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990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection For the 2008 calendar year, or tax year beginning , 2008, and ending , 20 D Employer identification number C Name of organization B Check if applicable Piease Doing Business As NIOBRARA ELECTRIC ASSOCIATION INC 8.3 0164125 Address change label or orint or Number and street (or PO box if mail is not delivered to street address) Telephone number Name change 307) 334-3221 Initial return Specific City or town, state or country, and ZIP + 4 Termination tions LUSK WY 82225-0697 G Gross receipts \$ 6.879 567 Amended return F. Name and address of principal officer SHELDON G ALBERTSON Application pending H(a) Is this a group return for affiliates? Yes Vo H(b) Are all affiliates included? Yes No SAME AS CABOVE Tax-exempt status 1 4947(a)(1) or If "No," attach a list (see instructions) Website ▶ www.tristategt.org/nb H(c) Group exemption number **>** Type of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation 1941 M State of legal domicile WY Rais Summary Rural Electrification in portions of East Briefly describe the organization's mission or most significant activities Central Wyoming, Northwestern Nebraska and 2 small areas of Southwestern South Dakota Check this box ► T if the organization discontinued its operations or disposed of more than 25% of its assets 3 Number of voting members of the governing body (Part VI, line 1a) 4 0 Number of independent voting members of the governing body (Part VI, line 1b) 5 21 5 Total number of employees (Part V, line 2a) 6 0 6 Total number of volunteers (estimate if necessary) 466.457 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a b Net unrelated business taxable income from Form 990-T, line 34 7b 0 Prior Year Current Year 0 0 Contributions and grants (Part VIII, line 1h) 5,687,579 6 373,678 Program service revenue (Part VIII, line 2g) 66 370 56,988 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) (1,379)(1,247)11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 5,752,570 6,429 419 0 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,330 949 1,306,354 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ۵ 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,555,117 4 159,216 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 4.861.471 5.490.165 18 Total expenses Add lines 13-17 (must equal Part IXRECEMEA), line 25) Revenue less expenses Subtract line 18 from line 12 891,099 939,254 or Beginning of Year End of Year NOV 0 > 2010 10,825 866 12 036 876 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 2,731,794 3,187,380 Net assets or fund balances Subtract line 21 from Staffle, WA 8,094,072 8 849,495 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 Signature of officer Date Here heldon (Cheral Type or print name and title Date Check if Preparer's Preparer's identifying number self-(see instructions) signature employed ► L Paid Preparer's Firm s name (or yours FIN Use Only if self-employed), address, and ZIP + Phone no 🕨



No

May the IRS discuss this return with the preparer shown above? (see instructions)

) (Revenue \$

(Must equal Part IX, Line 25, column (B))

4d Other program services (Describe in Schedule O)

4e Total program service expenses ▶ \$

including grants of \$

(Expenses \$



Par	Checklist of Required Schedules			
			Yes	Νo
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?	2		✓
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)	✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		√
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any accounts where 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		/
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, 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		/
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15 or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	√	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	1	ļ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes," complete Schedule E	13	ļ	1
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a	-	✓
a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F. Part II	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16 17		1
17 10	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II	18	-	1
18 19	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		\ \ \ \
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	1	1
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	1
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2° If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer 'Yes" to Part VII, Section A, questions 3, 4, or 5? 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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		1
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	✓
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
d	g and any time control of the same of the	24d	ļ	1
25a	Section 501(c)(3) and 501(c)(4) 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		1
b	person from a prior year? If "Yes," complete Schedule L, Part I	25b	_	1
26	Was a loan to or by a current or former officer, director trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L. Part III	27		1

Part IV	\sim	, , , ,	<i>(</i> P)		\sim		/ /	/1
10 " L- 1 a AL L 1 AL	I :na/	TOUR.	OF MAG	IIII	Schedu	HAC.	ıcantı	nueau
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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			的。 概如"
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		
р	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		/
С	Serve as an officer, director, trustee, key employee partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	√	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes,' complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		/
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		V
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes," complete Schedule R, Part V, line 2	36		√
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		✓

Form **990** (2008)

Rai	Statements Regarding Other IRS Filings and Tax Compliance			
		1100	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			اگر در _و دای
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	(i); (i); (i); (i); (i); (i); (i); (i);	F
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		12
	Statements filed for the calendar year ending with or within the year covered by this return 2a 21	.4974·		(13.1) Part
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Y	311
	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		## 36 	17.5
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	√	
b	If "Yes," has it filed a Form 990-T for this year? If "No," 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	- "(√
b	If "Yes' enter the name of the foreign country ▶		- 1 ·	1
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	1 1 1 1 1	, -:	, 1°
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	30		
	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c 6a		√
	Did the organization solicit any contributions that were not tax deductible?	Ua		
	If Yes' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	1: 41	401
7	Organizations that may receive deductible contributions under section 170(c).	ingstar .	, ,	1,5
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		✓
b	If 'Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	1	* * .	·.
е	Did the organization, during the year 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		√
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	<u>7g</u>		✓
h	For contributions of cars boats airplanes and other vehicles, did the organization file a Form 1098-C as required?	_7h		✓
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring	6.5)) , i,	11
	organization have excess business holdings at any time during the year?	8	1	√
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.] ` '']	٠	112
a	Did the organization make any taxable distributions under section 4966?	9a		<u>v</u>
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	. , 45.	, 3 ,
10 a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	3132.7. 112.2.1.	14844	1
	Gross receipts included on Form 990, Part VIII, line 12, for public use of club facilities 10b 0	1855900		图:
11	Section 501(c)(12) organizations. Enter	[w.].	11	1,30
	Gross income from members or shareholders 11a 5,745,587		19 ch	K 25.
	Gross income from other sources (Do not net amounts due or paid to other sources against			1094,
12a	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		/
	If "Ves," enter the amount of tay-exempt interest received or accrued during the year.	7; 1, 3	7 7 5	

PartVI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the		63 3Å: 1965 6	1
	circumstances, processes, or changes in Schedule O. See instructions		, , ,	1 1 1 tst.
1a	Enter the number of voting members of the governing body 1a 9		- ¹ -).)	7. V
b	Enter the number of voting members that are independent 1b 0	1, 31, 1, 1	1	100
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	18 4	"	(بر ر
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		√
6	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	_	,	
	of the governing body?	7a_	√	
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	_ v	ļ., —
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	''		,
	the year by the following	0.	✓	
	The governing body?	8a	<u>-√</u>	
	Each committee with authority to act on behalf of the governing body?	8b 9a		1
	Does the organization have local chapters, branches, or affiliates?	Ja		
b	If 'Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates and branches to ensure their operations are consistent with those of the organization?	9b		-
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	40		1
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		
11	Is there any officer, director or 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	11		1
Sec	tion B Policies	<u> </u>	ì	L_ <u>'</u>
000	tion D 1 onoics		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		1
	Are officers, directors or trustees and key employees required to disclose annually interests that could give			
U	rise to conflicts?	12b	ĺ	
_				
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		l
13	Does the organization have a written whistleblower policy?	13	✓	
14	Does the organization have a written document retention and destruction policy?	14		✓
15	Did the process for determining compensation of the following persons include a review and approval by	.,	٠,,,	÷, ′,
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		(3)	1
a	The organization's CEO, Executive Director, or top management official?	15a	1	
b	Other officers or key employees of the organization?	15b	✓	1, -
	Describe the process in Schedule O (see instructions)	77	1, , , 1	.∱: " ·†·
16a	Did the organization invest in contribute assets to, or participate in a joint venture or similar arrangement	l '^-	· 	14.4
	with a taxable entity during the year?	16a	ļ	\ <u> </u>
b	If 'Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	1 1	ļ. ' '	
	its participation in joint venture arrangements under applicable federal tax law and taken steps to safeguard	'		ŀ
	the organization's exempt status with respect to such arrangements?	16b	<u> </u>	L
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ≥ none			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501)	c)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents conflict	of int	erest	
00	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and reconganization Are retain at headquarters office, maintained in-house	ords (of the	

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. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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 the organization did not co		any o	offic			ctor,	trus			
(A)	(B)	(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee	e Institutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
William H Wilson President	7			1				8,913	0	0
John Bruch Vice-President	2			1				8,238	0	0
Robert J Shockley Secretary Treasurer	1			√		!		5,394	0	0
John Hester Assistant Secretary - Treasurer	18			1				6 600	0	0
Kenny DeGering	2	<u>/</u>						4,640	0	0
Andrew W Greer	3	/						5,624	0	0
Jack W Hammond	7	1						5 916	0	0
David Keener	4	1						8,613	0	0
Joel D Wasserburger	2	/						1,842	0	0
	-									
	-									
	-									
	-									
	-									

Section A. Officers, Directors, (A)	(B)			(0	2)			(D)	(E)	(F)
Name and title	Average	Posit	on (d	chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W 2/1099-MISC)	amount of other compensation from the organization and related organizations
					_					
			<u> </u>							
	-									
1b Total							>	55,780	0	
 Total number of individuals (including the organization ► 0 Did the organization list any former of 										Yes No
employee on line 1a? If Yes " complete 4 For any individual listed on line 1a, is the	he sum of rep	ortab	le c	om	pen	sation				3
the organization and related organization individual	_									4 /
5 Did any person listed on line 1a rece services rendered to the organization?	ive or acciue If 'Yes, com	com plete	Scl	nsati nedu	on ule	from J for :	any such	unrelated org person	anization for	5
Section B Independent Contractors										00.000
Complete this table for your five highes compensation from the organization	st compensate	ed ind	depe	ende	ent 	contr	acto	ors that receive	d more than \$1	00,000 of
(A) Name and business	address						_	(B) Description of s	services	(C) Compensation
NONE							-			
							+			
2 Total number of independent and the	ove (in cluster)	thes		41.	who	rooc	W66	I mara than 61	00,000 in 12.12.1	
2 Total number of independent contract compensation from the organization ►		เกอร	e in		/VIIO	rece	1460		00,000 III 19	心是一种人类的

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Part VIII Statement of Revenue (B) Related or (C) Unrelated (D) Revenue Total revenue exempt Dusiness excluded from tax under sections revenue gifts, grants 0 1a Federated campaigns 1b 0 b Membership dues 0 1¢ c Fundraising events 0 1d d Related organizations Contributions, gand other simil 0 1e e Government grants (contributions) f All other contributions gifts grants 1f O and similar amounts not included above 0 a Noncash contributions included in lines 1a-1f \$ h Total Add lines 1a-1f **Business Code** Revenue Sales of Electricity 5 907,221 5.907.221 Electrician Merchandise 453000 16,508 16,508 b Service Electrician 449,949 449,949 541900 С d Program All other program service revenue 高级的 医心理 医二种 医神经神经 6,373,678 g Total Add lines 2a-2f Investment income (including dividends, interest, and 56.988 56.988 other similar amounts) 0 Income from investment of tax-exempt bond proceeds 0 Royalties (i) Real (II) Personal 1,024 0 6a Gross Rents 0 2,271 b Less rental expenses 0 (1247)c Rental income or (loss) (2,224)d Net rental income or (loss) (1,247)977 (i) Securities (ii) Other 7a Gross arrount from sales of 0 0 assets other than inventory b Less cost or other basis 0 0 and sales expenses 0 0 c Gain oi (loss) d Net gain or (loss) Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 0 Other 0 b Less direct expenses b c Net income or (loss) from fundraising events 9a Gross income from gaming activities 0 See Part IV line 19 0 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 0 returns and allowances 0 b Less cost of goods sold b c. Net income or (loss) from sales of inventory • Miscellaneous Revenue **Business Code** 11a b c d All other revenue · 1887年 1987年 1888年 1 0 e Total. Add lines 11a-11d Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e 6,429,419 5,904,997 466,457 57,965



Pare X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (C) Management and (B) Program service Do not include amounts reported on lines 6b, Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 0 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 0 the U.S. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the Û U.S. See Part IV, lines 15 and 16 0 Benefits paid to or for members Compensation of current officers, directors, 146,051 trustees and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) 848,584 7 Other salaries and wages Pension plan contributions (include section 401(k) 99 755 and section 403(b) employer contributions) 162 892 Other employee benefits 9 73,667 10 Payroll taxes Fees for services (non-employees) 0 a Management 12,684 b Legal 9,784 c Accounting 0 d Lobbying 0 والمايعة أوالما المتمامة e Professional fundraising services. See Part IV. line 17 0 f Investment management fees 29,377 12 Advertising and promotion 3,212 28,635 13 Office expenses 42,561 14 Intermation technology 0 15 Royalties 20 040 Occupancy 16 244,607 17 Travel 18 Payments of travel or entertainment expenses for any federal state or local public officials 9,331 19 Conferences, conventions and meetings 83,740 20 Interest 26 719 21 Payments to affiliates 411 909 Depreciation, depletion and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) Cost of Power 3 212,435 Misc 24,182 b С d All other expenses Total functional expenses. Add lines 1 through 24f 25 5,490 165 Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Pa	<u> </u>	Balance Sheet									
			(A) Beginning of year		(B) End of	year					
	1	Cash—non-interest-bearing	201,683	1		395,	798				
	2	Savings and temporary cash investments	549,901	2		430,	240				
{	3	Pledges and grants receivable, net	3			0					
	4	Accounts receivable net		565,	656						
	5	Receivables from current and former officers directors, trustees, key									
	6	employees, or other related parties. Complete Part II of Schedule L. Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, K	1. 整门的人	3 · V					
,,	_	Part II of Schedule L.	0	6 7			0				
Assets	7	Notes and loans receivable net		<u> </u>		521,					
Ass	8	Inventories for sale or use	40.000 0								
`	9	Prepaid expenses and deferred charges Land buildings and equipment cost hasis 10a 16,415,202	F 10 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		37 11 5 70 5	· · · · · · · ·	165				
	10a	Land, Delindings, and Equipment Gost basis		1 4 1 3 2		3, (*) 11. 14.	r_j , 1				
	р	Less accumulated depreciation Complete Part VI of Schedule D 10b 9,639,024	6.102,859	1	6	,776,					
	11	Investments—publicly traded securities	0	11			0				
	12	Investments—other securities See Part IV, line 11	1,266	12		1,	084				
į	13	Investments—program-related See Part IV line 11	3,031,459	13	3	3,327,	948				
	14	Intangible assets	0	14			0				
	15	Other assets See Part IV line 11	0	15			0				
	16	Total assets. Add lines 1 through 15 (must equal line 34)	10,825,866	16	12	,036	876				
	17	Accounts payable and accrued expenses	17		661	376					
	18										
	19	Deferred revenue	0	19			0				
	20	Tax-exempt bond liabilities 0 20									
S	21										
Liabilities	22	Payables to current and former officers, directors, trustees, key employees highest compensated employees and disqualified	, 'T								
_		persons Complete Part II of Schedule L	0	+	 		0				
	23	Secured mortgages and notes payable to unrelated third parties	2,079,245		ļ	2,182					
	24	Unsecured notes and loans payable	259 152				,535				
	25 26	Other liabilities Complete Part X of Schedule D Total liabilities Add lines 17 through 25	2 731,794	 	ļ	3 187					
ses	20	Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.	210,,,0,	:	- /3 - /	, ' , '	, <u>330</u>				
Balances	27	Unrestricted net assets	·o	27		,	0				
Bal	28	Temporarily restricted net assets	0	28			0				
Þ	29	Permanently restricted net assets	0	29			0				
Fund		Organizations that do not follow SFAS 117, check here ▶ ☑	**	15	3		11				
ō		and complete lines 30 through 34.	5.705	30		_	805				
Net Assets	30	Capital stock or trust principal, or current funds	5,795 7,765,282		 	8 548					
1ss	31	Paid-in or capital surplus, or land, building, or equipment fund	322,995		 		,468				
t /	32	Retained earnings, endowment, accumulated income, or other funds					···				
ž	33	Total net assets or fund balances	8,094,072			8,849					
102		Total liabilities and net assets/fund balances	10,825,866	34	1	2,036	,670				
LC	TEACT	Financial Statements and Reporting				V 1					
1	Δαα	ounting method used to prepare the Form 990 🗹 Cash 🔲 Accrua	al 🗌 Other		- Jul.	Yes	No				
				ıt 2	2a	•"	1				
	The state of game attended attended of the state of the s										
	b Were the organization's financial statements audited by an independent accountant? c If "Yes' to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of										
C		audit review or compilation of its financial statements and selection of an i			OI 2c	✓					
38	a Asa	a result of a federal award, was the organization required to undergo ar									
	the	Single Audit Act and OMB Circular A-133?			3a		1				
t	o If 'Y	res,' did the organization undergo the required audit or audits?			3b		✓				

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008
Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name	of the organization			Employer identification number
ΝΙΟ	BRARA ELECTRIC ASSOCIATION INC			83 0164125
Pai	Organizations Maintaining Do the organization answered "Yes			ids or Accounts. Complete if
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and funds are the organization's property, sub	ject to the organization's exclu	isive legal contro	ol?
6	Did the organization inform all grantees, dused only for charitable purposes and not	onors, and donor advisors in v for the benefit of the donor or	writing that grant donor advisor i	or other
	impermissible private benefit?		1 (1) / 11 +	Yes No
	Conservation Easements. Com			Form 990, Part IV, line 7
1	Purpose(s) of conservation easements hel	· · ·	_	
	Preservation of land for public use (e.g.	」,recreation or pleasure)		f an historically important land area
	Protection of natural habitat	L_) Preservation of	of certified historic structure
2	Preservation of open space Complete lines 2a–2d if the organization he	ld a qualified conservation conti	ribution in the for	m of a conservation easement
	on the last day of the tax year			fr. T. d
				Held at the End of the Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation e			2b
С	Number of conservation easements on a			2c
d	Number of conservation easements include			2d
3	Number of conservation easements modified the taxable year ▶			_
4	Number of states where property subject			
5	Does the organization have a written police enforcement of the conservation easemer		toring, inspection	n, violations, and
6	Staff or volunteer hours devoted to monit			
7	Amount of expenses incurred in monitoring	g, inspecting and enforcing e	asements during	the year► \$
8	Does each conservation easement reported 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)?	ed on line 2(d) above satisfy th	e requirements	of section Yes No
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conserv	the text of the footnote to the		
Ωā	Organizations Maintaining Col		reasures, or O	ther Similar Assets.
	Complete if the organization ans			
1a	If the organization elected, as permitted user historical treasures, or other similar assured in Part XIV, the text of the footnot	sets held for public exhibition, e	ducation, or rese	earch in furtherance of public service,
b	If the organization elected, as permitted u			
	historical treasures or other similar assets provide the following amounts relating to		ucation, or resea	
	(i) Revenues included in Form 990, Part	VIII, line 1		\$
	(ii) Assets included in Form 990, Part X			> \$
2	If the organization received or held work following amounts required to be reported			ssets for financial gain, provide the
а	Revenues included in Form 990, Part VIII,	line 1		> \$
b	Assets included in Form 990, Part X			▶ \$

Page	2
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Par	Organizations Maintainii	ng Collections	of Art, His	storical	Treasures	, or O	ther Similar As	sets (continued)
	Using the organization's accession a items (check all that apply)	and other records	s, check a	ny of th	e following	that are	e a significant us	se of its collection
а	Public exhibition d Loan or exchange programs							
b	Scholarly research		е	0	ther			**-
С	Preservation for future generati	ons						
4	Provide a description of the organiza	ation's collections	and expl	ain how	they further	the or	ganization's exe	mpt purpose in
	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							
Par	Trust, Escrow and Custo Part IV, line 9, or reported	dial Arrangeme an amount on l	ents. Com Form 990	nplete if , Part X	organizatio , line 21	n ansv	vered "Yes" to	Form 990,
	is the organization an agent, trustee included on Form 990, Part X?					ons or	other assets no	t Yes No
b	If "Yes" explain the arrangement in	Part XIV and cor	nplete the	tollowir	ng table	_	1	nount
	_					10	- A	noun
	Beginning balance					1c		
	Additions during the year					1d	 	
	Distributions during the year					1e	 	
f	Ending balance					1f	<u> </u>	
	b If "Yes' explain the arrangement in Part XIV							
Par	Endowment Funds Co					—		
		(a) Current year	(b) Prio		(c) Two years	back !	(d) Three years back	(e) Four years back
1a	Beginning of year balance			<u></u>				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	Contributions		3, 3,50	. ``	1 - 196 1 - 27			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
С	Investment earnings or losses		3 15 (15)	, t	17/50		p to took to the control of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
d	Grants or scholarships		1 15 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	British Coll	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 Kg 1857 , 10 1822 , 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
е	Other expenditures for facilities and programs		12/2/2					Control of the second s
f g	Administrative expenses End of year balance		75 51		· 新江 · · · · · ·		CANCELLAND	· 信奉文献成 (400)。 · 自60 (200) (200)
2	Provide the estimated percentage of	f the year end ba	llance held	d as				
a	Board designated or quasi-endown	ent >	%					
b	Permanent endowment ►	%						
С	Term endowment ► %	D						
3а	Are there endowment funds not in thorganization by	e possession of the	he organiz	ation tha	at are held a	nd adm	inistered for the	Yes No
	(i) unrelated organizations							3a(ı)
	(ii) related organizations							3a(II)
	If 'Yes' to 3a(II), are the related org							3b
4	Describe in Part XIV the intended u					V 4 V - 1		
لناتا	Investments—Land, Bu							
	Description of investment	(a) Cost or o		bası	st or other s (other)		Depreciation	(d) Book value
1a	Land	0			5,625	1, 1,	14, 4, 1 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1	155 <u>62</u> 5
b	Buildings	0		54	5 595		0	245 195
С	Leasehold improvements	0			0		0	0
d	Equipment	0			13,731	9,	338,624	6,375,107
e	Other	0			251		0	251
Tota	I Add lines 1a-1e (Column (d) should a	equal Form 990. Pa	ят х. соішг	nn (B). lir	ne (U(C))		▶ \	6.776 178

Part VII Investments - Other Securities	s. 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
Financial derivatives and other financial products		
Closely-held equity interests		
Other EDWARD JONES	1,084	End-of-Year Market Value
······		
T. 1. 10 1 11 11 11 11 11 11 11 11 11 11 11 1		[7] [7] [7] [7] [7] [8] [7] [8] [7] [7] [7] [7] [7] [7] [7] [7] [7] [7
Total (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments — Program Relat		line 13
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) observation of integration type	(b) Book value	Cost or end-of-year market value
PATRONAGE CAPITAL ASSOC COOPS	2 972,527	COST
MEMBERSHIPS	259,612	COST
UNCLAIMED PATRONAGE INVESTED FOR SCHOLARSHIPS	95,809	End-of-Year Market Value
JOHN COMMITTEE STATE OF THE STA	30,1137	
Total (Column (b) should equal Form 990 Part X col (B) line 13) ▶	0 0 2 0 0 0	the state of the s
Part IX Other Assets. See Form 990, F		(h) Cook value
NONE	(a) Description	(b) Book value
TV/TL		
Total (Calvery (b) about day of Form 2000 Day V	! (D) ! +5 \	
Total (Column (b) should equal Form 990, Part X, of Par		
(a) Description of hability	(b) Amount	THE STATE OF THE S
Federal income taxes		
CONSUMER DEPOSITS	54,8	── はで 「!!! ** ** ** ** ** ** **
CUSTOMER ADVANCES FOR CONSTRUCTA	282,82	
COMPUTER & COMMUNICATION REPAIR RESERVE	5,8	
NEGETIVE	7,0	The state of the s
		The second of th
		Winner Company
		Some the state of
Total (Column (b) should equal Form 990, Part X, col. (B) line 25)	343,5	35 150 150 160 160 160 160 160 160 160 160 160 16
		atements that reports the organization's liability for
uncertain tax positions under FIN 48		

D۵	٠.	_	

1 Total revenue (Form 990, Part VIII, column (A), line 12) 2 5.938 3	1 6 877.296	to rinancial Statements	Reconciliation of Change in Net Assets from Form 990 to						
2		1							
Sexistry		2							
Net unrealized gains (losses) on investments		3							
Solution Company Com			·						
6 Investment expenses 6 7 7 7 7 7 7 7 7 7			• , ,						
Solution Clear (Describe in Part XIV) 8 9 8 8 9 9 8 8 9 9	6		Investment expenses						
Total adjustments (net) Add lines 4-8 9 8 8 10 948			Prior period adjustments						
Total adjustments (left) for the year per funancial statements Combine lines 3 and 9 Total adjustments With Revenue per Return Total revenue gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments Donated services and use of facilities Recoveries of prior year grants dother (Describe in Part XIV) Add lines 2a through 2d Investment expenses not included on Form 990 Part VIII, line 12 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a investment expenses and losses per audited financial statements Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities Prior year adjustments Losses reported on Form 990, Part IX line 25 Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part IX, line 25, but not on line 1 a linvestment expenses not included on Form 990, Part VIII, line 7b Other (Descr			Other (Describe in Part XIV)						
Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue gains, and other support per audited financial statements		<u> </u>							
1 Total revenue gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) 6 By Conciliation of Expenses per Audited Financial Statements With Expenses per Return 7 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 b Other (Describe in Part XIV) c Add lines 2a through 2d 3 Subtract line 2e from line 1 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 b Other (Describe in Part XIV) c Add lines 4a and 4b		0 0 0110	Excess of (deficit) for the year per financial statements. Combine lines 3						
Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 a Investment expenses not included on Form 990 Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) 5 6 877 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Investment expenses not included on Form 990, Part IX, line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Investment expenses not 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 b Other (Describe in Part XIV) c Add lines 4a and 4b									
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e Add lines 2a through 2d Subtract line 2e from line 1 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 b Other (Describe in Part XIV) c Add lines 4a and 4b Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) Total expenses and losses per audited financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d Subtract line 2e from line 1 a Investment expenses not 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 b Other (Describe in Part XIV) c Add lines 4a and 4b	7	2d	. , =						
3 6,271 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 b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c (This should equal Form 990, Part I, line 12) 5 6 877 Amounts included on Form 990, Part II, line 12) 5 6 877 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Losses reported on Form 990, Part IX line 25 d Other (Describe in Part XIV) e Add lines 2a through 2d Subtract line 2e from line 1 a Investment expenses not 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 b Other (Describe in Part XIV) c Add lines 4a and 4b	2e 8800	2	,						
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c Add lines 4a and 4b 4c 60	_ ;		•						
0 7.00 mes 44 and 45	127 122								
5 Lotal expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5 5 938,042	-							
Part XIV Supplemental Information									
Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b and Part XIII lines 2d and 4b	nd 4, Part IV, lines 1b	Part XIII lines 2d and 4b	nd 2b Part V line 4 Part X, Part XI, line 8, Part XII, lines 2d and 4b and P						
PART XII - line 4b Expense Offset			PART XII - line 4b Expense Offset						
PART XIII - line 4b Income Offset			PART XIII - line 4b Income Offset						
			······································						
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Schedule D (For	nn 990); 2008 Page 5
Part XIV	Supplemental Information (continued)
	
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SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Attach to Form 990 or Form 990-EZ

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b

OMB No 1545-0047

Name of the organization

Employer identification number

NIOBR	ARA ELECTRIC ASSOCIATION IN	IC					8	33		01	6412	5	
Part I	Excess Benefit Transactions To be completed by organizations	(section that ansv	501(c)(i	3) and sect 'es" on Form	ion 501(990, Pai	c)(4) organiz t IV, line 25a	ations of	only) or Forr	n 990-	EZ, P	art V,	line 40)b
4												(c) Corr	
1 	(a) Name of disqualified person				(0)	Description of transaction						Yes	No
un	ter the amount of tax imposed on der section 4958 ter the amount of tax, if any, on lin						ons duri	ng the	e year	▶ \$			
Partil	Loans to and/or From Intere			/es" on Form	1990 Pa	rt IV line 26	or Form	990-F		t V In	ne 38a		
(a)	Hame of interested person and purpose	(b) Loan	answered "Yes" on Form 990, Part IV line 26, or Form 990 Loan to or from corganization? (c) Original principal amount (d) Balance due (e)		T	default?	1		7				
		То	From					Yes	No	Yes	No	Yes	No
			<u> </u>					<u> </u>	-	 	<u> </u>	 	
Total			L	<u> </u>	▶ \$	J		٠.,	1, 2,	, ,	<u> </u>	-	
Part I	Grants or Assistance Benefi To be completed by organizat				on Form	990 Part IV	/ line 2	7		<u>.</u>			
	(a) Name or interested person			p between inte	rested per			Amount	of gran	t or ty	pe of a	ssistan	ce
												~	
Part	Business Transactions Invol To be completed by organiza				on Form	990 Part l'	L V line 2	'8a 28	Bb or	28c			
(a) Name of interested person	(b) F	Relationsh	ip between son and the	(c) A	amount of	(d) Description of transaction		tion	(e) Sharing of organization revenues?			
NO TR	ANSACTIONS EXCEEDING											Yes	No
	ORTABLE THRESHOLDS												1
												-	<u> </u>
												-	+-
												+	



SCHEDULE O (Form 990)

Supplemental Information to Form 990

2008

Doen to Public 8

Employer identification number

OMB No 1545 0047

Dupartment of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information

NIOBRARA ELECTRIC ASSOCIATION INC	83 .	0164125
PART VI - SECTION C DISCLOSURE - LINE 19		
Any interested party must make their request in writing prior to coming to office to	view documents	
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