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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018

B Check if applicable
Address change
Name change
Initial return
Final return/terminated
Amended return
Application pending

C Name of organization
POWDER RIVER ENERGY CORPORATION
Doing business as
Number and street (or P O box if mail is not delivered to street address) Room/suite
PO BOX 930
City or town, state or province, country, and ZIP or foreign postal code
SUNDANCE, WY 827290930
F Name and address of principal officer
MICHAEL E EASLEY
PO BOX 930
SUNDANCE, WY 827290930

D Employer identification number
83-0162161
E Telephone number
(307) 283-3531
G Gross receipts \$ 202,355,165

H(a) Is this a group return for subordinates?
H(b) Are all subordinates included?
If "No," attach a list (see instructions)
H(c) Group exemption number

I Tax-exempt status
501(c)(3) 501(c) (12) (insert no) 4947(a)(1) or 527

J Website: WWW.PRECORP.COOP

K Form of organization
Corporation Trust Association Other

L Year of formation 1945
M State of legal domicile WY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
DISTRIBUTES ELECTRIC SERVICE TO RURAL CUSTOMERS IN NORTHEAST WYOMING AND SOUTHEASTERN MONTANA
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) 10
4 Number of independent voting members of the governing body (Part VI, line 1b) 10
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 141
6 Total number of volunteers (estimate if necessary) 0
7a Total unrelated business revenue from Part VIII, column (C), line 12 0
7b Net unrelated business taxable income from Form 990-T, line 34 0

Revenue

8 Contributions and grants (Part VIII, line 1h) 0
9 Program service revenue (Part VIII, line 2g) 198,311,792
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 4,600,312
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,885
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 202,917,989

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 145,175
14 Benefits paid to or for members (Part IX, column (A), line 4) 14,049,032
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 13,096,987
16a Professional fundraising fees (Part IX, column (A), line 11e) 0
b Total fundraising expenses (Part IX, column (D), line 25) 0
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 177,026,795
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 204,317,989
19 Revenue less expenses Subtract line 18 from line 12 -1,400,000

Net Assets or Fund Balances

20 Total assets (Part X, line 16) 446,624,256
21 Total liabilities (Part X, line 26) 228,598,702
22 Net assets or fund balances Subtract line 21 from line 20 218,025,554

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 true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer
JOANNE KOLB CHIEF FINL AND ADMIN OFFICER
Date 2019-10-26

Paid Preparer Use Only

Print/Type preparer's name
Firm's name
Firm's address
Preparer's signature
Date
Check if self-employed
PTIN
Firm's EIN
Phone no

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Part 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

THE MISSION OF POWDER RIVER ENERGY CORPORATION, A NONPROFIT COOPERATIVE ORGANIZATION, IS POSITIVELY INFLUENCING AND IMPROVING LIVES FOR THOSE WE SERVE BY PROVIDING RELIABLE ENERGY AND SERVICES WHILE PAVING THE WAY FOR ACCESS AND AFFORDABILITY

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ 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 \$ including grants of \$) (Revenue \$)
See Additional Data
















4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ►

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c Yes	
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 Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
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	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b 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 1? If "Yes," complete Schedule I, Parts I and II 	21 Yes	
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 Yes	

Part IV Checklist of Required Schedules (continued)

		Yes	No	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
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? <i>If "Yes," complete Schedule L, Part I</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, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	194	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

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	141			
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		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b		
4a 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)?				4a		No
b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		No
b 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		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				6a		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).						
a 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
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year				7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
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		
9a 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						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				10b		
11 Section 501(c)(12) organizations. Enter						
a Gross income from members or shareholders				11a	177,024,423	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				11b	14,300,877	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?						
b 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.						
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				13b		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N				15		No
16 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

Part VI

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?		No
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?		No
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.		No

Section 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?		No
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
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.	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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.	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	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?		
a	The organization's CEO, Executive Director, or top management official.	Yes	
b	Other officers or key employees of the organization.		No
	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?		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?		

Section 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.

☐ 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.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 ▶ JOANNE KOLB 221 MAIN ST SUNDANCE, WY 82729 (307) 283-4921

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, 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.

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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) WALTER CHRISTENSEN PRESIDENT	10 00	X		X				17,288	0	32
(2) PHILIP HABECK VICE PRESIDENT	7 00	X		X				9,150	0	32
(3) GERRY GEIS SECRETARY/TREASURER	7 00	X		X				14,414	0	32
(4) REUBEN RITTHALER DIRECTOR	6 00	X						11,200	0	32
(5) JAMES BAUMGARTNER DIRECTOR	4 00	X						8,550	0	32
(6) MIKE LOHSE DIRECTOR	5 00	X						11,684	0	32
(7) PAUL BAKER II DIRECTOR	5 00	X						6,753	0	32
(8) ALISON GEE DIRECTOR	5 00	X						10,200	0	32
(9) MICHAEL HELVEY DIRECTOR	5 00	X						5,600	0	32
(10) JAMES PURDY DIRECTOR	3 00	X						7,300	0	32
(11) MICHAEL E EASLEY CHIEF EXECUTIVE OFFICER	47 00			X				403,170	0	132,482
(12) JOANNE KOLB CHIEF FINL & ADMIN OFFICER	45 00			X				136,156	0	62,000
(13) MIKE POMMARANE LEFT 10/2018 SR. VP OF SYSTEM OPERATIONS	51 00				X			203,876	0	78,896
(14) JEFFERY BUMGARNER VP OF MEMBER SERVICE	44 00					X		139,016	0	68,990
(15) JEFFERY S PILLOW DISTRICT FOREMAN	52 00					X		149,945	0	39,644
(16) MICHAEL BINGHAM DISTRICT FOREMAN	47 00					X		131,969	0	81,842
(17) DOUG WILSON CHIEF INFO & STRAT EXECUTION OFFICER	45 00					X		134,772	0	63,203

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	1,532,902	0	590,350

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 ► 53

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	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? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

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
K & K AUTOMOTIVE INC 3409 EAST 2ND ST GILLETTE, WY 82718	VEHICLE SERVICES	278,651
SCHULTE TA INC 5950 SWANSON RD GILLETTE, WY 82718	CONTRACT LABOR	219,500
ELECTRO TEST & MAINT INC PO BOX 1527 RAPID CITY, SD 82718	CONTRACT LABOR	206,733
INTERSTATE COMPANIES INC PO BOX 1450 MINNEAPOLIS, MN 55485	VEHICLE SERVICES	195,130
NORTHEAST WY CONSTRUCTION INC PO BOX 1475 GILLETTE, WY 82717	CONTRACT LABOR	153,041

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 8

Part VIII Statement of Revenue

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

Contributions, Gifts, Grants
and Other Similar Amounts

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns	1a			
b Membership dues	1b			
c Fundraising events	1c			
d Related organizations	1d			
e Government grants (contributions)	1e			
f All other contributions, gifts, grants, and similar amounts not included above	1f			
g Noncash contributions included in lines 1a - 1f \$				
h Total. Add lines 1a-1f ▶				

Program Service Revenue

	Business Code				
2a ELECTRIC SERVICE	221122	177,024,423	177,024,423		
b CAPITAL CREDITS	221122	20,037,416	20,037,416		
c TRANSMISSION REVENUE	211121	2,908,114	2,908,114		
d OTHER RENTAL INCOME	531190	102,751	102,751		
e JOINT USE POLE REVENUE	531190	16,067			16,067
f All other program service revenue		-3,698	-3,698		
g Total. Add lines 2a-2f ▶		200,085,073			

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts) ▶		2,236,664			2,236,664
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties ▶					
6a Gross rents	(i) Real	(ii) Personal			
	21,881				
b Less rental expenses	13,269				
c Rental income or (loss)	8,612				
d Net rental income or (loss) ▶		8,612			8,612
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		11,547			
b Less cost or other basis and sales expenses		4,669			
c Gain or (loss)		6,878			
d Net gain or (loss) ▶		6,878			6,878
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a					
b Less direct expenses b					
c Net income or (loss) from fundraising events ▶					
9a Gross income from gaming activities See Part IV, line 19 a					
b Less direct expenses b					
c Net income or (loss) from gaming activities ▶					
10a Gross sales of inventory, less returns and allowances a					
b Less cost of goods sold b		11			
c Net income or (loss) from sales of inventory ▶		-11	-11		
Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d ▶					
12 Total revenue. See Instructions ▶		202,337,216	200,068,995	0	2,268,221

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 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.	70,566			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	28,500			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.	23,212,749			
5 Compensation of current officers, directors, trustees, and key employees.	1,119,044			
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.	6,860,493			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	2,326,069			
9 Other employee benefits.	1,549,546			
10 Payroll taxes.	675,760			
11 Fees for services (non-employees):				
a Management.				
b Legal.	147,918			
c Accounting.	38,632			
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).	395,659			
12 Advertising and promotion.	62,884			
13 Office expenses.				
14 Information technology.				
15 Royalties.				
16 Occupancy.				
17 Travel.				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.	6,676,868			
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	10,745,460			
23 Insurance.				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a PURCHASED POWER	139,808,705			
b OPER & MAINT EXP -DIST	4,083,425			
c OPER & MAINT EXP -TRAN	1,162,450			
d TAX EXPENSE - PROPERTY	562,712			
e All other expenses	2,809,776			
25 Total functional expenses. Add lines 1 through 24e.	202,337,216			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		17,960	1	17,682	
	2	Savings and temporary cash investments		48,146,101	2	58,860,862	
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		18,469,006	4	16,370,373	
	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 employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6		
	7	Notes and loans receivable, net		885,819	7	881,113	
	8	Inventories for sale or use		6,531,808	8	6,319,586	
	9	Prepaid expenses and deferred charges		637,462	9	421,579	
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	397,546,758			
	b	Less: accumulated depreciation	10b	188,090,283	209,346,719	10c	209,456,475
	11	Investments—publicly traded securities			11		
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11		134,637,015	13	148,379,779	
	14	Intangible assets		196,518	14	181,789	
	15	Other assets. See Part IV, line 11		27,755,848	15	28,236,627	
16	Total assets. Add lines 1 through 15 (must equal line 34)		446,624,256	16	469,125,865		
Liabilities	17	Accounts payable and accrued expenses		19,485,175	17	18,892,789	
	18	Grants payable			18		
	19	Deferred revenue		2,295,000	19	2,295,000	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties		159,212,821	23	162,680,560	
	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		47,605,706	25	51,190,556	
	26	Total liabilities. Add lines 17 through 25		228,598,702	26	235,058,905	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			27		
	28	Temporarily restricted net assets			28		
	29	Permanently restricted net assets			29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds		0	30	0	
	31	Paid-in or capital surplus, or land, building or equipment fund		0	31	0	
	32	Retained earnings, endowment, accumulated income, or other funds		218,025,554	32	234,066,960	
33	Total net assets or fund balances		218,025,554	33	234,066,960		
34	Total liabilities and net assets/fund balances		446,624,256	34	469,125,865		

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	202,337,216
2	Total expenses (must equal Part IX, column (A), line 25)	2	202,337,216
3	Revenue less expenses Subtract line 2 from line 1	3	0
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	218,025,554
5	Net unrealized gains (losses) on investments	5	353,664
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	15,687,742
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	234,066,960

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

Additional Data

Software ID:
Software Version:
EIN: 83-0162161
Name: POWDER RIVER ENERGY CORPORATION

Form 990 (2018)

Form 990, Part III, Line 4a:

THE PRIMARY FUNCTION OF POWDER RIVER ENERGY CORPORATION, A NONPROFIT COOPERATIVE ORGANIZATION, IS THE DISTRIBUTION OF ELECTRICITY TO ITS 12,287 MEMBER-OWNERS ORGANIZED UNDER 501(C)(12) IN 2018, THE COMPANY SOLD ITS MEMBER-OWNERS 2,182,056,109 KWH OF ELECTRICITY WITH A PEAK COINCIDENT LOAD OF 343,535 KW IN JANUARY THE COMPANY ADDED ROUGHLY \$8.8 MILLION IN UTILITY PLANT IN ORDER TO EXTEND AND IMPROVE SERVICE

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493303003109

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.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization

POWDER RIVER ENERGY CORPORATION

Employer identification number

83-0162161

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

1

Total number at end of year

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

(a) Donor advised funds

(b) Funds and other accounts

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

Yes

No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Yes

No

Part II

Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Held at the End of the Year

2a

2b

2c

2d

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes

No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes

No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

1b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included on Form 990, Part VIII, line 1

b

Assets included in Form 990, Part X

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

Cat No 52283D

Schedule D (Form 990) 2018

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		8,154,184		8,154,184
b Buildings	265,538	9,322,895	5,895,694	3,692,739
c Leasehold improvements				
d Equipment		368,586,891	183,190,188	185,396,703
e Other		11,217,250	-995,599	12,212,849
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				209,456,475

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) ASSOCIATED ORGANIZATIONS - PATRONAGE CAPITAL	145,703,045	C
(2) ASSOCIATED ORGANIZATIONS - NON G&T	2,676,734	C
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶	148,379,779	

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) SPECIAL FUND - COST OF RETIREMENT (CBM)	19,274,306
(2) SPECIAL FUND - RISK MANAGEMENT (CBM)	7,152,264
(3) DEFERRED COMPENSATION AND BENEFITS	82,151
(4) SPECIAL FUND - BASIN ECONOMIC DEVELOPMENT FUND	1,070,879
(5) SPECIAL FUND - CONSERVATION LOANS	293,544
(6) INTEREST AND OTHER RECEIVABLES	178,791
(7) MISCELLANEOUS	184,692
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	28,236,627

Part X

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
CUSTOMER ADVANCES FOR CONSTRUCTION	8,959,454
CBM PREPAID COST OF RETIREMENT	19,244,471
POST RETIREMENT BENEFIT	2,414,541
CONSUMER DEPOSITS/INTEREST	16,836,913
PREPAID DEMAND	130,117
MISCELLANEOUS	3,605,060
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	51,190,556

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☒

Schedule D (Form 990) 2018

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements	1	202,470,033
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
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	414,813
e	Add lines 2a through 2d	2e	414,813
3	Subtract line 2e from line 1	3	202,055,220
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	281,996
c	Add lines 4a and 4b	4c	281,996
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	202,337,216

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

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

1	Total expenses and losses per audited financial statements	1	178,842,471
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	0
3	Subtract line 2e from line 1	3	178,842,471
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	23,494,745
c	Add lines 4a and 4b	4c	23,494,745
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	202,337,216

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 83-0162161
Name: POWDER RIVER ENERGY CORPORATION

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE COOPERATIVE IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(12) OF THE INTERNAL REVENUE CODE (IRC) AND IS ANNUALLY REQUIRED TO FILE A FORM 990 THE COOPERATIVE IS SUBJECT TO INCOME TAX ON ITS UNRELATED BUSINESS INCOME (UBI) ON FEDERAL FORM 990-T THE COOPERATIVE EVALUATES ITS TAX POSITIONS THAT HAVE BEEN TAKEN OR ARE EXPECTED TO BE TAKEN ON INCOME TAX RETURNS TO DETERMINE IF AN ACCRUAL IS NECESSARY FOR UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2018 AND 2017, THE UNRECOGNIZED TAX BENEFITS ACCRUAL WAS ZERO THE COOPERATIVE WILL RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN INCOME TAX EXPENSE IF INCURRED

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	AMORTIZATION OF POSTRETIREMENT BENEFIT LOSS 61,148 FAS 158 POSTRETIREMENT BENEFIT LOSS 353,665

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	REGULATORY CREDITS 281,996

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	2018 MARGINS ALLOCATED IN 2019 23,212,749 REGULATORY CREDITS 281,996

Supplemental Information	
Return Reference	Explanation
SCHEDULE D PART VI LINE 1E, COLUMN C	NEGATIVE ACCUMULATED DEPRECIATION ON LINE 1E, COLUMN C, IS DUE TO RETIREMENT WORK IN PROGR ESS WHICH WILL REDUCE ACCUMULATED DEPRECIATION WHEN BOOKED TO THE PLANT ACCOUNTS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
POWDER RIVER ENERGY CORPORATION

Employer identification number
83-0162161

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) POWDER RIVER ENERGY CORPORATION FOUNDATION PO BOX 930 SUNDANCE, WY 82729	20-8802389	501(C)(3)	729	39,549	BOOK	ADMINISTRATIVE SUPPORT	CHARITABLE DONATION
(2) CROOK CO MUSEUM DISTRICT PO BOX 795 SUNDANCE, WY 82729	20-8003117	501(C)(3)	13,750	0	BOOK		CHARITABLE DONATION

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . 2
- 3 Enter total number of other organizations listed in the line 1 table .

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) SCHOLARSHIPS	19	28,500	0		
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE COMPANY PROVIDES FUNDING TO THE POWDER RIVER ENERGY CORPORATION FOUNDATION THROUGH DONATIONS AND SPONSORSHIPS, AS WELL AS PROVIDING ADMINISTRATIVE SUPPORT THE FOUNDATION'S BOARD OF DIRECTORS IS APPOINTED BY THE COMPANY'S BOARD OF DIRECTORS NON-CASH ASSISTANCE GIVEN TO THE POWDER RIVER ENERGY CORPORATION FOUNDATION INCLUDES ADMINISTRATIVE, LEGAL, AND OPERATIONAL SUPPORT
PART III, LINE 1	THE FOUNDATION'S BOARD OF DIRECTORS ARE IN CHARGE OF SELECTING RECIPIENTS AND ALTERNATES FOR THE SCHOLARSHIPS RECIPIENTS MUST BE A FULL TIME STUDENT AND MAINTAIN A 2.5 OR HIGHER GPA TO RECEIVE THE SCHOLARSHIP EACH RECIPIENT IS RESPONSIBLE FOR SENDING IN THEIR TRANSCRIPT CHECKS ARE DISBURSED DIRECTLY TO THE SCHOOL THE SCHOOL SENDS THE CHECK BACK IF THE RECIPIENT IS NOT ENROLLED AT THAT SCHOOL

Schedule J (Form 990)	<div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.</div> <div>▶ Go to www.irs.gov/Form990 for instructions and the latest information.</div>	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization POWDER RIVER ENERGY CORPORATION	Employer identification number 83-0162161
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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.			
<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3 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.			
<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 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?	4a		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 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.			
7 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.	7		
8 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		
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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.

[illegible]

Part III Supplemental Information

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
PART I, LINE 1A	THE COMPANY HEADQUARTERS ARE LOCATED IN A REMOTE, RURAL AREA IN THE EXTREME NORTHEAST CORNER OF WYOMING. IT IS OCCASIONALLY DEEMED EXPEDIENT TO CHARTER SMALL PISTON-ENGINEED AIRPLANES WHEN THE COMPANY BUSINESS REQUIRES TRAVEL OUTSIDE OF OUR SERVICE TERRITORY. THIS OCCURS PRIMARILY WHEN TRAVEL IS NECESSARY TO TWO DESTINATIONS. THE FIRST DESTINATION IS THE STATE CAPITAL IN CHEYENNE, WYOMING FOR REGULATORY, GOVERNMENTAL, AND ASSOCIATED MEETINGS OR ACTIVITIES AFFECTING THE COMPANY. THE SECOND LOCATION IS THE BISMARCK, NORTH DAKOTA OFFICES OF OUR PRINCIPAL POWER SUPPLIER, BASIN ELECTRIC POWER COOPERATIVE. POWDER RIVER ENERGY PURCHASES POWER FROM BASIN ELECTRIC THROUGH MEMBERS 1ST COOPERATIVE. THESE CHARTERS ARE FOR BUSINESS PURPOSES ONLY, HAVE NO COMPENSATORY PURPOSES WHATSOEVER, AND OFTEN ALLOW FOR SAME DAY ROUND TRIP TRAVEL. ONLY THE COMPANY CEO, MIKE EASLEY, OR ITS BOARD OF DIRECTORS CAN AUTHORIZE CHARTER EXPENSE. THE COMPANY OFFERS A WELLNESS PROGRAM EACH YEAR FOR ALL EMPLOYEES. PART OF THE PROGRAM INCLUDES REIMBURSEMENT OF FITNESS CENTER OR WEIGHT MANAGEMENT PROGRAM FEES IN AN AMOUNT OF 50% OF THE TOTAL FEES, WITH A MAXIMUM OF \$50 PER QUARTER.

Return Reference	Explanation
PART II, COLUMN C	COLUMN C INCLUDES THE CHANGE IN ACTUARIAL VALUE OF THE DEFINED BENEFIT PLAN SEE BELOW FOR THE CHANGE IN ACTUARIAL VALUE AND ACTUAL DEFINED BENEFIT PLAN COSTS EMPLOYEE CHANGE IN ACTUARIAL VALUE ACTUAL BENEFIT EXPENSE MICHAEL E EASLEY \$91,361 \$87,960 JOANNE KOLB \$32,217 \$38,593 MIKE POMMARANE \$49,709 \$48,177 JEFFERY BUMGARNER \$39,296 \$39,069 JEFFERY PILLOW \$12,136 \$24,835 MICHAEL BINGHAM \$55,374 \$26,565 BRIAN MILLS \$33,460 \$36,757 DOUG WILSON \$33,548 \$36,913

Return Reference	Explanation
PART II, COLUMN B(III)	THE CHIEF EXECUTIVE OFFICER COMPENSATION INCLUDES FUNDS FROM THE PENSION RESTORATION PROGRAM REALIZED IN 2018 TO ACCOMMODATE CONSTRAINTS ON RETIREMENT DISTRIBUTIONS DUE FROM NRECA TO THE CHIEF EXECUTIVE OFFICER, POWDER RIVER ENERGY CORPORATION RECEIVED A CREDIT ON ITS R&S BILL FOR THE PENSION RESTORATION PROGRAM FROM NRECA IN 2018



SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

POWDER RIVER ENERGY CORPORATION

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number

83-0162161

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE COMPANY IS ORGANIZED AS A COOPERATIVE, AND THEREFORE HAS MEMBER-OWNERS WHO ELECT THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 8B	THERE ARE NO COMMITTEES WITH BROAD AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 AND ACCOMPANYING SCHEDULES ARE PREPARED BY THE COMPANY'S FINANCIAL ANALYST, AND REVIEWED BY THE CHIEF FINANCIAL AND ADMINISTRATION OFFICER. THE FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW, AND PRESENTED AT A REGULARLY SCHEDULED BOARD MEETING TO ADDRESS QUESTIONS. THE PROCESS INCLUDES A REVIEW OF THE FORM BY THE COMPANY'S AUDITORS. ANY NECESSARY REVISIONS ARE INCORPORATED BEFORE THE CHIEF FINANCIAL AND ADMINISTRATION OFFICER AUTHORIZES ELECTRONIC FILING OF THE FORM 990 AND SCHEDULES. THE FINAL VERSION IS PROVIDED TO AUDITORS FOR FILING AND TO THE BOARD OF DIRECTORS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	DIRECTORS, OFFICERS, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES ARE GIVEN ANNUAL CONFLICT OF INTEREST DISCLOSURES TO COMPLETE ALL EMPLOYEES ARE EXPECTED TO BE FAMILIAR WITH THE COMPANY'S CODE OF ETHICS POLICY, AND ARE EXPECTED TO DISCLOSE ANY SITUATIONS THAT VIOLATE, MAY VIOLATE, OR COULD APPEAR TO VIOLATE THE SPIRIT AND INTENT OF THE POLICY THE POLICY COMMITTEE OF THE BOARD OF DIRECTORS IS RESPONSIBLE FOR REVIEWING ALL POLICY INTERPRETATIONS OR VIOLATIONS DECISIONS CONSIDERED INCONSISTENT WITH THE CONFLICT OF INTEREST POLICY ARE REPORTED TO THE ENTIRE BOARD OF DIRECTORS, THROUGH THE BOARD PRESIDENT, VICE PRESIDENT OR THE CEO THE BOARD OF DIRECTORS SHALL DECIDE IF AN INTEREST SHOULD PREVENT THE COOPERATIVE FROM ENTERING INTO A PARTICULAR TRANSACTION A PERSON WHO IS EMPLOYED BY OR HAS A SUBSTANTIAL FINANCIAL INTEREST IN A COMPETING BUSINESS OR ONE SELLING ENERGY OR SUPPLIES TO THE COOPERATIVE IS NOT QUALIFIED TO BE A BOARD MEMBER

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE COMPANY HAS A COMPENSATION ADMINISTRATION POLICY WHICH PROVIDES THAT THE BOARD OF DIRECTORS MAINTAINS FINAL AUTHORITY FOR COMPENSATION ADMINISTRATION THE COMPANY HIRES A COMPENSATION CONSULTANT WHO PROVIDES INFORMATION ON MARKET BENCHMARKS AND ASSISTS THE COMPANY IN CREATING ITS SALARY STRUCTURE THE BOARD OF DIRECTORS IS THE ULTIMATE DETERMINING BODY OF THE SALARY OF THE CEO

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE COMPANY FILES AN ANNUAL FINANCIAL STATEMENT, THE RUS FINANCIAL AND OPERATING REPORT EL ECTRIC DISTRIBUTION, WITH THE UNITED STATES DEPARTMENT OF AGRICULTURE, WHICH IS A MATTER O F PUBLIC RECORD THE COMPANY, WHICH IS ORGANIZED AS A COOPERATIVE, AND THEREFORE IS OWNED BY ITS MEMBERS, MAKES ALL OF ITS GOVERNING DOCUMENTS AND POLICIES AVAILABLE TO THEM BYLAW S ARE PROVIDED WHEN A NEW MEMBER ENROLLS, AND ALL OTHER POLICIES ARE AVAILABLE UPON REQUES T

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	ALLOCATED CAPITAL CREDITS 22,341,562 RETIRED CAPITAL CREDITS -9,037,282 PATRONAGE CAPITAL CREDITS ASSIGNABLE 1,016,484 NET CHANGE IN FORFEITED, RETIRED, UNCLAIMED CAPITAL CREDITS -59,900 NET CHANGE IN RETIRED, UNCLAIMED CAPITAL CREDITS 1,365,730 AMORTIZATION OF NET LOSS POST-RETIREMENT BENEFIT 61,148

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART IX, LINE 4	THE COMPANY HAS INTERPRETED THE INSTRUCTIONS TO PART IX, LINE 4, TO MEAN PATRONAGE CAPITAL ALLOCATED FOR THE YEAR, RATHER THAN PATRONAGE CAPITAL RETIRED THIS IS CONSISTENT WITH THE BY-LAWS OF THE COOPERATIVE

990 Schedule O, Supplemental Information

Return Reference	Explanation
PART XII, FINANCIAL STATEMENTS AND REPORTING, NUMBERS 2A-C	THE COMPANY'S FINANCIAL STATEMENTS ARE COMPILED INTERNALLY, AND THEN AUDITED BY INDEPENDENT AUDITORS. THE COMPANY HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT PROCESS. THE COMPANY CHANGED ITS FINANCIAL STATEMENT AUDIT PERIOD TO A CALENDAR YEAR, STARTING IN 2015. THEREFORE THE FINANCIALS IN THIS FORM 990 HAVE BEEN AUDITED.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
POWDER RIVER ENERGY CORPORATION

Employer identification number
83-0162161

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) PRECORP SERVICES LLC PO BOX 930 SUNDANCE, WY 82729 83-0331925	NO ACTIVITY	WY	0		POWDER RIVER ENERGY CORPORATION

Part II 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.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)POWDER RIVER ENERGY CORPORATION FOUNDATION INC PO BOX 930 SUNDANCE, WY 82729 20-8802389	CHARITABLE GIVING	WY	501(C)(3)	LINE 7	POWDER RIVER ENERGY CORPORATION	Yes	

Part III 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

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

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

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

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)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

No

1n

Yes

1o

Yes

1p

No

1q

Yes

1r

Yes

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2018

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.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
SCHEDULE R, PART I	THE COMPANY HAS A DISREGARDED ENTITY, PRECORP SERVICES, LLC, WHICH HAS NOT, TO-DATE, CONDUCTED ANY ACTIVITY

Return Reference	Explanation
SCHEDULE R, PART II	IN 2007, THE COMPANY ESTABLISHED THE POWDER RIVER ENERGY CORPORATION FOUNDATION, A CHARITABLE ORGANIZATION DEDICATED TO PROVIDING DONATIONS AND GRANTS FOR CHARITABLE PURPOSES WITHIN THE COMPANY'S SERVICE TERRITORY THE FOUNDATION HAS A SEPARATE BOARD OF DIRECTORS THE COMPANY CONTINUES TO PROVIDE ADMINISTRATIVE SERVICES TO THE FOUNDATION, INCLUDING ACCOUNTING, OFFICE SPACE AND SUPPLIES, AND COMMUNICATIONS THE COMPANY PROCESSES AND TRANSFERS DONATIONS MADE THROUGH THE OPERATION ROUND-UP PROGRAM, WHICH ALLOWS MEMBERS TO CHOOSE TO ROUND UP THEIR ELECTRIC BILL TO THE NEAREST DOLLAR WITH THE DIFFERENCE CONTRIBUTED TO THE FOUNDATION AS A DONATION

