# SCANNED JUL 3 0 2019

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

OMB No 1545-0047

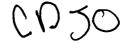
Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

Inter	nal Revenue				orm990 for instruc	tions and th	ne latest	information	on.		Inspection		
Α	For the 2	018 cale	ndar year, or tax year	beginning		, 2018, a	ınd endı	ng		, 20	)		
В	Check if ap	pplicable	C Name of organization_	Midstate Electric	Cooperative, Inc.				DE	mployer ider	tification number		
	Address ch		Doing business as							93-0	389023		
	Name char	nae	Number and street (or	PO box if mail is n	ot delivered to street a	address)	Room/si	uite	ET	elephone num			
$\overline{\Box}$	Initial return	Ť	P O Box 127							541-	536-2126		
$\overline{\Box}$	Final return/		City or town, state or p	rovince, country, ar	nd ZIP or foreign posta	al code	<u> </u>			011-	330-2120		
$\Box$	Amended		La Pine, OR 97739		<b>5</b> .				ا ه	G Gross receipts \$ 34340693			
$\exists$			F Name and address of p	rincinal officer D	Pavid W Schneider			LU(a) la the		roup return for subordinates? Yes No			
_	Application		P O Box 127, La Pine		AVIG W Schillenger			I			led? Yes No		
_	Tax-exemp		501(c)(3)		) ◀ (insert no ) ☐ 4	047(0)(1) or					ee instructions)		
÷	Website:		v.midstateelectric.co		/ (Insert no) L 4	(a)(1) 01	<u> </u>			mption numbe			
K			Corporation Trust		Other ▶	TI Vos	ar of forma			State of lega			
	art I	Summ			Other =	1 2 100	or ronne	15	946   14	otate of lege	il domicile OR		
			scribe the organizat	ion's mission o	r most significan	t activities:							
ø	I		_		•					•••••			
Activities & Governance	"	elivering	and selling electrici	y to the membe	rs of the Cooperat	live		<b></b>					
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Ö	1		of voting members of						. }	3	9		
S			of independent votin					)	. }	4	9		
ŧ	1		nber of individuals e	· ·	-	Part V, line	: 2a)		·	5	61		
Ę			nber of volunteers (e			·	<del></del> j		·	6	0		
⋖	7a T	otal unre	elated business reve	nue from Part	VIII, column (C); II		· 1			7a	23975		
_	<b>b</b> N	vet unrei	ated business taxab	ie income from	Form_990=1.,_line	38	<del>-9 </del>	 D		7b	9520		
e					7 MAY 1	4 2040	S	Prio	r Year		Current Year		
			ions and grants (Pa	•	S MAY I	4 2019.	S-0						
Revenue		_	service revenue (Pa	<b>—</b>	<u>ـنــنــنــ</u>	<u></u>	ોદ્ધ		3449	96818	*34030988		
Ŗ.			nt income (Part VIII,				.		22	23688	239053		
			enue (Part VIII, colu		- 6	61798	70652						
	1		nue-add lines 8 thr			<del></del>	ne 12)		3478	32304	34340693		
			nd similar amounts p										
			oald to or for memb						304	14569	2093730		
es			other compensation,		•		5–10)		570	3084	5891904		
ens			nal fundraising fees										
Expenses	I .		draising expenses (F		· · · · · · · · · · · · · · · · · · ·								
ш			enses (Part IX, colu						2603	34651	26355059		
			enses. Add lines 13			(A), line 25	i)		3478	32304	34340693		
	1	Revenue	less expenses. Sub	tract line 18 fro	m line 12	<u> </u>				0	0		
ts or							ļ	Beginning o	of Current	Year	End of Year		
Net Assets Fund Balar	20 T		ets (Part X, line 16)						6440	04011	64435575		
팔	21 T		ılıtıes (Part X, line 26	•					3576	6911	35450959		
			s or fund balances.	Subtract line 2	1 from line 20				2863	7100	28984616		
_	art II		ure Block										
			y, I declare that I have ex								wledge and belief, it is		
	e, conect, a	and comple	ete Declaration of prepar	er (other than office	n) is based on all inion	mation of whic	on prepare	er nas any kr	<del>-</del>				
			DWW1	·~						1-8-19			
Sig		Signa	ature of officer	. C		- e .			Date				
He	re		174017	O 3 CHNE	COER	CEO					<del></del>		
	<u>_</u>	<del>/</del>	or print name and title		<u> </u>								
Pa	id	Print/Typ	pe preparer's name	Prepa	arer's signature		0	ate		heck 🔲 if	PTIN		
	eparer			<u> </u>					se	elf-employed			
	e Only	Firm's na	ame 🕨						Firm's El	IN ▶			
		Firm's ac	ddress ►						Phone n	0			
			this return with the	•	<del></del>	structions)					. Yes No		
For	Dananua	er Dadu	tion Act Notice see	tha canarata inc	trustions		C-4 I	14000V			Form <b>990</b> (2018)		

		Page Z
Part		
1	Check if Schedule O contains a response or note to any line in this Part III	<u>· Ц</u>
'	Midstate Electric Cooperative provides cost-effective reliable utility services to its members.	
•	middle clean cooperative provides cost encouve rename utility services to its members.	
2	Did the organization undertake any significant program services during the year which were not listed on the	_
	prior Form 990 or 990-EZ?	] No
2	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?	ī Na
	If "Yes," describe these changes on Schedule O.	7 140
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured.	ed by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to c	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
	Distribution of electricity to members: 16,299 members	
4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )	
	BPA Weatherization Programs: 49 jobs completed	
4c	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )	
70	/ (Louding grants of \$) (Nevenue \$)	
	••••••	
	·····	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ▶	



raji	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		/
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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	1	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	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		1
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		✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		-
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		1
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		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓	
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	1	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ .	✓
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		<b> </b> ✓
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		1
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		1
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		1
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		1
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		1
20 a	,	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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		✓

Form **990** (2018)

Part	Checklist of Required Schedules (continued)			
,			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
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	1	
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		L
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? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
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		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .	28a		✓
b	Schedule L, Part IV	28b		1
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? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>✓</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
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		<b>✓</b>
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		<b>√</b>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>✓</b>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? 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 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part	- · · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V			
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	r	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		·

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	Estantha sumban of amplanta annual an Fama M.O. Taran M.I. of Maran and Taran		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return  [2a]  [61]  [62]  [63]  [64]  [65]  [66]  [	2b	<del></del>	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20	_	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	 За	7	
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b	<b>▼</b>	
	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		1
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		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>✓</b>
	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		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<b>^</b> L		
7	gifts were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a		<b>—</b>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		•
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
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		✓
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<b>√</b>
ь 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		✓
	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter		,	
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	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 organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>✓</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?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.	15		<b>✓</b>
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			<b>  •</b>

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O			ons.
Coati	Check if Schedule O contains a response or note to any line in this Part VI	<del></del>		<u> </u>
Secu	on 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	,	res	NO
ıa	If there are material differences in voting rights among members of the governing body, or	1		
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	-		
3	any other officer, director, trustee, or key employee?	2		<b>✓</b>
	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		<b>✓</b>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>√</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?.	5		<b>✓</b>
6	Did the organization have members or stockholders?	6	<b>-</b>	<del> </del>
7a	one or more members of the governing body?	7a	✓	
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	<b>√</b>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	<b>✓</b>	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode)	·
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
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	✓	
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	✓_	
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 in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	<b>√</b>	
14	Did the organization have a written document retention and destruction policy?	14	✓	<u> </u>
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	<b>√</b>	
b	Other officers or key employees of the organization	15b	✓	
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		<b>-</b>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			İ
	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		
Secti	on C. Disclosure	1 1 2 12		
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 Forms 1023 (1024 or 1024-A if applicable), 990, and 990-(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 int financial statements available to the public during the tax year.	erest ;	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	<b>&gt;</b>	
	Jami Steinhauer, 16755 Fınley Butte Rd, La Pıne, OR 97739 (541) 536-2126			

E0-m	aaa	(2018)	
rorm	990	(2010)	

Form 990 (2018)

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

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 employees."
- 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 organization	ion nor any relate	d org	anız			ompe	nsa	ted any curren	t officer, director	r, or trustee.
		(B) Position (do not check more than one								
(A)								(D)	(E)	(F)
Name and Title	Average hours per					is both		Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any	V SMISSI EILE E GII GOLGII (I GOLGO)					<u> </u>	from	related	other
	hours for related	Individual trustee or director	ıstıtı	Officer	Key employee	ng ighe	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	dual	tion	*	μ̈́	st c	e	(W-2/1099-MISC)	(** = *********************************	organization
	below dotted line)	ੋੜ੍ਹੇ	al tr		oye.	l omp				and related organizations
		stee	Institutional trustee		ı ü	Highest compensated employee				<b>-</b>
				<u> </u>		<u>g</u>		-		
(1) Leland Smith	6									
Chairman				✓				34627		
(2) Alan Parks	3									
Vice Chairman				✓				27543		
(3) Diana Cox	4									
Secretary / Treasurer			<u> </u>	✓				17835		
(4) Gordon De Armond	5					-				
Director		<b>✓</b>					ļ	32735		
(5) Donovan Kendall	2									
Director		<b>✓</b>						15586		
(6) Robert Reed	2									
<u>Director</u>		<b>/</b>				ļ		26310		
(7) Victor Russell	4	ļ							}	
Director		<b>✓</b>		L				28045		
(8) Ron Sommerfeldt	5						ļ			
Director		<u> </u>	_				L.	20539		
(9) Ken Wilson	4									
Director		<b>✓</b>				ļ		30336		
(10) David W Schneider	50			١.						
General Manager				✓				278809		236744
(11) Jami Steinhauer	45			١.						
Chief Financial Officer		ļ. <u>.                                   </u>		✓		-	_	130659		98043
(12) Steve Hess	45				١.					
Operations / Engineering Manager				L	✓		<u> </u>	152890		32409
(13) Patrick Barker	47				ŀ					
Working Foreman Area Coordinator			igspace		<u> </u>	✓	<u> </u>	163331		99257
(14) Tom Weller	45	1								
Engineering Supervisor		<u> </u>				✓	L	135625		65271

Part	VII Section A. Officers, Directors, Trus	tees, Key E	mploy	yees			lighe	st C	ompensated E	mployees	(continue	d)		
					•	C) ition								
	(A)	(B)	(do n	ot ch			than o	one	(D)	(E)			(F)	
	Name and title	Average hours per					is both		Reportable compensation	Reportat compensatio			mated ount of	
		week (list any					or/trus	<del>,                                    </del>	from	related			ther	
		hours for	Individual trustee or director	Inst	Officer	Key employee	eng H	Form	the	organizati	ons		ensatio	n
		related	lirec Vidu	嗉	eq.	en	nest	l ner	organization	(W-2/1099-I	MISC)		m the	
		organizations below dotted	tor la	on:		plo	8 8		(W-2/1099-MISC)				nızatıcı relatec	
		line)	S	5		yee	mg						ization	
			tee	Institutional trustee		-	Highest compensated employee							
(15)	Teresa Lackey	45					- 8							
	ting / Communications Manager	45					✓		131482					30933
	Mike Hibbs	45												
	uperintendent						✓	<u> </u>	124138					32821
	Robert Turner	45					,	ŀ						
	ng Foreman			_			<b>✓</b>	├	122915		-			31918
(18)	·····													
(19)									,					
<u> </u>								<u> </u>						
(20)														
(21)														
(0.0)														
(22)		ļ												
(23)														
(24)		 												
(25)		-	-					ļ						
			]											
	Sub-total		٠	•	•		•	<b>•</b>	378535					95672
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)						•		1094870					31724
	Total number of individuals (including but				list	ed:	above	2) W	1473405		00 000 6	nf.	- 6	27396
	reportable compensation from the organ			.000	, 1100	.cu .	abov.	o, <b>w</b>	19	ore man wi	00,000	,		
													Yes	No
3	Did the organization list any former of							emp	oloyee, or high	est compe	ensated			
	employee on line 1a? If "Yes," complete											3		<b>/</b>
4	For any individual listed on line 1a, is the organization and related organizations													!
	individual		απ ψ	00,	000	, ,,		J,	· · · · ·	iedule o ic	or such	4	7	
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	fror	n any	un/	related organiz	zation or in	dıvıdual			
	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	nedu	ıle J 1	for s	such person	·		5	·	<b>✓</b>
	on B. Independent Contractors	<del></del>					<del></del>							
1	Complete this table for your five highest compensation from the organization. Rep													24
	year.		. Ioutire	,,,,			<b>u</b> 10110	.u. ,	roar onding with					2/1
	(A) Name and business add	lress							(B) Description of s	ervices	C	(C) ompens	ation	
Jense	n's Tree Service, Inc; P O Box 500, Glendale.	OR 97442						Tre	e Trimming				97	72,927
Direct	Drilling, Inc; 9120 Double Diamond Pkwy, Re	no, NV 8952	21						lling					70,544
	la Consultants LLC, P O Box 1239, Redmond								lity Inspections					28,906
Triaxis	s Engineering, Inc; Dept LA 24340, Pasadena	, CA 91185	<u> </u>	-			-	Eng	gineering				17	70,721
2	Total number of independent contractor	ors (includir	ng bu	ıt ne	ot I	ımıt	ed to	th	ose listed abo	ove) who				1
	received more than \$100,000 of compens	ation from t	the or	gani	ızat	ion l	<b>&gt;</b>		4					;

Part	VIII	Statement of Reve							
	_	Check if Schedule O	contains	a res	oonse or note to				🗆
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1a	Federated campaigns	3	1a					_
हुं हुं	b	Membership dues .		1b			-		,
S, (	С	Fundraising events .		1c					
s, Gifts, Grants milar Amourits	d	Related organizations		1d					i
S E	е	Government grants (con		<u>1e</u>				u u	<b>→</b> 1
er si	f	All other contributions, gi							
현		and similar amounts not inc		1f				_	
Contributions, Gifts, Grants and Other S milar Amourits	g	Noncash contributions includ							
$\overline{}$	h	Total. Add lines 1a-1	T	• •	Business Code				
Ž	2a	Electricity Sales				24007042	24007040		
ě		Home Security			221000 221000	34007013 6790	34007013	6790	<u> </u>
<u>8</u>	l	b Home Security c Dark Fiber Leasing d			221000	17185		17185	
ĒΣ					22 1000	17103		17103	
E	е	•••••							
Program Service Revenue	f	All other program serv						-	
<u>م</u>	g	Total. Add lines 2a-2	f		▶	34030988	,		,
	3	Investment income							
		and other similar amo	•		3	239053			239053
	4			•					
	5	Royalties							
		•	(i) Real		(II) Personal				
	6a	Gross rents		39508					
	b	Less rental expenses Rental income or (loss)							
	d				•	39508	39508		
	7a	Gross amount from sales of	(i) Securit	es ·	(II) Other	39300	39300		. 1
	7.0	assets other than inventory			**				
	b	Less cost or other basis							
	_	and sales expenses .							
	С	Gain or (loss) .							
	d	Net gain or (loss) .			•				
ه ا							_	• •	
une	8a	Gross income from tu	indraising						4
Other Reve		events (not including \$ of contributions reporte	al an Ban 4	-7-					_
ř.		See Part IV, line 18	ea on line 1						-
ţ.	h	Less direct expenses	,	а . b					- ,
0		Net income or (loss) fi			events . ▶				
		Gross income from ga							
				а		•		•	•
	b	Less direct expenses	·	. b		_, ]	4		. :
		Net income or (loss) f			vities ▶				
	10a	Gross sales of in	-			,			
		returns and allowance				•	٠	•	,
		Less cost of goods s			<u> </u>	•			;
	С	Net income or (loss) f		of Inve					
	11a				Business Code		24464		(
	b	Gain on Disposition of			221000	31144	31144		
	C			••					
	d	All other revenue						-	
	e	Total. Add lines 11a-	11d		▶	31144			Ī
	12	Total revenue. See in	nstructions		🕨	34340693		23975	239053

Statement of Functional Expenses Scoton 501(6)(2) and 501(6)(4) organizations must complete ail 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, 10b, 9b, and 10b of Part VIII.  Do not include and the assistance to demestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments. See Part IV, line 22 Grompension of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Grompensation of current officers, directors, trustees, and key employees Pensore (as defined under section 4959(II)) and persons described in section 4959(II) and persons described in section 4959(II) and persons described in section 4959(III) and persons described in section 4959(II) and 4939(II) and 4939(III) and 4939		90 (2018)				Page <b>1</b> (
Check if Schedule O contains a response or note to any line in this Part IX				T	<del> </del>	
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  1 Grants and other assistance to denestic 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, line 22.  4 Benefits paul to or for members.  5 Compensation of current officers, directors, trustees, and key employees  6 Compensation of current officers directors, trustees, and key employees  7 Other salanes and varges  8 Penson plan accruals advove, to disqualified persons (as defined under section 4958(c)(N))  9 Other salanes and varges  9 Penson plan accruals and contributions (include section 403(b) employer contributions)  10 Payroll taxes.  11 Pees for services (non-employees)  12 Advertising and promotion  142495  15 Investment imanagement fees.  9 Other filter big amount sected 50% of line 25 column (A) amount, list line 11g sepasses on Schedule O)  10 Compensation, depletion, and amontzation  11 Investment management sees.  12 Conferences, conventions, and meetings  12 Payments of travel or entertainment expenses for any federal, state, or local public officials  10 Payrolates.  11 Payments of travel or entertainment expenses for any federal, state, or local public officials  12 Payments of travel or entertainment expenses for any federal, state, or local public officials  10 Investmences, conventions, and meetings  11 Payments of travel or entertainment expenses for any federal, state, or local public officials  12 Payments of stravel or entertainment expenses for any federal, state, or local public officials  12 Payments of cravel or entertainment expenses for any federal, state, or local public officials  10 Investment expenses.  10 Payments of cravel or entertainment expenses for any federal, state, or local public officials for any federal, state, or local public officials for any federal, state, or local public officials	Section				ns must complete c	
Total expenses   Programs services   Program	Do no					
and domestic governments. See Part IV, line 21	8b, 9b	, and 10b of Part VIII.		Program service expenses	Management and general expenses	Fundraising
andwodusis. 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  5 Compensation of current officers, directors, trustees, and key employees  6 Compensation not included above, to disqualified persons (as defined under section 4958(R)(3)(B)  7 Other salaines and wages  8 Pension plan accrusis and contributions (include section 4918 (R)(3)(B)  9 Other employee benefits  10 Payroll taxes  10 Payroll taxes  11 Fees for services (non-employees)  1a Management  1b Legal  1 CAccounting  1 Lobbying  1 Professional fundrasing services. See Part IV, line 17  1 Investment management fees  10 Other of the 1g amount exceeds 10% of line 25; column (R) amount, list line 11g spienteses of Scholde O)  13 Advertising and promotion  14 Information technology  1 Travel  16 Occupancy  17 Travel  18 Payments to affiliates  19 Conferences, conventions, and meetings  10 Interest  11 Flayments to affiliates  10 Payments to affiliates  11 Flayments to affiliates  12 Payments to affiliates  12 Payments to affiliates  13 Other expenses  16 Original original promotion  16 Occupancy  17 Travel  18 Payments to affiliates  19 Conferences, conventions, and meetings  10 Interest  11 Flayments to affiliates  11 Flayments to affiliates  12 Payments to affiliates  13 Other expenses in line 24e If line 24e amount accessed 10% of line 25, column (A) amount, list line 24e penses on Schedule O)  18 Payments to affiliates  19 Conferences, conventions, and meetings  10 Flayments to affiliates  10 Payments to affiliates  10 Payments to affiliates  11 Flayments to affiliates  12 Payments to affiliates  13 Other expenses and convention (B) amount, list line 24e penses on Schedule (C)  10 Payments on travel or entertainment expenses for any federal, state, or local public officials  10 Coccupancy  11 Flayments to affiliates  12 Payments to affiliates  13 Other expenses  15 Total functional expenses in ordinal (B) and costs	1	· · · · · · · · · · · · · · · · · · ·				
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5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958()(18) and persons described in section 4958()(18) and 493(b) employer contributions) 7 Other semployee benefits	3	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
6 Compensation not included above, to disqualified persons described in section 4958(c)(3)(8)  7 Other salaries and wages 2  8 Penson plan accruals and contributions (include section 401(k) and 403(b) employer contributions)  9 Other employee benefits 1243195  10 Payroll taxes 397424  11 Fees for services (non-employees)  12 Management 5  12 Legal 124245  13 Accounting 2  14 Lobbying 23800  15 Lobbying 12 Legal 124245  16 Pofessonal fundraising services. See Part IV, line 17 Investment management fees 9  17 Investment management fees 9  18 Other (it line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses of schedule O.)  19 Advertising and promotion 412599  10 Occupancy 17 Travel 0 renterfairment expenses for any federal, state, or local public officials 10 Conferences, conventions, and meetings 1 Interest 1 126379  10 Payments of travel or enterfairment expenses for any federal, state, or local public officials 1 20 Depreciation, depletion, and amortization 1 Insurance 1 1513579  10 Payments to affiliates 1 24 expenses in Schedule O.) 1 1513579  11 Payments conventions, and meetings 1 1513579  11 Payments conventions expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 74e expenses on Schedule O.) 2 151314  12 Payments conventions expenses in Interest 1 1513579  13 Office expenses 1 1513579  14 Payments of travel or enterfairment expenses of converted above (ust miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 74e expenses on Schedule O.) 2 151314  24 Ollie expenses 1 151359  25 Daylor of travel or enterfairment expenses on Schedule O.) 2 151359  26 Payments to affiliates 2 1510091  27 Daylor of travel or enterfairment expenses on Schedule O.) 2 151359  28 Daylor of travel or enterfairment expenses on Schedule O.) 3 151359  29 Daylor of travel or enterfairment expenses on Schedule O.) 3 151359  20 Daylor of travel or enterfairment expenses on Schedule O.) 3 151359  29 Daylor of travel or		Compensation of current officers, directors,				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits	6	persons (as defined under section 4958(f)(1)) and				
9 Other employee benefits	7		2582830			-
10 Payroll taxes	8		872542			
a Management b Legal	9	Other employee benefits	1243195			
a Management b Legal	10	Payroll taxes	397424			
Description   124245   23600   2360	11	Fees for services (non-employees)				
Content   Company   Com	а	Management				
d Lobbying	b	Legal	124245			
e Professonal fundraising services. See Part IV, line 17 f Investment management fees g Other (film 11 g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) 39682  24 Advertising and promotion 412589 410 Office expenses 5176676 511 Information technology 517 Tayle 518 Royalties 619 Cocupancy 719 Travel 719 Payments of travel or entertainment expenses for any federal, state, or local public officials 719 Conferences, conventions, and meetings 710 Interest 710 Interest 710 Payments to affiliates 710 Payments to affiliates 711 Payments to affiliates 712 Payments to affiliates 712 Payments to affiliates 710 Payments to affiliates 711 Payments to affiliates 711 Payments to affiliates 712 Payments to affiliates 712 Payments to affiliates 713 Payments to affiliates 714 Ulter 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) 710 Purchase Power 710 Taxes 710	C		23600			
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f Investment management fees Q Other (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)  2 Advertising and promotion 412589 3 Office expenses 5 Office expenses 1776676 4 Information technology 217413 5 Royalties 6 Occupancy 7 Travel 7 Travel 86589 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings 12 Invest 12 Payments to affiliates 12 Depreciation, depletion, and amortization 13 Insurance 14 Office expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)  a Purchase Power 16182450 b Taxes 763314  2 Joint costs. Complete this line only if the organization reported in column (B) point costs from a combined educational campaign and fundraising solicitation Check here		_				
(A) amount, list line 11g expenses on Schedule 0.)  12 Advertising and promotion						
13 Office expenses 176676 14 Information technology 217413 15 Royaltes	g		39682			
Information technology 217413  15 Royalties	12	Advertising and promotion	412589			
15 Royaltres		·	176676			
16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 12 Depreciation, depletion, and amortization 13 Insurance 14 Ollier 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 (I) 15 Taxes 16 All other expenses 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here in f			217413			
17 Travel						
Payments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings Interest Interest Interest Interest Interest Insurance Insura		,				
for any federal, state, or local public officials  19			86589			
19 Conferences, conventions, and meetings 20 Interest	10	-				
20 Interest	10		224050			
21 Payments to affiliates					·-	
Depreciation, depletion, and amortization  Insurance  Ollier 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 (I)  Purchase Power  Taxes  Total functional expenses. Add lines 1 through 24e  All other expenses. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here in features.			1230379			
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b Taxes 763314  c  d  e All other expenses 2510091  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here  if	а	Purchase Power		·		
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e All other expenses 2510091  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if	С					
e All other expenses 2510091  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here  if	d			<u> </u>		
25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundrasing solicitation. Check here ▶ ☐ if	е	All other expenses	2510091			
organization reported in column (B) joint costs from a combined educational campaign and fundraining solicitation. Check here ▶ □ if		Total functional expenses. Add lines 1 through 24e				
following COD 00.0 (ACC 050.700)	26	organization reported in column (B) joint costs from a combined educational campaign and				
		following SOP 98-2 (ASC 958-720)	34340693			

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 Cash—non-interest-bearing . . . . . . . 195992 139976 2 Savings and temporary cash investments . . . . 2 50699 51491 3 Pledges and grants receivable, net . . . . . . . 3 4 4402197 4 3797022 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 Loans and other receivables from other disqualified persons (as defined under section 4958(t)(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 Assets 6 7 Notes and loans receivable, net . . . . . . 23597 7 7465 Inventories for sale or use . . . . . . 8 8 770318 952228 9 Prepaid expenses and deferred charges 9 2765661 2543124 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 114213382 Less accumulated depreciation . . . . 10b 10c 59608707 54058002 54604675 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 13 2193561 2283578 14 14 Other assets. See Part IV, line 11 . . . . . . 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 64404011 16 64435575 17 Accounts payable and accrued expenses . . . 17 2531292 2421963 18 18 19 Deferred revenue 19 20 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, Liabilities \_ . 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 23 28932409 28330188 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 25 4303210 4698808 26 Total liabilities. Add lines 17 through 25 35766911 26 35450959 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances 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 ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund . 31 3174009 3181118 32 Retained earnings, endowment, accumulated income, or other funds. 25463091 32 25803498 Total net assets or fund balances . . . . . . . . . 33 28637100 33 28984616 Total liabilities and net assets/fund balances . . 64404011 34 64435575

Par	XI Reconciliation of Net Assets				
	Check 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		343	40693
2	Total expenses (must equal Part IX, column (A), line 25)	2		343	40693
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		286	37100
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		3	47516
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		289	84616
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 🗌 Cash 🗹 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olaın ın			
	Schedule O.			<del></del> -	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	ıled or			
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				Ĺ
b	Were the organization's financial statements audited by an independent accountant?		2b	✓	ļ
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			· ·	ال _ ا
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov			,	
	of the audit, review, or compilation of its financial statements and selection of an independent accounts to the selection of a		2c	<b>/</b>	<del>                                     </del>
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O	olain in			1
2-					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	orth in	25		
_		41-	3a		<del>                                     </del>
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not unde required audit or audits, explain why in Schedule O and describe any steps taken to undergo such as		3ь		
	required addit of addits, explain with in schedule of and describe any steps taken to undergo such at	iuits.		~ <u>aor</u>	(2018)
			LOL	11 336	• (ZU18)

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

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

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

► 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.

OMB No 1545-0047 2018

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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), t		Tax) (see separati	e mstructions) or Form 990	-C.Z., Part <b>v</b> , line 330 (F10x)
	ection 501(c)(4), (5), or (6) orga of organization	anizations Complete Part III		Employer iden	tification number
	•				
Part	ate Electric Cooperative, Inc	e organization is exempt und	or soction 501/		93-0389023
1 2 3	Provide a description of definition of "political campaign activitions"	f the organization's direct and in-	direct political ca	impaign activities in Part	IV. (see instructions fo
		e organization is exempt und			
1 2 3 4a	Enter the amount of any Enter the amount of any If the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the Enter the amount direct activities Enter the amount of the 527 exempt function activities 17b Did the filing organization Enter the names, address organization made payments.	excise tax incurred by the organization excise tax incurred by organization ed a section 4955 tax, did it file For	er section 501(ation for section 501(ation for section 501(ation for section 501).  Enter here and complete for the form for section for s	n 4955	Yes No  (c)(3).  Yes No  zations to which the filing zation's funds. Also ente
		fund or a political action committee			
	(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-
(1) Or Ru	egon Action Committee for ural Electrification	8565 SW Sallish Ln Suite 130 Wilsonville, OR 97070	93-0593238	3000	
(2)					
(3)					
(4)					
(5)					
(6)					

Schedule	C	(Form	990	or 9	190-	F7\	201	Я

Pa	rt II-A	Complete if the organizatio section 501(h)).	n is exempt i	under section 5	01(c)(3) and filc	d Form 5768 (ele	ction under
A	Check ►	If the filing organization belon				liated group member	er's name,
		address, EIN, expenses, and			•		
<u>B</u>	Check ►	if the filing organization check			rovisions apply.		
		Limits on Lobb				(a) Filing	(b) Affiliated
		(The term "expenditures" m			·	organization's totals	group totals
1		obbying expenditures to influence					
		obbying expenditures to influence	•		g)		
	c Total lo	obbying expenditures (add lines 1	a and 1b) .				
	d Other	exempt purpose expenditures .					
	e Total e	xempt purpose expenditures (add	l lines 1c and 1	d)			
	f Lobbyi columi	ng nontaxable amount. Enter	the amount f	rom the following	g table in both		
	If the ar	nount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amour	nt is:		,
	Not ove	r \$500,000	20% of the ar	mount on line 1e			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000		 
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000.		
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus	5 5% of the excess of	over \$1,500,000.		
	Over \$1	7,000,000	\$1,000,000				
	<b>g</b> Grassr	oots nontaxable amount (enter 25	% of line 1f)				
	h Subtra	ct line 1g from line 1a. If zero or le	ess, enter -0-				
	ı Subtra	ct line 1f from line 1c. If zero or le	ss, enter -0-				
		e is an amount other than zero ng section 4911 tax for this year?		1h or line 1i, did	-		TYes □ No
	(Som	e organizations that made a se	ction 501(h) el	Period Under Sec ection do not hav ructions for lines	re to complete all	of the five column	s below.
		Lobbying	Expenditures	During 4-Year A	veraging Period		*******
	Cale	endar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total
2	a Lobby	ng nontaxable amount					
	-	ng ceiling amount of line 2a, column (e))					
	c Total lo	obbying expenditures					
	d Grassr	oots nontaxable amount					
		oots ceiling amount of line 2d, column (e))					
	f Grassr	oots lobbying expenditures					

	(election under section 501(h)).	(;	 а)	<u> </u>	(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	İ	А	moun	t
1	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?			l		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?			<u> </u>		
d	Mailings to members, legislators, or the public?		<u> </u>	<b></b>		
e	Publications, or published or broadcast statements?			<del></del>		
f	Grants to other organizations for lobbying purposes?		<del>                                     </del>	<del> </del>		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			<u> </u>		
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?			$\vdash$		
j	Total Add lines 1c through 1i		<del> </del>			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			<b></b>		
b	If "Yes," enter the amount of any tax incurred under section 4912					<del></del>
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c	1(5).	or se	ction		
	501(c)(6).					
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<b>└</b>	↓
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Ь	▙
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				L	<u> </u>
rait	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."	)(5), ( R (b)	or se Part	etion : III-A,	line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	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) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of			l		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	/ing				
_	and political expenditure next year?	•	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Par	Supplemental Information de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro	ın lıs	t). Pai	rt II-A. I	ines 1	1 an
	instructions); and Part II-B, line 1. Also, complete this part for any additional information	-p	٠,, . ۵.	, .		
A don	ation was made to the Oregon Action Committee for Rural Electrification.					
				•••••		
						·

Schedule C (For	m 990 or 990-EZ) 2018	Page <b>4</b>
Part IV	Supplemental Information (continued)	
•		
•		
		·
	•••••••••••••••••••••••••••••••••••••••	
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*		

### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

**Supplemental Financial Statements** 

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

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

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number

### Midstate Electric Cooperative, Inc. 93-0389023 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. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . . 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year . . 4 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? Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 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 a 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 Tax Year a Total number of conservation easements . . . . . . . . . . . . . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 ß Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easemonts during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. If the organization elected, as permitted under EFAS 116 (ASC 058), not to report in its revenue statement and balance choot 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. 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 (ii) Assets included in Form 990, Part X . . . . . 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. Revenue included on Form 990, Part VIII, line 1 . . . . . . . . . . . **b** Assets included in Form 990, Part X . . . . . . . . . .

Part									
3	Using the organization's acquisition, collection items (check all that apply)		her reco	rds, chec	k any of the	follov	ving that are a s	significant u	se of its
а	☐ Public exhibition		d	☐ Loan	or exchange	e progi	rams		
b	☐ Scholarly research		е	☐ Othe	r				
С	☐ Preservation for future generation:	S							
4	Provide a description of the organiza XIII.	tion's collections a	and expl	ain how t	hey further t	he org	janization's exer	npt purpose	ın Part
5	During the year, did the organization assets to be sold to raise funds rather								
Part			ined as	part of the	e organizatio	3 60		Yes	□ No
ı ai c	- —Complete if the organization	•	' on For	m 000 I	Part IV line	9 or	reported an ar	nount on E	orm
	990, Part X, line 21.	i alisweled Tes	011101	111 990, 1	artiv, iiie	9, O	reported air ai	nount on i	OIIII
12	Is the organization an agent, trustee	custodian or oth	er intern	nediany fo	or contributi	one or	other assets n	nt	
, .	included on Form 990, Part X?	, custoulari or oth						_	□No
b	If "Yes," explain the arrangement in P							☐ 163	
-	in 100, Oxplain the arrangement in 1	are Am and comple	oto tho re	mowning to	abic.		T A	mount	
С	Beginning balance					10			
d	Additions during the year			•	•	1d			
e	Distributions during the year					1e	<del></del>		
f						1f	<del></del>		
2a	Did the organization include an amou							/? ☐ Yes	□ No
b	If "Yes," explain the arrangement in P								
Par				<b>-</b>			<del></del>		
	Complete if the organization	answered "Yes'	' on For	m 990, I	art IV, line	10.			
		(a) Current year	(b) Pri	or year	(c) Two years	back	(d) Three years bac	k (e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships		-	-					
е	Other expenditures for facilities and								
	programs						_		
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of		d balanc	e (line 1g	j, column (a)	) held a	as		
а	Board designated or quasi-endowme	nt ▶	%						
b	Permanent endowment ▶	·····%							
С	Temporarily restricted endowment ▶								
_	The percentages on lines 2a, 2b, and								
3a	Are there endowment funds not in th	e possession of th	e organi	zation the	at are held a	ind adi	ministered for th		
	organization by								s No
	(i) unrelated organizations			•				3a(i)	
	(ii) related organizations				•			3a(ii)	
	If "Yes" on line 3a(ii), are the related of							3b	
4	Describe in Part XIII the intended uses		n's end	owment for	unds.				
Part			, <b>_</b> _	000 [	3 1\( \)	44- (	0 5 000	Dark V. La	- 40
	Complete if the organization								
	Description of property	(a) Cost or oth (investme		1 ' '	or other basis ther)		Accumulated epreciation	(d) Book v	alue
1a	Land				332659	70 - 10 - 12 <u>e</u> - 12 - 13 - 1	A PROPERTY OF		332659
b	Buildings				8555578		(2800613)		5754965
С	Leasehold improvements								
d	Equipment				9271486		(7669694)		1601792
е	Other				96053659		(49138400)		6915259
Total.	Add lines 1a through 1e. (Column (d) r.	nust equal Form 99	90. Part 2	X. columr	(B), line 10d	<del>.</del> .	. •		4604675

Part VII	Investments—Other Securities				
	Complete if the organization ans		990, Part IV, Iir	e 11b. See Form	990, Part X, line 12.
_	(a) Description of security or categor (including name of security)	y	(b) Book value		hod of valuation -of-year market value
(1) Financia	Il derivatives				
	held equity interests				
(3) Other					
(~)					
(B)					
(C)					<u>_</u>
(D)					
—(E) — —					
(F)					
(G)					
(H)					- <del>-</del>
	(b) must equal Form 990, Part X, col (B) line 12 )	at .			
Part VIII	Investments – Program Relate		000 David N/ Ivo	. 44 - 0 - 5	000 D + V + 40
	Complete if the organization ans	swered "Yes" on Form			
	(a) Description of investment		(b) Book value		thod of valuation -of-year market value
(1)					. <u> </u>
(2)					
_(3)					
(4)					
(5)					<del>-</del>
(6)					
(7)					
(8)		<del></del>		<del> </del>	
(9)	(b) must equal Form 990, Part X, col (B) line 13)		<del></del>		
Part IX	Other Assets.				
. art ix	Complete if the organization ans	wered "Yes" on Form	990 Part IV Jin	e 11d. See Form	990 Part X line 15
		a) Description	1 300, 1 411 14, 111	114.00010111	(b) Book value
(1)					(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)			<u> </u>		
(3)					
(4)					
(5)					
(6)				-	
(7)					
(8)					
(9)			"		
	ımn (b) must equal Form 990, Part X, c	ol (B) line 15.)	<u> </u>	. >	
Part X	Other Liabilities. Complete if the organization ans	wered "Yes" on Form	990, Part IV, lin	e 11e or 11f. See	e Form 990, Part X,
1.	line 25. (a) Description of liability	(b) Book value			
	ncome taxes	(b) Book value			
	Payroll Liabilities				
	ge Capital Unlocated		442		
(4) State / C		1723			
	ner Deposits		329		
(6) FASB 10			884		
	tized Debt Refinancing	1055			
(8) Accrued			031		
	nce Programs	<del></del>	414		
	(b) must equal Form 990, Part X, col. (B) line 25.)		691		
	or uncertain tax positions. In Part XIII, prov	4698	to the organization	n's financial stateme	ents that reports the
organization'	's liability for uncertain tax positions unde	r FIN 48 (ASC 740). Check	there if the text of t	he footnote has bee	n provided in Part XIII

Part				Retur	n
	Complete if the organization answered "Yes" on Form 990	•	•		
1	Total revenue, gains, and other support per audited financial statement	s		1	34329237
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on investments	. 2a			
b	Donated services and use of facilities	. 2b			
С	Recoveries of prior year grants	. 2c			
d	Other (Describe in Part XIII.)	. 2d			
е	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	34329237
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b		-		
b	Other (Describe in Part XIII.)	4b	11456		
c	Add lines <b>4a</b> and <b>4b</b>			4c	11456
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	34340693
Part	·			r Retu	urn.
	Complete if the organization answered "Yes" on Form 990	), Part IV	, line 12a.		
1	Total expenses and losses per audited financial statements			1	32235507
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1			
а	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	32235507
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	$\vdash$			
b	Other (Describe in Part XIII.)	4b	2105186	<del></del>	
c	Add lines 4a and 4b	 		4c	2105186
5 Doct	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I,	ine 18)		5	34340693
Part			4044 41101-	D: 11	
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a a XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this pa				
Part X	Line 2. The Cooperative adopted Accounting Standards Codification (ASC)	740-10, rel	lating to accounting for	or unce	rtain tax positions
The Co	operative does not have any uncertain tax liabilities.				•••••
Part XI	Line 4b: The audited financial statements have included some expenses that	at were ne	tted against related it	ems the	erefore reducing
tne rev	enue amount.				
D	article at the second s				
Part XI	Line 4b: The audited financial statements have included some expenses th	at were no	etted against related if	tems th	erefore reducing
					_
tne exp	ense amount. The audited financial statements also recognized net margin	s not as a	n expense as reporte	d on the	e Form 990.
•					•••••
			*		
••••		•••••			

Schedule D (For	n 990) 2018	Page 5
Part XIII	Supplemental Information (continued)	
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### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Compensation Information** 

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

Compensated Employees

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

Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection Employer identification number

	ate Electric Cooperative, Inc.		93-03890	23		
Part	Questions Regarding Compensation		<del></del>			
					Yes	No
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a. Complete Part III to provide	,				
	☐ First-class or charter travel ☐ Ho	using allowance or residence f	or personal use			
	-□ Travel for companions □ Pa	yments for business use of per	sonal residence			
		alth or social club dues or initia	ation fees			
	☐ Discretionary spending account ☐ Pe	rsonal services (such as maid,	chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the orga					
	or 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 re	ombureing or allowing exper	soon incurred by all			
_	directors, trustees, and officers, including the CEO/Exec				i	
	1a?		cins checked on line	2		
.3	Indicate which, if any, of the following the filing organization organization's CEO/Executive Director. Check all that app	ly. Do not check any boxes for	methods used by a			
	related organization to establish compensation of the CEC	•	in in Part III.			
		itten employment contract				
		mpensation survey or study				
	Form 990 of other organizations	proval by the board or compen	sation committee			
4	During the year, did any person listed on Form 990, Part \ organization or a related organization	/II, Section A, line 1a, with resp	ect to the filing			
а	Receive a severance payment or change-of-control paym	ent?		4a		7
b	Participate in, or receive payment from, a supplemental ne			4b		<u></u>
С	Participate in, or receive payment from, an equity-based of			4c		7
	If "Yes" to any of lines 4a-c, list the persons and provide		h item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organiz					
5	For persons listed on Form 990, Part VII, Section A, line 1	a, did the organization pay or a	ccrue any			
	compensation contingent on the revenues of					
а	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 1 compensation contingent on the net earnings of.	a, did the organization pay or a	ccrue any			
а	The organization?			6a		
b	Any related organization?			6b		
-	If "Yes" on line 6a or 6b, describe in Part III.			OB		
_						
7	For persons listed on Form 990, Part VII, Section A, I payments not described on lines 5 and 6? If "Yes," described on lines 6 and	- ·	provide any nonfixed	7		
8	Were any amounts reported on Form 990, Part VII, paid of					
	to the initial contract exception described in Regula		If "Yes," describe			
	ın Part III			8		
_						
9	If "Yes" on line 8, did the organization also follow th Regulations section 53.4958-6(c)?			9		

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

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.

NOTE: THE SULL OF COLUMNIS (B)(I) THIS OF EACH INSECTION (B) Breakdown of W-2 and/or 1099-MISC compensation	io eac	(B) Breakdown of	st equal the total arti f W-2 and/or 1099-MIS	SC compensation	t vii, Section A, iiile	a, applicable colum	n (U) and (E) amount	ior that individual.
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	(C) Hetirement and other deferred compensation	( <b>D</b> ) Nontaxable benefits	( <b>E)</b> Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	=			Composition				- 1
	3	251037	14423	13349	197542	42793	519144	
1David W Schneider	Ξ							
	Ξ	130216	0	443	71363	28646	230668	
2Jami Steinhauer	(ii)							
	(i)	152795	5722	4814	72111	28864	264306	
3Patrick Barker	Ξ		! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	; ; ; ; ; ; ; ; ; ; ; ;	
	Θ	126242	7552	1831	38125	29027	777202	
4Tom Weller	<b>E</b>		1 6 6 6 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	
	(3)	134665	7985	10240	4462	29939	187291	
5Steve Hess	(11)							; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
	(1)	121181	7284	3017	4028	28725	164235	
6Teresa Lackey	(11)							
	(i)	114771	9989	2501	3875	30664	158676	
7Mike Hibbs	(ii)							
	Θ	113799	909	1308	3772	29863	156550	
8Robert Turner	(E)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	
	(1)							
6	(II)							
	(i)							
10	Ξ		• • • • • • • • • • • • • • • • • • •	9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	
	Θ							
11	(E)			1	1	) ) ) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	, , , , , , , , , , , , , , , , , , ,	)
	(1)							
12	(ii)					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	v c c c c c c c c c c c c c c c c c c c	
	(i)							
13	Ξ			• • • • • • • • • • • • • • • • • • •		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
	Ξ							
14	Ξ					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Ξ							
15	(II)							
	Ξ							
16	(II)							
							Sch	Schedule J (Form 990) 2018

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

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

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

OMB No 1545-0047 2018

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Midstate Electric Cooperative, Inc. 93-0389023 Part VI Section A, Line 6. Any person, firm, association, corporation or body politic which uses electric energy and to whom the Cooperatives electric service is then available, shall be eligible for membership to the Cooperative, subject to acceptance for membership as provided by our-Bylaws. -Part VI, Section A, Line 7 a/b: Each member of the Cooperative shall be entitled to one vote to elect Directors, make changes to the Cooperative's Articles of Incorporation or Blaws and any other action that takes approval of the general membership. Part VI, Section B, Line 11b: The Form 990 is prepared by the CFO and reviewed by the retained Attorney and periodically reviewed by an independent auditing firm. The Form 990 is reviewed by the governing body at a regular board meeting prior to filing the form. Part VI, Section B, Line 12c: Each year the Board of Directors are given a questionnaire to identify possible conflicts of interest and relationships with family.' Management of the Cooperative reviews contracts and transactions as part of the regular course of business to identify conflicts of interest. Part VI, Section B, Line 15a. The Board of Directors review the General Manager's performance and the salary is based on this performance review. Other Cooperative's Form 990's and compensation survey's are reviewed as a comparison tool. All 9 Board Members and the retained Attorney are on the review committee. Part VI, Section B, Line 15b: The General Manager uses a comparative salary model that looks at salaries for the industry and the area served by the organization for all management employees. Salaries in part, are based on a scale provided by this model. Part VI, Section C, Line 19: The Cooperative gives Bylaws to new members and any existing member that makes a request. The financial statements are mailed to all members and to any member that requests them. Policies are given to members upon request.

Part XI, Line 9: Other changes in net assets or fund balances is the current years margins of \$2,093,730 plus other changes in equity of

\$7,109 less patronage capital retirements of \$1,753,323.