?
(1) CRYSTAL RINEY (2) ALISHA ANKER Total Part III Gra Cor	orted an amount (b) Relationship with organization OFFICER DIRECTOR, FORMER VP REG & MARKETING Ants or Assistanplete if the organization (i)	rization answered on Form 990, Par (c) Purpose of loan EDUCATION ASSISTANCE EDUCATION ASSISTANCE EDUCATION ASSISTANCE DUCATION ASSISTANCE	To g Intereserted "Yesetween and the	Form 990-EZ, 6, or 22 or or from the nization? From X X X Sted Persor 5" on Form 9	(e) Original principal amount 31,872 30,874	(f) Balance due 4,113 774 4,887 line 27.	(g) In default Yes N N	Appropriate (Appropriate (Appro	h) ved by rd or nittee? No	Yes Yes Yes	i) Writingreem	ten ent?

Schedule I (Form 990 or 990-F7) 2019

efile GRAPH	IC print - DO NOT PROCESS As Filed Date	1 -	DLN: 93493252004300
SCHEDUL (Form 990 or EZ)	990- Complete to provide information Form 990 or 990-EZ or to p	tion to Form 990 or 990-E2 of for responses to specific questions on rovide any additional information. orm 990 or 990-EZ. orm 990 for the latest information.	OMB No 1545-0047 2019 Open to Public Inspection
Name l Bfthe lofg PRAIRIE POWER IN	С	Employ: 37-1013	er identification number 955
990 Schedule	e O, Supplemental Information		
Return Reference		Explanation	
FORM 990, PART VI, SECTION A, LINE 2	*JIM THOMPSON HAS OR HAD A BUSINESS RELA AGER HAS OR HAD A BUSINESS RELATIONSHIP WAS OR HAD A BUSINESS RELATIONSHIP WAS OR HAD A BUSINESS RELATIONSHIP WITH INESS RELATIONSHIP WITH ROBERT KUHNS, AN ESS RELATIONSHIP WITH JERRY RIGGINS AND FRELATIONSHIP WITH GARY MARTIN AND STEVE RELATIONSHIP WITH BRENT LIVELY AND ROBER ELATIONSHIP WITH JACK CLARK AND LYLE NELS IP WITH WILLIAM NEWTON AND JAY MORRISON	VITH KENT METZGER, AND JOHN BOWER ITH BRADLEY LUDWIG AND CHAD LARIMO THOMAS MEEHAN III *MIKE CASPER HAS MARCIA STANGER *ROBERT SMITH HAS OBERT DWYER *ALISHA ANKER HAS OR WORNER *JOSH SHALLENBERGER HAS OF ITHOLTHAUS *WILLIAM DODDS HAS OR IT	S *ROBERT HUNZIN DRE *BRUCE GIFFI S OR HAD A BUS S OR HAD A BUSIN HAD A BUSINESS DR HAD A BUSINESS DR HAD A BUSINESS HAD A BUSINESS

990 Schedule O, Supplemental Information

Return Explanation

Reference	
FORM 990,	THE ORGANIZATION HAS ONE CLASS OF MEMBERS THAT CONSIST OF TEN ELECTRIC DISTRIBUTION COOPERATIVES
PART VI,	IN ILLINOIS
SECTION A,	
LINE 6	

Return Explanation
Reference

FORM 990,	EACH DISTRIBUTION COOPERATIVE MEMBER OF PPI NOMINATES TWO PERSONS TO SERVE AS DIRECTORS OF
PART VI,	PPI AND ONE PERSON TO SERVE AS AN ALTERNATE DIRECTOR OF PPI TO ACT IN THE ABSENCE OF A DI
SECTION A,	RECTOR THE MEMBERS OF PPI ELECT THE DIRECTORS AND ALTERNATE DIRECTORS AT THE ANNUAL MEETI
LINE 7A	NG OF MEMBERS OF PPI

Return Explanation
Reference

FORM 990, CERTAIN ACTIONS OF PPI, E.G. MERGER, CONSOLIDATION OR SALE OF SUBSTANTIALLY ALL OF THE ASS PART VI, ETS OF PPI OUTSIDE OF THE ORDINARY COURSE OF BUSINESS, REQUIRE APPROVAL OF PPI'S ELECTRIC SECTION A. DISTRIBUTION COOPERATIVE MEMBERS

990 Schedule O, Supplemental Information

LINE 7B

Return Explanation
Reference

FORM 990, PRIOR TO FILING, THE FORM 990 WAS REVIEWED BY MANAGEMENT OF PPI IN ADDITION, THE FORM 990 WAS REVIEWED BY THE PPI FINANCE/LEGAL COMMITTEE, WHICH REPORTED ON THIS REVIEW TO THE FUL SECTION B, L BOARD OF DIRECTORS AFTER THE REVIEW, EVERY MEMBER OF THE BOARD OF DIRECTORS WAS PROVIDE LINE 11B D WITH A COPY OF THE FORM 990

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	PPI'S LEGAL COUNSEL ANNUALLY REVIEWS THE CONFLICT OF INTEREST POLICY WITH THE OFFICERS, DI RECTORS, AND KEY EMPLOYEES EACH DIRECTOR, OFFICER, AND KEY EMPLOYEE MUST ANNUALLY COMPLET E, SIGN, AND SUBMIT THE CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM TO THE CHAI RMAN OR PRESIDENT/CEO IF THE CHAIRMAN OR PRESIDENT/CEO RECEIVES A FORM DISCLOSING ANY INFORMATION OR FACT THAT COULD IMPACT A DIRECTOR'S COMPLIANCE WITH THE POLICY, THE CHAIRMAN M UST DISTRIBUTE THE FORM TO THE BOARD IF THE CHAIRMAN OR PRESIDENT/CEO DISCOVERS ANY OTHER INFORMATION OR FACT, THE CHAIRMAN MUST DISCLOSE THIS TO THE BOARD UPON RECEIVING OR DISCOVERING ANY INFORMATION OR FACT THAT COULD IMPACT A DIRECTOR'S COMPLIANCE WITH THE POLICY, THE BOARD MUST PROVIDE THE DIRECTOR AN OPPORTUNITY TO COMMENT ORALLY AND IN WRITING REGAR DING THE INFORMATION OR FACT, AND AN OPPORTUNITY TO BE REPRESENTED BY LEGAL COUNSEL, AND DETERMINE WHETHER THE DIRECTOR COMPLIES WITH THIS POLICY IF THE BOARD DETERMINES THAT A DIRECTOR DOES NOT COMPLY WITH THIS POLICY, THEN THE BOARD MUST PROVIDE THE DIRECTOR AN OPPORTUNITY TO COMPLY WITH THE POLICY WITHIN THIRTY DAYS, AND IF THE DIRECTOR DOES NOT COMPLY WITH THE POLICY WITHIN THIRTY DAYS, THEN, AS ALLOWED BY LAW, THE BOARD MUST SANCTION, DISQUALIFY, AND/OR SEEK THE REMOVAL OF THE DIRECTOR

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE PRESIDENT AND CEO HAS A WRITTEN EMPLOYMENT CONTRACT APPROVED BY THE BOARD OF DIRECTORS ANNUALLY THIS EMPLOYMENT CONTRACT IS REVIEWED AND MAY BE REVISED IN ESTABLISHING THE CO MPENSATION FOR THE PRESIDENT AND CEO, THE BOARD OF DIRECTORS REVIEWS INFORMATION AVAILABLE THROUGH INDUSTRY ORGANIZATIONS, INCLUDING THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIA TION THE PRESIDENT AND CEO REVIEW IS CONDUCTED ANNUALLY BY THE BOARD OF DIRECTORS THE SA LARIES OF OTHER STAFF OFFICERS AND KEY EMPLOYEES ARE DETERMINED BY THE PRESIDENT AND CEO THE PRESIDENT AND CEO ARE PROVIDED NUMEROUS WAGE SURVEYS AS GUIDANCE ADDITIONALLY, THE PP I BOARD OF DIRECTORS APPROVES AN ANNUAL BUDGET THE PRESIDENT AND CEO ARE TO DETERMINE SAL ARIES WITHIN THE BUDGET AMOUNT PROVIDED BY THE BOARD THESE COMPENSATION REVIEWS ARE CONDUCTED ANNUALLY BY THE SUPERVISORS AND PRESIDENT/CEO

Return Explanation
Reference

FORM 990, PRAIRIE POWER, INC. MAINTAINS ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FIN ANCIAL STATEMENTS IN A CENTRAL LOCATION AT THE ORGANIZATION'S HEADQUARTERS. THESE DOCUMENT SECTION C, LINE 19

Return Reference	Explanation
FORM 990, PART VII, COLUMN F AND SCHEDULE J, COLUMN C	PER THE INSTRUCTIONS TO FORM 990 PART VII AND SCHEDULE J, THE AMOUNT REPORTED IN DEFERRED COMPENSATION INCLUDES THE ESTIMATED ANNUAL INCREASE IN THE ACTUARIAL VALUE OF THE DEFINED BENEFIT PLAN THESE AMOUNTS ARE ESTIMATES IN THE INCREASE OF THE VALUE OF THE PLAN AND ARE NOT CURRENT YEAR EXPENSES OF THE COOPERATIVE THE FOLLOWING AMOUNTS ARE THE CHANGE IN ACT UARIAL VALUE, AS WELL AS THE CURRENT YEAR EXPENSE 1 ERIC HOBBIE - CHANGE IN ACTUARIAL VALUE \$ 46,565, ACTUAL EXPENSE \$52,780 00 2 ROBERT REYNOLDS - CHANGE IN ACTUARIAL VALUE \$ 50,948, A CTUAL EXPENSE \$31,3346 4 PHILLIP BREEZEEL - CHANGE IN ACTUARIAL VALUE \$68,166, ACTUAL EXPENSE \$31,532 5 CRYSTAL RINEY - CHANGE IN ACTUARIAL VALUE \$15,710, ACTUAL EXPENSE \$30, 596 6 JOSEPH SMITH - CHANGE IN ACTUARIAL VALUE \$18,005, ACTUAL EXPENSE \$27,682 7 CYNTH IA STILES - CHANGE IN ACTUARIAL VALUE \$31,973, ACTUAL EXPENSE \$17,637 8 TRACY JOHANSSON - CHANGE IN ACTUARIAL VALUE \$16,610, ACTUAL EXPENSE \$21,785 9 CHARLES FOGLEMAN - CHANGE IN ACTUARIAL VALUE \$13,145, ACTUAL EXPENSE \$21,780 10 JEREMY JOHNSON - CHANGE IN ACTUARIAL VALUE \$13,649, ACTUAL EXPENSE \$24,307 11 REGINALD JOHNSON - CHANGE IN ACTUARIAL VALUE \$38,8 89, ACTUAL EXPENSE \$27,700 13 DWIGHT ALA- CHANGE IN ACTUARIAL VALUE \$26,239, ACTUAL EXPENSE \$18,786

Return Explanation

H THE BYLAWS OF THE COOPERATIVE

LINE 4

FORM 990,	THE COOPERATIVE HAS INTERPRETED THE INSTRUCTIONS TO PART IX, LINE 4, TO MEAN PATRONAGE CAP
PART IX	TITAL ALLOCATED FOR THE YEAR, RATHER THAN PATRONAGE CAPITAL RETIRED, THIS IS CONSISTENT WIT

Return Explanation
Reference

RETURN OF EQUITY CONTRIBUTIONS -5.000.000 PATRONAGE CAPITAL ALLOCATIONS 8.000.000

990 Schedule O, Supplemental Information

FORM 990.

PART XI, LINE 9

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493	252004	300
SCHEDULE R (Form 990)	► Co	Related (nization an	swered "Yes ▶ Attach to	s" on Form Form 990.	n 990, Parl	IV, line 33	, 34, 35b,		37.			19	
Department of the Treasury Internal Revenue Service		► Go to <u>ww</u> i	v.irs.gov/	<u>Form990</u> for	instructio	ns and the	e latest info	rmation.					o Public ection	
Name of the organization PRAIRIE POWER INC										loyer identif	ication	number		
Part I Identification	of Disregarded En	tities Complete if	the organ	nization and	word "Vo	s" on Forn	000 Part	· IV/ June 3		013955				
	(a) EIN (If applicable) of disreg	·	the organ	(b)	 	(Legal dom	c) nicile (state nicountry)	(d)		(e) End-of-year as	sets	(1 Direct co ent	introlling	
Part II Identification of related tax-exen	of Related Tax-Exe npt organizations dui		ıs. Compl	ete if the org	ganızatıon	answered	i "Yes" on I	Form 990	, Part I	V, line 34 be	ecause	it had one or	more	
Name, address, an	(a) d EIN of related organizatio	n	Prima	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod		Public ch	(e) narity status n 501(c)(3))	Dır	(f) rect controlling entity	Section (13) cor enti	512(b) trolled
													les	
For Paperwork Reduction Ac	t Notice, see the Inst	ructions for Form 9	90.		Ca	at No 5013	 35Y				Sche	edule R (Form	990) 20	19

(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predomi income(re unrelat excluded tax un sections 514	nant Share elated, total indicated, from der 512-	of Share of	Disprop alloca	ations?	(i) Code V-UBI amount in bo 20 of Schedule K- (Form 1065	Gene x man part	j) eral or aging tner?	(k) Percent owners
								Yes	No		Yes	No	
			1									$\vdash \vdash$	
IV Identification of Related O							answered "Ye	es" on I	Form 9	990, Part I	V, line	34	
IV Identification of Related O because it had one or more re (a) Name, address, and EIN of related organization		s a corporation	on or trus (c) .egal .micile or foreign	st during th		ar. (e)	(f) Share of total	Share	(g) of end-oryear assets	of- Perce	h) entage ership	Se (1	3) con entit
because it had one or more re (a) Name, address, and EIN of	elated organizations treated a	s a corporation	on or trus (c) .egal	Direct PRAIRI	e tax ye (d) controlling	(e) Type of entity (C corp, S corp	(f) Share of total	Share	(g) of end-o	of- Perce own	h) entage ership	Se (1	3) cont entit
because it had one or more re (a) Name, address, and EIN of related organization	elated organizations treated a (b) Primary activity	s a corporation	on or trus (c) Legal Imicile or foreign untry)	St during th	ne tax ye (d) controlling entity	(e) Type of entity (C corp, S corp	(f) Share of total Income	Share	(g) of end-o year assets	of- Perco	h) entage ership	Se (1	-
because it had one or more re (a) Name, address, and EIN of related organization IRIE POWER SOLAR LLC EASANT RUN FIELD, IL 62711	elated organizations treated a (b) Primary activity	s a corporation	on or trus (c) Legal Imicile or foreign untry)	Direct PRAIRI	ne tax ye (d) controlling entity	(e) Type of entity (C corp, S corp	(f) Share of total Income	Share	(g) of end-o year assets	of- Perco	h) entage ership	Se (1	3) con entit Yes
because it had one or more re (a) Name, address, and EIN of related organization RIE POWER SOLAR LLC EASANT RUN FIELD, IL 62711	elated organizations treated a (b) Primary activity	s a corporation	on or trus (c) Legal Imicile or foreign untry)	Direct PRAIRI	ne tax ye (d) controlling entity	(e) Type of entity (C corp, S corp	(f) Share of total Income	Share	(g) of end-o year assets	of- Perco	h) entage ership	Se (1	3) con entit Yes
because it had one or more re (a) Name, address, and EIN of related organization RIE POWER SOLAR LLC EASANT RUN FIELD, IL 62711	elated organizations treated a (b) Primary activity	s a corporation	on or trus (c) Legal Imicile or foreign untry)	Direct PRAIRI	ne tax ye (d) controlling entity	(e) Type of entity (C corp, S corp	(f) Share of total Income	Share	(g) of end-o year assets	of- Perco	h) entage ership	Se (1	3) con entit Yes
because it had one or more re (a) Name, address, and EIN of related organization IRIE POWER SOLAR LLC LEASANT RUN FIELD, IL 62711	elated organizations treated a (b) Primary activity	s a corporation	on or trus (c) Legal Imicile or foreign untry)	Direct PRAIRI	ne tax ye (d) controlling entity	(e) Type of entity (C corp, S corp	(f) Share of total Income	Share	(g) of end-o year assets	of- Perco	h) entage ership	Se (1	3) con entit Yes

Part V Transactions With Related Organizations. Complete if 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	Yes	No
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?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
I Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)		No
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

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

Provide the following information for each entity taxed as a partner was not a related organization. See instructions regarding exclusion	rship through w n for certain inv	hich the o estment p	rganization co partnerships	nduc	ted more thar	five perc	ent of its acti	vities (measui	red b	oy total assets	or gross r	rever	nue) that		
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	te Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		(h) Disproprtionate allocations?		(J) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
-															
												П			
										Schedul	e R (Form	1 99	0) 2019		

Schedule R (Form 990) 2019			ge 5
Part VII	Supplemental Information		
	Provide additional information for responses to questions on Schedule R (see instructions)		
Return Reference		Explanation	