EXTENDED TO NOVEMBER 15, 2018

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 Inspection

Department of the Treasury

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service A For the 2017 calendar year, or tax year beginning C Name of organization D Employer identification number Check if Address change CENTRAL ELECTRIC POWER COOPERATIVE INC 57-0299350 Doing business as Initial return Number and street (or P 0, box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 20 COOPERATIVE WAY (803) 779-4975 termin-ated 1,309,537,035. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended COLUMBIA, SC 29210 H(a) is this a group return Applica-tion pending Yes X No F Name and address of principal officer JOHN BRANTLEY for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? ___Yes ___No Tax-exempt status 501(c)(3) \mathbf{X} 501(c) (12)◀ 4947(a)(1) or If "No," attach a list (see instructions) (insert no.) J Website: ► WWW.CEPCI.ORG H(c) Group exemption number ▶ K Form of organization. X Corporation Trust Association Other > Year of formation 1948 M State of legal domicile: SC | Part I | Summary Briefly describe the organization's mission or most significant activities CENTRAL EXISTS SOLELY FOR THE Activities & Governance BENEFIT OF ITS MEMBERS. WE WILL PROVIDE RELIABLE, LONG TERM, Check this box > if the organization discontinued its operations or disposed of more than 25% of its net assets 40 3 Number of voting members of the governing body (Part VI, line 1a) 40 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 54 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 7b 0. b Net unrelated business taxable income from Form 990-T, Ine 34 **Current Year Prior Year** SCANNED MAR 1 1 2019 0. 0. Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 258,940,050 303,749,070. 2,500,193. 1,503,763. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,249,266 2,988,043. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 262,689,509 1,308,240,876. 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 3,412,960 3,15<u>9,577.</u> Benefits paid to or for members (Part IX, column (A), line 4) 8,504,765 9,961,300. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 0. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,294,923,927, 1,249,316,648 Total expenses Add lines 13-17 (must equal Part IX, column 1 308 044 804 261 234 373 196,072. 455,136 Revenue less expenses Subtract line 18 from line 12 හි Beginning of Current Year End of Year 391,667,077. Total assets (Part X, line 16) 371,851,633. 325,920,677. 342,692,981. 21 Total liabilities (Part X, line 26) 48,974,096.

Net assets or fund balances Subtract line 21 from line 20/ 45,930,956 | Part II | 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 ration of pre officer) is based on all information of which preparer has any knowledge true, correct, and complete (other Signature Sign BRANTLEY SR V OF ADMINISTRATION AND CFO Here Type or bright name and title Date PTIN Check Print/Type preparer's name Preparer's signature SHELLIE S. Paid |11/12/18| self-employed P00294226 SHELLIE S. JOHNSON JOHNSON

Firm's address 1517 GERVAIS STREET COLUMBIA, SC 29201 May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's name BAUKNIGHT PIETRAS & STORMER,

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Preparer

Use Only

732001 11-28-17

Form 990 (2017)

57-0940019

X Yes

Phone no. 803 - 771 - 8943

Firm's EIN

	1990 (2017) CENTRAL ELECTRIC POWER COOPERATIVE INC 57-0299350 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	CENTRAL IS A GENERATION AND TRANSMISSION (G&T) COOPERATIVE SUPPLYING
	POWER TO TWENTY MEMBER DISTRIBUTION COOPERATIVES IN SOUTH CAROLINA.
	CENTRAL CONSTRUCTS TRANSMISSION TAP LINES TO SERVE SUBSTATIONS OWNED
	BY THE DISTRIBUTION COOPERATIVES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$
	CENTRAL EXISTS SOLELY FOR THE BENEFIT OF ITS MEMBERS. WE WILL PROVIDE RELIABLE, LONG TERM, AND STABLE SUPPLY OF POWER, WHICH ACCOMMODATES
	GROWTH, AT THE LOWEST POSSIBLE COST CONSISTENT WITH GOOD UTILITY
	PRACTICE. WE WILL PROVIDE FOR RELIABLE DELIVERY OF POWER, WHEN AND
	WHERE DESIRED, CONSISTENT WITH APPLICABLE GUIDELINES. WE WILL PROVIDE
	ADDITIONAL ENERGY-RELATED OR DELIVERY-RELATED SERVICES AS DIRECTED BY
	THE BOARD OF TRUSTEES.
	THE BOARD OF TROSTEES.
4b	(Code) (Expenses \$
1.0	(Code / \Expenses \$ Including grains of \$ / \Texture \$ / \te
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ▶
	Form 990 (2017)

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Part IV C	hecklist of Required Sch	edules	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
•	If "Yes," complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3	Х	
			Λ	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		.
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	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	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a		x
L	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
ม	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	х	
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			х
13		13	-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a_		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			٦,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		ļ	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u>-</u> _
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	<u> </u>	X
		Form	990	(2017)

•			Yes	NO
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		Х
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	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		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		ļ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		-
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L. Part II	00		, .
07	•	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	Х	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	_21		
20	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	:		٠,,
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
07	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	0.7		v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
	140307 Mill on 1 000 more are required to complete ochodule o	JO	47	

Part V Statements Regarding Other IRS Filings and Tax Compliance

•	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter ·0· if not applicable	1a	84			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming			
	(gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	54			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	,	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orga	anızatıon solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	r gifts		1	
	were not tax deductible?			6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices p	provided to the payor?	<u>7a</u>		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uıred			
	to file Form 8282?	١.	1	7c		-
d	If "Yes," indicate the number of Forms 8282 filed during the year	<u>7d</u>	10	_		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		ct?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		200	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		-	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, ai			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by III	e	8		
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.			0		
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter			30		
	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					1
	Gross income from members or shareholders	11a	1 303 749 070.			1
	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b	5,787,965.			
12a	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.					
а	is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					1
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b		<u></u>

Form 990 (2017)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 40			
	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 40	,		
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	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X_	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	i		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	X	
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	X	
b	Other officers or key employees of the organization	15b	X	
	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		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►AZ, CA, IN, NC, RI			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X 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	i finan	cıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JOHN BRANTLEY, SR VP OF ADMINISTRATION AND CFO - 803-779-4975			
	20 COOPERATIVE WAY, COLUMBIA, SC 29210			

Form 990 (2017)	CENTRAL	ELECTRIC	POWER	COOPERATIVE	INC	57-0

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organia (A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos heck		i than	опе	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	s bot	h an	compensation	compensation	amount of
	week (list any	\vdash						from the	from related organizations	other compensation
	hours for	direc			İ	-		organization	(W-2/1099-MISC)	from the
	related	ee or	stee		Ì	nsate		(W-2/1099-MISC)	(organization
	organizations	Itrus	nal tr		oyee	m .		·		and related
	below	individual trustee or director	Institutional trustee	 ë	Key employee	Highest compensated employee	Former			organizations
	line)	12	Inst	Officer	Key	물통	ē			
(1) A. BERL DAVIS	5.00	-				ŀ			_	
TRUSTEE		X		<u> </u>	ļ	ļ		24,106.	0.	0
(2) ANDY MCKNIGHT	4.00								_	
TRUSTEE	· · · · · · · · · · · · · · · · · · ·	X			_	ļ		14,180.	0.	0 .
(3) ANITA P WHITNEY	3.00	ļ								
TRUSTEE		X		_	_			10,635.	0.	0
(4) B. ROBERT PAULLING	3.00	1								_
TRUSTEE		X						38,286.	0.	0
(5) BRIAN F. KELLEY	4.00									
TRUSTEE		X		<u> </u>	_	ļ		5,672.	0.	0
(6) BRIAN W. BROUGHTON	3.00								_	_
TRUSTEE		X		_				17,016.	0.	0
(7) CAROLYN BOYD	3.00	ļ							_	_
TRUSTEE		X		<u> </u>				10,635.	0.	0
(8) CHAD T. LOWDER	4.00								_	_
TRUSTEE		X				<u> </u>		21,270.	0.	0
(9) CHARLES E DALTON	4.00								_	
TRUSTEE		X	_					17,016.	0.	0
(10) CHARLES R SMITH	3.00	ļ							_	_
TRUSTEE		X						9,926.	0.	0
(11) CHARLES R. ALLEN	3.00	1							_	_
TRUSTEE		X				_		19,143.	0.	0
(12) DAVID E.FELKEL	4.00	1								
TRUSTEE		X				_		26,942.	0.	0
(13) DWAYNE CARTWRIGHT	2.00	1								_
TRUSTEE		X	<u> </u>			<u> </u>		30, <u>487</u> .	0.	0
(14) EUGENE HARRIOTT JR.	3.00	1	ł						_	_
TRUSTEE		X			_	_		9,217.	0.	0
(15) FRANKLIN M LOOPER JR	5.00	1	Ì						_	_
TRUSTEE		X	_		1			18,434.	0.	0
(16) G KEITH AVERY	3.00	1			l				_	_
TRUSTEE		X		ļ	<u> </u>	ــــــ		15,598.	0.	0
(17) GARY L. STOOKSBURY	5.00	1.							_	_
TRUSTEE		X		L		<u>L</u>		42,540.	0.	Form 990 (2017

								TICKLI THE	<u> </u>	, , , , , ,	<u>: `</u>	<u> </u>
Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employee	es (continued)			
` (A)	(B)									(F)		
Name and title	Average	Position (do not check more than one		Reportable	Reportable	E:	stımate	:d				
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	ar	nount (of			
	week	\vdash	cer ar	id a d	Irecto	r/trus	itee)	from	from related		other	
	(list any	ecto						the	organizations		npensa	
	hours for	- F	_ _{ور}			ated		organization	(W-2/1099-MISC)	L	rom the	
	related organizations	trustee or director	trust		يو ا	bens		(W-2/1099-MISC)			ganızatı	
	below	la tr	ionat		ploye	S a				1	id relate anizatio	
	line)	Individual 1	Institutional trustee	Officer	Key employee	Highest compensated employee	Гогтег			Oly	ariizatit	פו וע
(18) H HEATH HILL	3.00		-		-							
TRUSTEE		X						12,762.	0.			0.
(19) HAMER L. PARNELL	3.00											
TRUSTEE		X						9,217.	0.			0.
(20) HAROLD RHODES JR.	3.00											
TRUSTEE		X						9,926.	0.			0.
(21) J DAVID WASSON JR	3.00]							_			_
TRUSTEE		X	<u> </u>	ļ	ļ		ļ	29,778.	0.			0.
(22) JAMES L ROWE	4.00	1										_
TRUSTEE		Х	L	L.				19,143.	0.			0.
(23) JAMES P HOWLE	7.00											
TRUSTEE		X				ļ		33,323.	0.	<u> </u>		0.
(24) JOHNNIE L DICKERT	2.00											
TRUSTEE		X						10,635.	0.	,		0.
(25) JOSEPH E SHARPE	3.00	_										
TRUSTEE		X				<u> </u>	<u> </u>	21,979.	0.			0.
(26) KENNETH V FRICK	3.00											
TRUSTEE		X			l	<u>L</u> .		19,143.	0.			0.
1b Sub-total								497,009.	0.	+		0.
c Total from continuation sheets to Part V	/II, Section A							3,014,998.	0.	-	.617.	042
d Total (add lines 1b and 1c)								3,512,007.	0.	. 1	. 617,	042
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bove	e) wi	ho re	eceived more than \$100	,000 of reportable			
compensation from the organization											1 7	15
											Yes	No
3 Did the organization list any former officer	, director, or tri	uste	e, ke	ey er	nplo	yee	, or h	highest compensated ei	mployee on			
line 1a? If "Yes," complete Schedule J for										3	\sqcup	X
4 For any individual listed on line 1a, is the s	•		-					· ·	the organization		_	
and related organizations greater than \$15			-							4	X	-
5. Did any person listed on line 1a receive or	accrue compe	neat	ion f	from	าลกง	ומנו /	releta	ed organization or indivi	dual for services	1	1 1	i

Section B. Independent Contractors

1 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	(B) Description of services	(C) Compensation
SOUTHEAST POWER CORP		
1684 W HIBISCUS BLVD, MELBOURNE, FL 32901	CONSTRUCTION	2,919,223.
RADIANCE SOLAR, LLC		
916 JOSHEPH E LOWERY NW, ATLANTA, GA 30318	CONSTRUCTION	2,838,133.
NEW HORIZON ELECTRIC COOP		
PO BOX 1169, LAURENS, SC 29360	LINE MAINTENANCE	1,590,760.
TIENCKEN CONWAY LLC, 234 SEVEN FARMS DR.		
SUITE 114, DANIEL ISLAND, SC 29492	LEGAL SERVICES	1,445,558.
SOLBRIGHT RENEWABLE ENERGY LLC, 701 EAST		
BAY STREET, SUITE 302, CHARLESTON, SC	CONSTRUCTION	1,106,423.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	
\$100,000 of compensation from the organization > 20		
CEE DADE UTT CECETON A COMMINGUESTON OF	TDDDO	E 000 (0047)

rendered to the organization? If "Yes," complete Schedule J for such person

E T		a rederated campaigns	10	 		}		İ
رَجُ ق		b Membership dues	1b		_			İ
ξţ		c Fundraising events	1c					ı
<u> </u>		d Related organizations	1d		_			İ
Contributions, Gifts, Grant and Other Similar Amount		e Government grants (contribution	· —					ı
e E	1	f All other contributions, gifts, grant	s, and					ı
혈축		similar amounts not included abov	re 1f					ı
d d	,	g Noncash contributions included in lines	1a-1f \$					ı
<u>ರ ೯</u>	I	h Total. Add lines 1a 1f		<u> </u>			<u> </u>	
1				Business Code	9			ı
e :	2 8	a SALES OF ELECTRIC ENERG	SY	221000	1,303,749,070.	1,303,749,070.		
Program Service Revenue	1	b						
S S		c						
eve	١,	d						
P.G.		e			·			
g.	1	f All other program service rever	nue					
	l	g Total. Add lines 2a-2f			1 303 749 070.			
	3	Investment income (including	dividends inter		1,303,743,070.			
	`	other similar amounts)	arriadriad, irriar	• • • • • • • • • • • • • • • • • • •	1,492,397.			1,492,397.
	4	Income from investment of tax	evemnt hand i		1,432,337.			1,452,557
	5	Royalties	exempt bond (bioceeds -				
	٦	Hoyames	(ı) Real	(ii) Personal			-	
	. ء ا	a Gross rents	(i) Neai	(ii) Fersonai	-			
	6 8				_			
	1	b Less rental expenses						
	1	c Rental income or (loss)		<u> </u>	-			
	1	d Net rental income or (loss)		<u> </u>	 			
	7 8	a Gross amount from sales of	(i) Securities	(ıi) Other	_			
		assets other than inventory	1,125,760	181,765	4		ı	
	ı	b Less cost or other basis					1	
		and sales expenses	1,033,258	262,901				
	(c Gain or (loss)	92,502	<81,136	.▶			
	ı	d Net gain or (loss)			11,366,			11,366
ō	8 8	 Gross income from fundraising 	g events (not					
Other Revenue		ıncludıng \$	of					
ě		contributions reported on line	1c) See					
7		Part IV, line 18	а					
Ě	ı	b Less direct expenses	b	.[
		c Net income or (loss) from fund	raising events					
	9 8	a Gross income from gaming act	tivities See					
1		Part IV, line 19	а	· L			}	
	l	b Less direct expenses	b					
	(c Net income or (loss) from gami	ing activities	>				
	10 a	a Gross sales of inventory, less i	returns					
		, and allowances	а					
	1	b Less cost of goods sold	b	,]			
		c Net income or (loss) from sales	s of inventory	•	1			
		Miscellaneous Revenue		Business Code	e			
	11 :	a MISCELLANEOUS	· <u> </u>	221000	2,506,044.	2,506,044.	!	
		b PATRONAGE CAPITAL REC		221000	481,999.	481,999.		
		C FRIRONAGE CAPITAL REC		221000	401,733,	401,733,		
		d All other revenue	· · · · · · · · · · · · · · · · · · ·					
		e Total. Add lines 11a-11d			2 000 042			-
					2,988,043.	1 206 323 442		1 502 502
	12	Total revenue See instructions.			1 1 308 240 876	1,306,737,113.	0.	1 503 763

Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respor				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members	3,159,577.			
5	Compensation of current officers, directors,				
	trustees, and key employees	3,577,242.			
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	3,868,859.			
8	Pension plan accruals and contributions (include	4 204 465			
	section 401(k) and 403(b) employer contributions)	1,391,167.			
9	Other employee benefits	748,698.			
10	Payroll taxes	375,334.			
11	Fees for services (non-employees)				
	Management	2 205 602			
b	•	2,885,602.			
	Accounting	46,814.			
	Lobbying	152,252.			
	Professional fundraising services. See Part IV, line 17				
f					
g	column (A) amount, list line 11g expenses on Sch O)	5,505,703.			
12	Advertising and promotion	69,822.			
13	Office expenses	118,923.			
14	Information technology	736,018.			
15	Royalties	75.070101			
16	Occupancy	390,253.			
17	Travel	397,826.			
18	Payments of travel or entertainment expenses				
. •	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	147,327.			
20	Interest	6,072,449.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,045,102.			
23	Insurance	178,149.			=
24	Other expenses I temize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	PURCHASED AND GENERATED	1,251,556,805.			
	OPERATIONS & MAINTENANC	10,302,147.		***************************************	
	TAXES-TRANSMISSION	7,287,409.			
	ORGANIZATION & PROFESSI	1,465,853.			
	All other expenses	565,473.			
25	Total functional expenses Add lines 1 through 24e	1.308.044.804.			
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)				<u> </u>

Pai	rt X	Balance Sheet			
`		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	4,971.	1	8,667
	2	Savings and temporary cash investments	9,395,816.	2	9,582,938
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	104,975,167.	4	116,148,549
	5	Loans and other receivables from current and former officers, directors,	•		
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
S.		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
ğ	8	Inventories for sale or use	212,255.	8	1,525,957
	9	Prepaid expenses and deferred charges	488,876.	9	495,333
	_	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 344,814,830.			
	Ь	Less accumulated depreciation 10b 92,495,194.	246,460,142.	10c	252,319,636
	11	Investments - publicly traded securities		11	, , , , , , , , , , , , , , , , , , , ,
	12	Investments - other securities See Part IV, line 11	5,229,298.	12	5,229,298
	13	Investments program related See Part IV, line 11	3,239,896.	13	4,732,752
	14	Intangible assets	<u> </u>	14	
	15	Other assets See Part IV, line 11	1,845,212.	15	1,623,947
	16	Total assets. Add lines 1 through 15 (must equal line 34)	371,851,633.	16	391,667,077
	17	Accounts payable and accrued expenses	106,820,983.	17	116,307,438
	18	Grants payable		18	
	19	Deferred revenue	814,571.	19	104,822
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ģ	22	Loans and other payables to current and former officers, directors, trustees,	•		
≝		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
=	23	Secured mortgages and notes payable to unrelated third parties	218,150,756.	23	225,716,386
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D	134,367.	25	564,335
	26	Total liabilities. Add lines 17 through 25	325,920,677.	26	342,692,981
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
S		complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets		27	
3 <u>al</u> 9	28	Temporarily restricted net assets		28	
ğ	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗓			
ō		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	1,173.	30	1,173
\SS	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0
et /	32	Retained earnings, endowment, accumulated income, or other funds	45,929,783.	32	48,972,923
Ž	33	Total net assets or fund balances	45,930,956.	33	48,974,096
	34	Total liabilities and net assets/fund balances	371,851,633.	34	391,667,077

	1990 (2017) CENTRAL ELECTRIC POWER COOPERATIVE INC	<u>57</u>	<u>-0299</u>	<u> 350</u>	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets					
`	Check if Schedule O contains a response or note to any line in this Part XI					X
	•					
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>1,308</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u>1,308</u>	,04	<u>4,8</u>	04.
3	Revenue less expenses Subtract line 2 from line 1	3				<u>72.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	45	,93	<u>0,9</u>	56.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9	2	,84	<u>7,0</u>	<u>68.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	48	,97	<u>4,0</u>	<u>96.</u>
Pa	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				$\overline{}$	Yes	No
1	Accounting method used to prepare the Form 990					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a				2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis	S,			
	consolidated basis, or both					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	t,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	<u>X</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	udit]		
	Act and OMB Circular A 133?			3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	ıdıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	065	L
				Form	990	(2017)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

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

 Section 501(c)(4), (5), or (6) organiza 	tions Complete Part III			
Name of organization	-		Emple	oyer identification number
CENTRAL	ELECTRIC POWER	COOPERATIVE	INC	57-0299350
Part I-A Complete if the org	ganization is exempt un	der section 501(c) o	r is a section 527 o	rganization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campa 	tures	cal campaign activities in		3,500.
Part I-B Complete if the org	ganization is exempt un	der section 501(c)(3).	
1 Enter the amount of any excise tax	incurred by the organization ur	nder section 4955	▶\$	
2 Enter the amount of any excise tax	incurred by organization manage	gers under section 4955	▶\$	
3 If the organization incurred a section	on 4955 tax, did it file Form 4720	O for this year?		Yes No
4a Was a correction made?				☐ Yes ☐ No
b If "Yes," describe in Part IV		1: 504(-)		. \ (0)
Part I-C Complete if the org	ganization is exempt un	der section 501(c), e		c)(3).
Enter the amount directly expended		·		
2 Enter the amount of the filing organ	nization's funds contributed to c	other organizations for sec		
exempt function activities			▶\$	3,500.
3 Total exempt function expenditures	s Add lines 1 and 2 Enter here	and on Form 1120-POL	. .	2 500
line 17b			▶\$	3,500. X Yes No
 Did the filing organization file Form Enter the names, addresses and er made payments. For each organization contributions received that were prepolitical action committee (PAC). If 	mployer identification number (E ation listed, enter the amount pa comptly and directly delivered to	aid from the filing organiza o a separate political organ	tion's funds Also enter th nization, such as a separa	h the filing organization e amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter ·0·	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
HENRY MCMASTER FOR	COLUMBIA, SC			
GOVERNOR	29211	81-3788778	3,500.	0.
<u> </u>				

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

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 Part II-A Complete if the org	CENTRAL ELE	CTRIC POWER	COOPERATIVE	INC 57-0)299350 Page 2
	anization is exe	mpt under sectio	n 501(c)(3) and file	ed Form 5768 (e	election under
section 501(h)).					
A Check ► if the filing organiza	tion belongs to an aff	iliated group (and list in	n Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and shar	e of excess lobbying	expenditures)			
B Check ▶ if the filing organiza	tion checked box A a	nd "limited control" pro	ovisions apply		·
	ts on Lobbying Expe ditures" means amo	nditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influ			Ţ		
c Total lobbying expenditures (add li	~	-	Ī		
d Other exempt purpose expenditure	•		Ī		
e Total exempt purpose expenditure		d)			-
f Lobbying nontaxable amount Ente	•	•	h columns		
If the amount on line 1e, column (a) o		bying nontaxable am			
Not over \$500,000		the amount on line 1e	Julie 13.		
Over \$500,000 but not over \$1,000		00 plus 15% of the exc	2000 OVER \$500 000		
Over \$1,000,000 but not over \$1,500	· · · · · · · · · · · · · · · · · · ·	00 plus 10% of the exc			1
Over \$1,500,000 but not over \$17,		00 plus 5% of the exce			
Over \$17,000,000	\$1,000		33 OVEI Ψ1,000,000		
Over \$17,000,000	\$1,000,	,000			
g Grassroots nontaxable amount (en	tor 25% of line 1ft				
h Subtract line 1g from line 1a If zero	•		<u> </u>		
i Subtract line 1f from line 1c If zero			 		+
		ling 1, did the organiz	ction file Form 4720	<u>-</u>	_f
j If there is an amount other than ze reporting section 4911 tax for this		ine ii, did the organiz	ation lie Form 4720		Yes No
reporting section 4911 (ax for this		eraging Period Under	coation E01/h)		
(Some organizations the	nat made a section 5		have to complete all o	f the five columns	below.
	Lobbying Expe	ndıtures Durıng 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
4					
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
C Total 1000 yillig Oxportation	v .= .				
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))		1			
, , ,	* *				
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 CENTRAL ELECTRIC POWER COOPERATIVE INC 57-0299350 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(b)
of the lobbying activity	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1)?	_		
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4),	section 501(c)	(5), or se	ction	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures Part III-B Complete if the organization is exempt under section 501(c)(4),	from the prior yea	r? 3		
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	of political	1		
expenses for which the section 527(f) tax was paid).	, pontiou	+		
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) of	lues	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying			1	
expenditure next year?	g and pointer	4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliate	d group list). Part I	I-A lines 1	and 2 (see	
nstructions), and Part II-B, line 1 Also, complete this part for any additional information	o g. o op,	,	(000	
PART I-A, LINE 1:				
FINANCIAL SUPPORT OF SOUTH CAROLINA GUBERNATORIAL	CAMPAIGN			
PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS	INFORMAT	ION:		
HENRY MCMASTER FOR GOVERNOR				
POST OFFICE BOX 11063 COLUMBIA, SC 29211				

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

CENTEDAT ELECTEDIC DOMED COODEDATIVE INC

Employer identification number 57-0299350

Pa		d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
	organization answered Tes Off Official 19, inter-	(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year	(a) Donor advisor rance	(b) and and other decession
1	Aggregate value of contributions to (during year)		
2	, ,,		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	i de secolo de la la casa de la c	
5	Did the organization inform all donors and donor advisors in v	_	
6	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor are		-
	for charitable purposes and not for the benefit of the donor o impermissible private benefit?	donor advisor, or for any other purpose	Yes No
Pa	rt II Conservation Easements. Complete if the org	lanization answered "Ves" on Form 990	
1	Purpose(s) of conservation easements held by the organization		Tatty, into 7
•	Preservation of land for public use (e.g., recreation or e		torically important land area
	Protection of natural habitat	——————————————————————————————————————	tified historic structure
	Preservation of open space	Freservation of a cer	tilled historic structure
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a consequation excement on the last
_	day of the tax year	led conservation contribution in the form	Held at the End of the Tax Year
2	Total number of conservation easements		2a
h	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stru	icture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	\ /	
_	listed in the National Register	artor 1720/00, and not on a motorio divide	2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	<u> </u>
_	year ▶	outour orininguistical or terrimitation by the	o organization daring the tax
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it	• •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		servation easements during the year
	>		•
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	ation easements during the year
	> \$	•	- ,
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expensi	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
	conservation easements		
Pai	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furthera	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	bes these items	
þ	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statemer	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ec	ducation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		\$
h	Assets included in Form 990, Part Y		▶ €

_		ELECTRIC						<u>99350</u>	
Pai	t III Organizations Maintaining C	Collections of A	rt, Historical T	reasures, or C	Other S	<u>Similar</u>	Asset	ts (contınu	ed)
3	Using the organization's acquisition, accessi	on, and other record	ds, check any of th	e following that are	a signi	ficant us	e of its o	collection	tems
	(check all that apply)								
а	Public exhibition	c	l 🔲 Loan or ex	change programs					
b	Scholarly research	6	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	in how they further	the organization's	exemp	t purpose	n Part	: XIII	
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be m	aintained as part of	the organization's	collection?				Yes	☐ No
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if the organizat	on answered "Yes	on Fo	rm 990, l	Part IV,	line 9, or	
	reported an amount on Form 990, Pa		•						
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contribution	ons or other assets	not inc	luded			
	on Form 990, Part X?		•					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table						
	, . , . ,		.					Amount	
С	Beginning balance					1¢			
	Additions during the year					1d			-
	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F	orm 990 Part X line	21 for escrow or	custodial account	liability?			Yes	☐ No
	If "Yes," explain the arrangement in Part XIII				-				=
Par									
		(a) Current year	(b) Prior year	(c) Two years ba		Three vea	rs back	(e) Four y	ears back
1a	Beginning of year balance	(4)	12/	(0)	10,	, , , , , , , , , , , , , , , , , , ,		(-) /	
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships				1				
	Other expenditures for facilities								
_	and programs						ļ		
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the cur	rent vear end baland	ce (line 1a. column	(a)) held as		1, 1 11			
	Board designated or quasi-endowment	,	%	(-1)					
	Permanent endowment ▶	%	<u> </u>						
	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c sho								
За	Are there endowment funds not in the posse	•	ation that are held	and administered	for the	organizat	ion		
	by					3		Y	es No
	(i) unrelated organizations							3a(i)	55 115
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on Schedule R	12				3b	
4	Describe in Part XIII the intended uses of the							L	
Par	t VI Land, Buildings, and Equipm		•			·			
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV, line 11a	See Form 990, Pa	art X, line	e 10			
	Description of property	(a) Cost or o	other (b) Co	st or other (c) Accu	mulated		(d) Book	value
		basis (investi	ment) bası	s (other)	depre	ciation			
1a	Land	66,482,	433.				6	6,482	,433.
b	Buildings	12,542,			60	3,27	1. 1	1,939	,605.
С	Leasehold improvements								
d	Equipment	233,242,		9	1,89	1,92		1,350	
е	Other	32,546,	763.					2,546	
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line	10c) .			▶ 25	2,319	<u>,636.</u>

Schedu	ile D (Form 990) 2017 CENTRAL EL	ECTRIC POWE	R COOPERATIV	E INC 57	7-0299350 F	age 3
Part	VII Investments - Other Securities.				•	
	Complete if the organization answered "Yes		, line 11b See Form 99	0, Part X, line 12		
(a) De	scription of security or category (including name of security	(b) Book value	(c) Method o	f valuation Cost or er	nd-of-year market valu	ue
(1) Fin:	ancial derivatives					
(2) Clo	sely-held equity interests					
(3) Oth	er					
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	Col. (b) must equal Form 990, Part X, col. (B) line 12.)	>				
	VIII Investments - Program Related.		<u> </u>			
	Complete if the organization answered "Yes	s" on Form 990, Part IV	, line 11c See Form 99	0, Part X, line 13		
	(a) Description of investment	(b) Book value		f valuation Cost or er	nd-of-year market valu	ue
(1)	, , , , , , , , , , , , , , , , , , , ,					
(2)						
(3)						
(4)					,	
(5)						
(6)						
(7)						
(8)						
(9)	, , , , , , , , , , , , , , , , , , , ,					
	Col (b) must equal Form 990, Part X, col. (B) line 13.)	>				
Part		· II	.		_	
	Complete if the organization answered "Yes	s" on Form 990. Part IV	/, line 11d See Form 99	0. Part X. line 15		
		a) Description			(b) Book value	ee
(1)						
(2)						
(3)	· · · · · · · · · · · · · · · · · · ·					
(4)		· · -				
(5)						
(6)						
(7)						
(8)	-					
(9)				 .		
	Column (b) must equal Form 990, Part X, col (B)	line 15)		•		
Part		<u> </u>				
	Complete if the organization answered "Yes	s" on Form 990 Part IV	/ line 11e or 11f See Fi	orm 990 Part X line 2	5	
1	(a) Description of liability	0.11 0.111 000,1 0.11	(b) Book value	1 200, 1 41 21, 1110 2	-	
1. (1)	Federal income taxes		(0) =00			
$\overline{}$	ACCRUED POSTRETIREMENT B	PMPPTT	<155,665	. 		
	ASSET RETIREMENT OBLIGAT		720,000			
(3)	ASSET RETTREMENT OBLIGAT	TON	720,000	<u>' • </u>		
(4)				-		
(5)	_	-		-		
(6)						
(7)	-			-		
(8)				_		
(9)			F.C.4 3.5.			
	Column (b) must equal Form 990, Part X, col (B)		564,335			
2. Lial	oility for uncertain tax positions. In Part XIII, provi	de the text of the footr	note to the organization	s financial statements	that reports the	

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2017 CENTRAL ELECTRIC POWER Part XI Reconciliation of Revenue per Audited Financial St		57-029935 per Return	0 Page 4
Complete if the organization answered "Yes" on Form 990, Part IV,	•	oer metarn.	
Total revenue, gains, and other support per audited financial statements	inte 12a	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		<u> </u>	
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b	 	
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 1.	2)	5	
Part XII Reconciliation of Expenses per Audited Financial S		per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV,	line 12a	-	
Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d	·	2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4b		
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18)	5	
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide PART X, LINE 2:		/, line 4, Part X, line 2, Pa	π хі,
CENTRAL'S FINANCIAL STATEMENTS DID NOT C	ONTAIN A FOOTNOTE	REGARDING	
LIABILITY FOR UNCERTAIN TAX POSITIONS UN	DER FIN 48.		
		· · · · · -	
	·		
		- 	

SCHEDULE J (Form 990)

Compensation Information

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

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

■ Go to www.rs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

Name of the organization

Department of the Treasury

CENTRAL ELECTRIC POWER COOPERATIVE INC

Employer identification number

57-0299350

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments X Health or social club dues or initiation fees Personal services (such as, maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or X reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, Х trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee X Written employment contract X Independent compensation consultant X Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? Х **4**a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a b Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2017

Part II 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 aren't 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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	•	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a)-(i)(a)	reported as deferred on prior Form 990
(1) JOHN BRANTLEY	Θ	308,580.	3,559.	<960.	186,989.	21,992.	520,160.	0
SR VP OF ADMINISTRATION AND CFO	Ξ	0	0	0	0	0	0	0
ROBERT HOCHSTETLER	Ξ	525,000.	26,934.	<6,103.	202,428.	22,743.	771,002.	0
SI	Ξ	0		0	0	0.	0	0
(3) DAVID M LOGEMAN	Ξ	219,099.	2,575.	3,127.	227,724.	17,746.	470,271.	0
VP OF MEMBER SVCS	Ξ	0	0	0	0	. 0	• 0	0
(4) JAMES C LAMB	Ξ	274,703.	3,184.	6,453.	168,518.	13,595.	466,45	0.
SVP POWER SUPPLY	Ξ	0.	0.	0	0	0.	• 0	0
	Ξ	245,235.	3,059.	<4,835.	185,254.	21,407.	450,12	.0
SVP ENGINEERING	Ξ	0	0.	0.	0.	0.	0	0.
	Ξ	340,943.	3,184.	<5,395.	× 89,856.	22,753.	451,341.	0
SVP OF MEMBER SOLUTIONS	Ξ	0	0	0	0	0	• 0	0.
	Ξ	155,909.	2,009.	<3,685.	104,025.	17,853.	276,111.	0.
DIRECTOR OF CORP PLANNING	(ii)	0.	0.	0.	0.	0.	0	0.
(8) GERALD FLEMING	Ξ	155,421.	4,426.	<1,753.	41,033.	20,441.	219,568.	0.
DIRECTOR OF POWER SUPPLY	Ξ	0	0	0	0.	0.	0	0.
(9) JEFFREY LEWIS	Ξ	136,533.	2,546.	731.	51,053.	20,029.	210,892.	0.
DIRECTOR OF FINANCE/ADMIN	<u>(ii)</u>	0	0	0	0.	0.		0.
(10) KENNETH MOTSINGER	Ξ	157,915.	1,784.	384.	41,026.	20,447.	221,55	0.
DIRECTOR OF ENGINEERING SVCS	⊞	0		0		- 1		0.
(11) MICHAEL KELLY	Ξ	134,737.	2,363.	1,831.	108,104.	12,026.	259,061.	0.
DIRECTOR OF INFORMATION SVC	(ii)	0	0.	0.	0	0.	0	0
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							Schedu	Schedule J (Form 990) 2017

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 Part III | Supplemental Information

LINE 1A: PART I

Schedule J (Form 990) 2017

AS PART OF ITS WELLNESS PROGRAM, CENTRAL OFFERS EACH EMPLOYEE AND THEIR

SPOUSE \$20 PER MONTH (\$40 FOR BOTH) TOWARDS THEIR HEALTH CLUB MEMBERSHIP

PART I, LINE 3:

CENTRAL OBTAINS AN INDEPENDENT, THIRD-PARTY WAGE AND SALARY STUDY EVERY

EVERY YEAR, CENTRAL PARTICIPATES IN A COMPENSATION AND THREE YEARS.

BENEFITS SURVEY PERFORMED BY THE COOPERATIVE SYSTEM'S NATIONAL

THESE MARKET COMPARABLES ARE REVIEWED BY THE CEO AND SENIOR ORGANIZATION.

THE RESULTS OF THE STUDY ARE REVIEWED BY THE BOARD AND STAFF.

RECOMMENDATIONS IMPLEMENTED

LINE 4B: PART I,

CURRENT PRESIDENT AND CEO ROBERT HOCHSTETLER PARTICIPATED IN CENTRAL'S

IN 2017 457(B) DEFERRED COMPENSATION PLAN ESTABLISHED IN 2010. CENTRAL'S

HE ELECTED TO DEFER THE MAXIMUM \$18,000 OF SALARY UNTIL REACHING NORMAL

RETIREMENT DATE.

Schedule J (Form 990) 2017

SCHEDULE L

Department of the Treasury

(Form 990 or 990-EZ)

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open To Public Inspection

Internal Revenue Service Employer identification number Name of the organization 57-0299350 CENTRAL ELECTRIC POWER COOPERATIVE INC Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (d) Corrected? (b) Relationship between disqualified (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (h) Approved by board or committee? (d) Loan to or (a) Name of (i) Written (b) Relationship (c) Purpose (e) Original (f) Balance due (g) In from the interested person with organization principal amount default? agreement? of loan organization? From To Yes No Yes No Yes No ▶ \$ Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (e) Purpose of (a) Name of interested person (b) Relationship between (c) Amount of (d) Type of assistance assistance assistance interested person and the organization 6,614 TUITION PAID FURTHERING ROBERT HOCHSTETLER CURRENT OFFICER

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

Schedule L (Form 990 or 990-EZ) 2017

	(a) Name of interested person	d "Yes" on Form 990, Part IV, line 28a, 2 (b) Relationship between interested		(d) Description of	(e) Sha	aring of
	(a) Name of interested person	person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	zation's nues?
					Yes	No
					ļ	-
	<u> </u>					
Part	 ··	onses to questions on Schedule L (see	instructions)			
SCH	L, PART III, GRANTS O	R ASSISTANCE BENEFIT	TING INTER	ESTED PERSON	NS:	
	NAME OF PERSON: ROBER'					
<u>(C)</u>	AMOUNT OF GRANT \$ 6,	614.				
(D)	TYPE OF ASSISTANCE: T	UITION PAID BY ORGAN	IZATION	····		
(E)	PURPOSE OF ASSISTANCE	: FURTHERING EDUCATI	ON			
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Schedule L (Form 990 or 990-EZ) 2017 CENTRAL ELECTRIC POWER COOPERATIVE INC

57-0299350 Page 2

SCHEDULE O

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Go to www.rs.gov/Form990 for the latest information. (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service

OMB No 1545-0047 Open to Public Inspection

Name of the organization

CENTRAL ELECTRIC POWER COOPERATIVE INC

Employer identification number 57-029<u>9350</u>

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
STABLE SUPPLY OF POWER, WHICH ACCOMMODATES GROWTH, AT THE LOWEST
POSSIBLE COST CONSISTENT WITH GOOD UTILITY PRACTICE. WE WILL PROVIDE
FOR RELIABLE DELIVERY OF POWER, WHEN AND WHERE DESIRED, CONSISTENT WITH
APPLICABLE GUIDELINES. WE WILL PROVIDE ADDITIONAL ENERGY-RELATED OR
DELIVERY-RELATED SERVICES AS DIRECTED BY THE BOARD OF TRUSTEES.
FORM 990, PART VI, SECTION A, LINE 2:
CENTRAL'S 20 MEMBER DISTRIBUTION COOPERATIVES EACH HAVE REPRESENTATION OF
TWO MEMBERS TO THE BOARD. THESE REPRESENTATIVES CONSIST OF THE
COOPERATIVES'S CHIEF EXECUTIVE OFFICER AND A MEMBER OF THE COOPERATIVE'S
BOARD OF TRUSTEES. IN EACH CASE, THESE TWO PEOPLE WOULD HAVE A BUSINESS
RELATIONSHIP OUTSIDE OF CENTRAL'S BOARD.
FORM 990, PART VI, SECTION A, LINE 6:
CENTRAL'S MEMBERSHIP CONSISTS OF TWENTY DISTRIBUTION COOPERATIVES WITH
REPRESENTATION OF TWO DIRECTORS EACH ON CENTRAL'S BOARD.
FORM 990, PART VI, SECTION A, LINE 7A:
EACH DISTRIBUTION COOPERATIVE ELECTS ONE BOARD MEMBER FROM ITS OWN BOARD OF
TRUSTEES.
FORM 990, PART VI, SECTION B, LINE 11B:
A COMPLETE COPY OF THE RETURN WAS REVIEWED BY THE FINANCE, AUDIT AND RISK
COMMITTEE AND THEN PROVIDED TO THE FULL BOARD.

Name of the organization CENTRAL ELECTRIC POWER COOPERATIVE INC	57-0299350
FORM 990, PART VI, SECTION B, LINE 15:	
EVERY THREE YEARS CENTRAL HIRES AN OUTSIDE CONSULTANT TO	PERFORM AN
INDEPENDENT SALARY STUDY. THE CONSULTANT REVIEWS THE JOB	DESCRIPTIONS OF
ALL CENTRAL EMPLOYEES, INCLUDING THE CEO, OFFICERS AND KE	Y EMPLOYEES.
SALARY GRADE SCALES ARE APPLIED TO EACH POSITION AND A SA	LARY RANGE
DETERMINED.	
IN ADDITION, MARKET COMPARABLES ARE REVIEWED FOR THE CEO	AND SENIOR STAFF.
THE RESULTS OF THE STUDY ARE REVIEWED BY THE BOARD AND RE	COMMENDATIONS
IMPLEMENTED.	
FORM 990, PART VI, SECTION C, LINE 19:	
NOT AVAILABLE FOR PUBLIC INSPECTION.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
BENEFITS PAID TO MEMBERS	3,159,578
APBO	-116,438
BB&T	-196,072
TOTAL TO FORM 990, PART XI, LINE 9	2,847,068
FORM 990, PART XII, LINE 2C:	
CENTRAL DID NOT CHANGE ITS OVERSIGHT PROCESS OR SELECTION	PROCESS
DURING THE YEAR.	

SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

OMB No 1545-0047

■ Go to www.rs.gov/Form990 for instructions and the latest information.

CENTRAL ELECTRIC POWER COOPERATIVE INC

Open to Public Inspection

Employer identification number

57-0299350

Schedule R (Form 990) 2017 (g) Section 512(b)(13) Š controlled entity? Direct controlling Yes × entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year POWER COOPERATIVE CENTRAL ELECTRIC Direct controlling entity End-of-year assets INC e Public charity status (if section 501(c)(3)) LINE 3 Total income Exempt Code Î section 501(C)(3) ਉ Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or Legal domicile (state or foreign country) foreign country) SOUTH CAROLINA ECONOMIC DEVELOPMENT FOR Primary activity Primary activity JTILITY COMPANIES For Paperwork Reduction Act Notice, see the Instructions for Form 990. 57-0873176, 1201 MAIN STREET, COLUMBIA, SC Name, address, and EIN (if applicable) PALMETTO ECONOMIC DEVELOPMENT CORP Name, address, and EIN of related organization of disregarded entity Part Part II 29201

57-0299350

Page 2

Schedule R (Form 990) 2017 CENTRAL ELECTRIC POWER COOPERATIVE INC

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Part III

Seneral or Percentage managing ownership 3 Yes \equiv Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Ξ Disproportionate Yes No allocations? Ξ Share of end-of-year assets <u>(6</u> Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** (d)
| Direct controlling | (c)
Legal
domicile
(state or
foreign Primary activity <u>a</u> Name, address, and EIN of related organization

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year Part IV

				٠		•				
	7.13) Sled 1.77	8								
[<u>.</u>	Section 512(b)(13) controlled entity?	Yes No								
ε	Percentage ownership									
1	Share of end-of-year	assets				:				
(J)	Share of total income									
(e)	Type of entity (C corp, S corp,	Or it usely								
(p)	Direct controlling Type of entity (C corp., S corp,									
(0)	cile	country)								
(q)	Primary activity									
(a)	Name, address, and EIN of related organization									

Schedule R (Form 990) 2017

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	٥
1 During the tax year, did the organization engage in any of the following transaction	ns with one or more r	transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	Δį			1 a	×	ا
b Gift, grant, or capital contribution to related organization(s)				1b	×	ا .
c Gift, grant, or capital contribution from related organization(s)				10	×	ا
d Loans or loan guarantees to or for related organization(s)				1d	×	
e Loans or loan guarantees by related organization(s)				1e	X	
					_	
f Dividends from related organization(s)				#	×	ا،
g Sale of assets to related organization(s)				19	×	ا
h Purchase of assets from related organization(s)				ŧ	×	ا .
i Exchange of assets with related organization(s)				;=	×	
j Lease of facilities, equipment, or other assets to related organization(s)				;=	×	
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×	ا
I Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=	×	1
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Ę	×	ا
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			두	×	ا
 Sharing of paid employees with related organization(s) 				9	×	l
p Reimbursement paid to related organization(s) for expenses				- 2	×	
				\vdash	×	۱. ا
					-	
s Other transfer of cash or property for related organization(s)				- &	4 ×	ہ ا
1	who must complete t	nis line, including covered	relationships and transaction thresholds			1
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved	olved		
GOOD HINDMOD DATE OF CONTRACT OF CHARACTER CONTRACTOR C	() (a 3)	7 C S O S S C				1
FALMETTO ECONOMIC DEVELORMENT	1					1
(2)						ı
(5)						
(4)						I
(9)						
(6) 322483 00-11-17			Schedule B (Form 990) 2017	R (Form 9	90) 20	15

Page 4

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

(k) Percentage ownership					1990) 2017
General or managing partner?					(Form
(h) (i) (j) (k) Dispropor- Dispr					Schedule R (Form 990) 2017
(h) Disproportionate allocations?					
Disp to alloca					
(g) Share of end-of-year assets		_			
Share of total					
(e) Are all partners sec 501(c)(3) 00857 Yes No					
e parin der 501				 	
(d) Predominant income predominant income predominant income predominal income excluded from tax undersections 512-514)					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

Schedule R	(Forn	n 990) 20	017		CEN	ITRA]	L EL	ECTR	RIC F	OWEI	R COC	PER	ATIVE	INC	<u> 57-</u>	<u>029935</u>	0 Page 5
Part VII	•	pleme															
	Prov	<u>ride add</u>	itional i	inform:	ation fo	r respo	nses to	questio	ns on S	chedule	R See	<u>instruct</u>	ions				
PART I	I_	_												_			_
PALMET	OT	ECON	IMO	C D	EVEL	OPM	ENT	CORF	WAS	COL	NSIDE	ERED	A RI	ELATEI	PAR	TY	
THROUG	SH J	JUNE_	30	WHI	LE C	ENT	RAL	OWNE	ED 50	& OI	THE	EN'	TITY.	CEN	ITRAL	OWNEI)
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