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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 Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection A For the 2009 calendar year, or tax year beginning 2009, and ending 20 C Name of organization CHARITON VALLEY ELECTRIC COOPERATIVE D Employer identification number Please Doing Business As 42-0625814 label or print o Number and street (or P O box if mail is not delivered to street address) Telephone number 2090 HIGHWAY 5 SOUTH (641) 932-7126 Specifi City or town, state or country, and ZIP + 4 Terminated Instruc ALBIA, IA 52531 G Gross receipts \$ 9,194,064. refuro F Name and address of principal officer JON MILES H(a) Is this a group return for 2090 HIGHWAY 5 SOUTH ALBIA, IA 52531 H(b) Are all affiliates included? 501(c) (12) **◄** (insert no) Tax-exempt status If "No." attach a list (see instructions) 4947(a)(1) or 527 Website ► N/A H(c) Group exemption number Form of organization X | Corporation Association L Year of formation 1945 M State of legal domicile IΑ Part I Summary Briefly describe the organization's mission or most significant activities PROVIDE PUBLIC UTILITY TO ITS MEMBERS Governance If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 11 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of employees (Part V, line 2a) 23 5 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, line 34 . . . Prior Year Current Year 0. Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 8,521,495. 9,132,218. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 48,099. 10 41,008. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 1,200. 20,838. 8,570,794. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9,194,064. Grants and similar amounts pard (Rant IX, column (A), lines 1-3)
Benefits paid to or for members (Part IX, column (A), line 4) 13 O. 14 0. Salaries, other compensation, employee benefits (Parilik, column (A), lines 5-10) 1,365,563. 1,687,799. 16 a Professional fundrating feels [Part]X. Column (A). [prof 1e) 0. b Total fundraising expenses, Part IX, column (D), line (3)

Other expenses (Part IX, column (A), lines 11a-11d; 24f) 6,223,410. 7,002,919. Total expenses Aud lines 13-17 (must equal Part IX, column (A), line 25) 7,588,973. 8,690,718. 503,346. 981,821. 19 Revenue less expenses Subtract line 18 from line 12 . . . 58 Beginning of Year End of Year 20 Total assets (Part X, line 16) 22,097,359. 22,220,387. Total liabilities (Part X, line 26) . . . 21 13, 195, 547. 13,051,408. Net assets or fund balances Subtract line 21 from line 20 8,901,812. 9,168,979. 22 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 Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here ha Type or print name and title Date Check if Preparer's identifying number 6-22-13 Preparer's Paid signature employed • Preparer's Firm's name (or your FIN 39-0906430 Use Only Phone no 515-223-0159 7780 OFFICE PLAZA DR S, SUITE 184 WEST DES MOINES,

For Privacy Act and Paperwork Reduction Act Notice, see the separate Instructions.

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

X Yes_ Form 990 (2009)

| | 990 (2009) | 42-0625814 | Page 2 |
|------|---|---------------------------|---------------|
| Pai | t Statement of Program Service Accomplishments | | |
| | Briefly describe the organization's mission PROVIDE PUBLIC UTILITY TO ITS MEMBERS | | |
| - | | | |
| 2 E | Old the organization undertake any significant program services during the year he prior Form 990 or 990-EZ? | ar which were not listed | on Yes X No |
| ı | f "Yes," describe these new services on Schedule O | | |
| 5 | Did the organization cease conducting, or make significant changes in how it conservices? f "Yes," describe these changes on Schedule O | | Yes X No |
| 4 [| Describe the exempt purpose achievements for each of the organization's three laid Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are reallocations to others, the total expenses, and revenue, if any, for each program ser | quired to report the amou | |
| 4a (| Code 221000)(Expenses\$ 8,690,718 including grants of \$ PROVIDING ELECTRIC SERVICE TO ACTIVE MEMBER CONSUMERS |) (Revenue \$ | 9,153,056) |
| - | | | |
| - | | | |
| - | | | |
| - | | | |
| - | | | |
| _ | | | |
| 4b (| Code) (Expenses \$including grants of \$ |) (Revenue \$ |) / |
| - | | | |
| - | | | |
| - | | | |
| - | | | |
| - | | | |
| 4c (| Code) (Expenses \$ including grants of \$ |) (Revenue \$ |) |
| - | | | |
| _ | | | |
| - | | | |
| - | | | |
| _ | | | |
| 44.0 | Ather program services (Describe in Schedule O.) | | |
| | Other program services (Describe in Schedule O) Expenses \$ including grants of \$) (Revenue \$ | , | |
| | otal program service expenses ► 8,690,718. | | |

| Part | IV Checklist of Required Schedules | | | |
|------|---|-----|---------------|----------|
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | | Х |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | | Х |
| 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 | | Х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete | | | |
| | Schedule C, Part II | 4 | | |
| 5 | Sections 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 similar funds or 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 | | Χ |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | , | | |
| | complete Schedule D, Part III | 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, 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 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or | | | |
| | quasi-endowments? If" Yes,"complete Schedule D, Part V | 10 | | <u> </u> |
| 11 | Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, | | | |
| | VII, VIII, IX, or X as applicable | 11 | X | |
| • | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete | | | ` |
| | Schedule D, Part VI | | | - |
| • | 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 | | - | j |
| • | 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 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 | | - | i |
| _ | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | | | |
| | 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? If "Yes," complete Schedule D, Part X | i | | |
| 12 | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," | | | - 1 |
| 12 | complete Schedule D, Parts XI, XII, and XIII | 12 | | |
| 12 A | Was the organization included in consolidated, independent audited financial statement for the tax year? Yes No | 12 | | <u> </u> |
| | If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional | İ | ٠. ا | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | |
| | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | <u> </u> |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, | | | |
| _ | business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I | 14b | | Х |
| 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 | İ | Х |
| 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 | i | Х |
| 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 | 17 | ŀ | Х |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | $\neg \neg$ | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | İ | Х |
| 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 | į | Х |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | $\neg \dashv$ | X |
| | | | | |

| Part | Checklist of Required Schedules (continued) | | | |
|------|---|-------|-----------|--|
| | | | Yes | No |
| 21 | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations | | | |
| | in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II | 21 | | X |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the | | | 1 |
| | United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | <u></u> . | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | ł | | ļ |
| | organization's current and former officers, directors, trustees, key employees, and highest compensated | ļ | | |
| | employees? If "Yes," complete Schedule J | 23 | | X |
| 24 a | 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 question 25 | 24a | | Х |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | 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 | | |
| | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | | | |
| 25 a | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | İ |
| | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a | 200 | | |
| D | | | | |
| | prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or | 256 | | l |
| | 990-EZ? If "Yes," complete Schedule L, Part I | 25b | - | - |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | | | x |
| | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II. | 26 | | |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | |
| | substantial contributor, or a grant selection committee member, or to a person related to such an individual? | | | ,, |
| | If "Yes," complete Schedule L, Part III | 27 | | Х |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, | | | |
| | Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | ١ |
| | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | Х |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | | | |
| | Schedule L, Part IV | 28b | | X |
| C | An entity of which a current or former officer, director, trustee, or key employee of the organization (or a | | | Ì |
| | family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, | | | |
| | Part IV | 28c | | Х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | Х |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | Х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | |
| | Part I | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| - | Schedule N, Part II | 32 | | Х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| JJ | sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | x |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, | | | |
| 34 | III, IV, and V, line 1 | 34 | x l | |
| 25 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete | | | |
| 35 | | ا ء ا | | х |
| | 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, | l | | ١,, |
| | Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and | | | |
| | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Х | |
| | | Form | 990 | (2009) |

| Par | Statements Regarding Other IRS Filings and Tax Compliance | | | |
|------|---|----------|-----|-------------|
| | | | 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 | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | | | |
| | gaming (gambling) winnings to prize winners? | 1c | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | , | |
| | Statements, filed for the calendar year ending with or within the year covered by this return . 2a 23 | | _ | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Х | |
| - | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see | | | |
| | instructions) | | | , |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by | | - 1 | |
| | this return? | 3a | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | | |
| | 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 | i | Х |
| b | If "Yes," enter the name of the foreign country | | | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank | | | |
| | and Financial Accounts | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| C | 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 | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | ı | |
| | organization solicit any contributions that were not tax deductible? | 6a | | _X_ |
| þ | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| | gifts were not tax deductible? | 6b | | |
| | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | - | | |
| | and services provided to the payor? | 7a 7b | | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 70 | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | 7c | | |
| | required to file Form 8282? | 70 | | |
| | | | | |
| 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 | Ì | |
| | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as | | | |
| | required? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting | 1 | | |
| | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring | | - 1 | |
| | organization, have excess business holdings at any time during the year? | 8 | | <u> </u> |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | ' |
| | Did the organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | ł | | |
| 11 | Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a 4,504,308 | | | |
| | | | | |
| D | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | - 1 | |
| 12 ^ | amounts due or received from them) | 12a | - 1 | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| | | | | |

| Form 990 (2009) | 99) 42-0625814 | | F | age 6 | | | |
|--|--|----|-----|-------|--|--|--|
| Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change Schedule O. See instructions. | | | | | | | |
| Section A | A. Governing Body and Management | | | | | | |
| | | • | Yes | No | | | |
| a Enter t | r the number of voting members of the governing body | 11 | | | | | |

| Sect | tion A. Governing Body and Management | | | |
|------|--|-----|-----|----|
| | | | Yes | No |
| а | Enter the number of voting members of the governing body 1a 11 | | | |
| 1b | Enter the number of voting members that are independent | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | |
| | any other officer, director, trustee, or key employee? | 2 | | Х |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | |
| | supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | Х |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | | Х |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | | Х |
| 6 | Does the organization have members or stockholders? | 6 | Х | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members | | | |
| | of the governing body? | 7a_ | Х | |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | Х | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following | | | |
| а | The governing body? | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Х | |
| 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 | 9a | | Х |
| Sect | ion B. Policies (This Section B requests information about policies not required by the Internal | | | |
| | enue Code.) | | | |
| | | | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | | Х |
| 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? | 10b | | |
| 11 | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the | | | |
| | form? | 11 | Х | |
| 11 A | Desribe in Schedule O the process, if any, used by the organization to review this Form 990 | | | |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Х | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | | | |
| | rise to conflicts? | 12b | X | |
| С | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | |
| | describe in Schedule O how this is done | 12c | Х | |
| 13 | Does the organization have a written whistleblower policy? | 13 | X | |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | Х | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | X | |
| b | Other officers or key employees of the organization | 15b | | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) | | | |
| 16 a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | |
| | This contact country c | 16a | | X |
| b | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate | | | |
| | its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard | | | |
| | THE OTHER TRANSPORTER TO SAN THE PROPERTY OF T | 16b | | |
| Sect | ion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed | | | |
| 18 | Section 6104 requires an organization to make its 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 X Upon request | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest | | | |
| | 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 records of the organization JON MILES, MANAGER 2090 HIGHWAY 5 SOUTH ALBIA, IA 52531 | | | |
| | organization JON MILES, MANAGER 2090 HIGHWAY 5 SOUTH ALBIA, IA 52531 | | | |
| | 641-932-7126 | | | |

JSA 9E1042 1 000

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. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee

- 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

| (A) Name and Title | (B) Average | (C) Position (check all that apply) | | | | | ıly) | (D) Reportable | (E) Reportable | (F) Estimated |
|--------------------|-------------------|-------------------------------------|-----------------------|---------|--------------|------------------------------|------|--|--|--|
| | hours per week | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | | 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 |
| MERRILL BAKER | | | | | | | | | | |
| SECRETARY | 4.00 | Х | | | | | | 4,505. | 0. | 0. |
| RICHARD COLTRAIN | | | | | | | | | | |
| DIRECTOR | 3.00 | X | | | L | | | 4,355. | 0. | 0. |
| CHARLES JACOBS | | | | | | | | | | |
| DIRECTOR | 4.00 | X | Ш | | | | L | 5,255. | 0. | <u> </u> |
| LARRY JOHNSON |] | | | | ŀ | | | | | |
| DIRECTOR | 4.00 | Х | | | | | | 5,105. | 0. | 0. |
| MICHAEL MILLER | | | li | | | | | | | |
| VICE PRESIDENT | 2.00 | Х | | | L_ | | | 4,215. | 0 | 0. |
| VIRGIL MOORE | | | | | | | | | | |
| DIRECTOR | 2.00 | Х | | | L | | | 2,860. | 0. | |
| MARK UHLENHAKE | | | | | | | | | | |
| DIRECTOR | 3.00 | Х | Ш | | | | | 4,955. | 0. | <u> </u> |
| RICHARD WELSH | | | | | | | | | | |
| PRESIDENT | 5.00 | Х | | | | | | 4,965. | 0. | 0. |
| JOHN SCHOOLEN | | | | | | | | | | |
| DIRECTOR | 2.00 | Х | | | | <u> </u> | | 2,870. | 0. | 0. |
| REBECCA DE TAR | | | | | | | | | | |
| TREASURER | 3.00 | Х | | | <u> </u> | | | 4,055. | 0. | <u> </u> |
| KEITH ARNOLD | , | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | | | | 3,010. | 0. | <u> </u> |
| JON MILES | | | | | | $ \mathbf{x} $ | | | | |
| GENERAL MANAGER | 40.00 | | | X | L. | | | 118,401. | 0 | 29,234. |
| | | | | | | | | | | |
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| | | | | | | | | | | |

42-0625814

| (A) | (B) | | | | C) | 4110 | <u></u> | (D) | (E) | 1 | (F | | |
|---|-------------------|--------------------------------|-----------------------|---------|--------------|------------------------------|----------|--|--|---|------------------|---------------------------------------|--|
| Name and title | Average | Posit | иоп (с | check | k all t | hat app | | 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-MIS | ited other ions compensati | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | , | | | | | |
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| | | | | | | | | | | | | | |
| 1b Total | <u> </u> | l | <u> </u> | | | | • | 164,551. | <u>'</u> | 0. | | 9,234 | |
| Total number of individuals (including but not lim reportable compensation from the organization | | | ed al | | | | ceiv | ed more than \$100 | ,000 in | | | | |
| | | | | | | | | | | _ | Y | es No | |
| 3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schede | | | | | | | | | | | 3 | х | |
| 4 For any individual listed on line 1a, is the the organization and related organizations | | | | | | | | | | | | | |
| Individual | | | | | | | | | | | 4 | X | |
| services rendered to the organization? If "Yes," | complete S | Sched | ule . | J for | su | ch per | son | · | · · · · · · · · · · · · · · · · · · · | <u>. </u> | 5 | X | |
| Section B. Independent Contractors | | | | | | | | | 1 15 1 | £400.0 | 00 -4 | • | |
| Complete this table for your five highest compensation from the organization | compensate | ea in | aep | ena | ent | cont | racı | | more than : | ±100,0 ——— | | · | |
| (A) Name and business addi | ress | | | | | | _ | (B) Description of sen | vices | Com | (C) pensation | on | |
| | | | - | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 2 Total number of independent contractors (in | | | | uted | | _ | e li | sted above) who | received | | | | |
| more than \$100,000 in compensation from the | e organizat | ion | <u> </u> | | | 0 | | | | | | | |

Page 9

| ar | t VIII | Statement of Revenue | | | 42-0625814 | | |
|-------------------------|--------|---|----------------------|---|---|--|--|
| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from ta under sections 512, 513, or 514 |
| 93 | 1a | Federated campaigns 1a | | | | | |
| lar amounts | b | Membership dues 1b | | , | - | , , | |
| Ē | С | Fundraising events 1c | | | · | , , | |
| ara | đ | Related organizations 1d | | | | | 1 |
| Ē | e | Government grants (contributions) 1e | | | | | - |
| 3 | f | All other contributions, gifts, grants, | | | | : | - · |
| 3 | • | and similar amounts not included above . 1f | | 1, 4 | , | | , |
| and other simil | ~ | Noncash contributions included in lines 1a-1f \$ | | | , , | | |
| ᇜ | g h | Total Add lines 1a-1f | | 0 | 1, | ाच्याः च्याः - | |
| 9 | | | ess Code | | | | |
| 티 | _ | <u> </u> | | 9,105,407 | 9,105,407 | | |
| Program Service Revenue | 2a | | | | | | i |
| 9 | b | MERCHANDISE SALES 4441 | 00 | 26,811 | 26,811 | | |
| ٤ | С | | | | | | |
| Se | đ | | | | | | |
| ag | е | | | | | | |
| ğ | f | All other program service revenue | | | | | |
| ۵ | g | Total. Add lines 2a-2f | <u> , ▶</u> | 9,132,218 | | | |
| | 3 | Investment income (including dividends, interest, and | | | | | ļ |
| ì | | other similar amounts) ATTACHMENT 2 | ▶ | 41,008 | | | 41,00 |
| | 4 | Income from investment of tax-exempt bond proceeds | ▶ | 0 | | | |
| | 5 | Royalties · · · · · · · · · · · · · · · · · · · | <u>.</u> > | 0 | | | |
| | | (i) Real (ii) F | Personal | , | · · · · · · · · | | - |
| | 6a | Gross Rents | | , <u>, , , , , , , , , , , , , , , , , , </u> | 4 2 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | - , , | 1-1 |
| | | 1 | | | | Table 1 Act | , |
| | b | Less rental expenses | | | | - u · | |
| | C | Rental income or (loss) | | 20,838. | and the same of the same | to read a few property a sendendenterior | 20,83 |
| | d | | Other | 20,636. | 1.1.2.2 | | 20,03 |
| } | 7a | Gross amount from sales of | 00. | | | - , | 1 : |
| | | assets other than inventory | | - • • • • • • • • • • • • • • • • • • • | , , , | | |
| | b | Less cost or other basis | | ; ' ; ' | <i>'</i> | | - |
| | | and sales expenses | | | : | | |
| | С | Gain or (loss) | | * * * * * * * | , | | |
| | d | Net gain or (loss) | <u> ▶</u> | 0 | | | |
| او | 8a | Gross income from fundraising | | | | | |
| une | | events (not including \$ | | • | | | |
| Š | | of contributions reported on line 1c) | | , | | | |
| & | | See Part IV, line 18 a | | | | r | |
| a i | | Less direct expenses | | | | | |
| Other Reve | b b | Net income or (loss) from fundraising events | | 0 | | | |
| 9 | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | 9a | Gross income from gaming activities | | • | | • | _ |
| | | See Part IV, line 19 a | | | | , | , |
| - | b | Less direct expenses b | | | · · · · · · · · · · · · · · · · · · · | | <u>`</u> |
| | С | Net income or (loss) from gaming activities | 🟲 | 2 + + - | - | ···· | - |
| | 10a | Gross sales of inventory, less | | | | • | |
| - 1 | | returns and allowances a | | | | | |
| | b | Less cost of goods sold b | _ | , . | | | |
| Ĺ | С | Net income or (loss) from sales of inventory | | 0 | | | |
| ſ | | Miscellaneous Revenue Busin | ess Code | | | | |
| Ī | 11a | | | | | | |
| | | | | | | | |
| | b | | | | | - | |
| | С. | All all and a second | | | | | |
| | d | All other revenue | | | | | |
| | е | Total. Add lines 11a-11d | | 0 | | | |
| | 12 | T-4-1 D | _ | 9,194,064 | 9,132,218 | | 61,84 |

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| | not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|----------|---|-----------------------|------------------------------------|---|--|
| 1 | Grants and other assistance to governments and | | | | |
| | organizations in the U.S. See Part IV, line 21 | 0. | | | |
| 2 | Grants and other assistance to individuals in | | | | |
| _ | the U S See Part IV, line 22 | 0. | | | |
| 3 | Grants and other assistance to governments, | 1 | | į | |
| | organizations, and individuals outside the | 0. | | | |
| | U.S. See Part IV, lines 15 and 16 | 0. | | | |
| 4 - | Benefits paid to or for members | 0. | | | |
| 5 | Compensation of current officers, directors, | 164,551. | 164,551. | İ | |
| | trustees, and key employees | 104,331. | 104,331. | | |
| 5 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | 0.1 | | | |
| 7 | Other salaries and wages | 1,067,296. | 1,067,296. | | |
| 3 | Pension plan contributions (include section 401(k) | | =,00.,000 | | ······································ |
| • | and section 403(b) employer contributions) | 145,837. | 145,837. | | |
| • | Other employee benefits | 218,387. | 218,387. | | |
| , | Payroll taxes | 91,728. | 91,728. | | |
| , | Fees for services (non-employees) | . = | | | |
| | Management | 0. | | | |
| | Legal | 54,264. | 54,264. | | |
| | Accounting | 47,859. | 47,859. | | |
| | Lobbying | 0. | | | |
| | Professional fundraising services See Part IV, line 17 | 0. | | | |
| | Investment management fees | 0. | | | - |
| | Other | 0. | | | |
| 2 | Advertising and promotion | 39,882. | 39,882. | | |
| 3 | Office expenses | 55,753. | 55,753. | | |
| ļ | Information technology | 0. | | | |
| , | Royalties | 0. | | | |
| ; | Occupancy | 0. | | | + |
| 7 | Travel | 0. | | | |
| 3 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | 0. | | | |
| • | Conferences, conventions, and meetings | 38,501. | 38,501. | | |
|) | Interest | 542,127. | 542,127. | | |
| ı | Payments to affiliates | 0. | | | |
| ? | Depreciation, depletion, and amortization | 724,383. | 724,383. | | |
| , | Insurance | 0. | | | |
| | Other expenses Itemize expenses not | | | | |
| | covered above (Expenses grouped together | | 1 | | |
| | and labeled miscellaneous may not exceed | | 1 | | |
| | 5% of total expenses shown on line 25 below) | | | | |
| а | COST OF PURCHASED POWER | 4,604,903. | 4,604,903. | | |
| b | PLANT MAINTENANCE | 715,005. | 715,005. | | |
| - | CONSUMER ACCOUNTS | 126,353. | 126,353. | | |
| _ | EDUCATION AND TRAINING | 49,095. | 49,095. | | |
| e | CAPITALIZED LABOR & BENEFITS | -347,636. | -347,636. | | |
| f | All other expenses | 352,430. | 352,430. | | |
| | Total functional expenses Add lines 1 through 24f | 8,690,718. | 8,690,718. | | |
| i | 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 | | | | . — |
| Ā 1 0 | fundraising solicitation | | | | Form 990 (|

| _ | rt X | | | | , age 11 |
|---------------------------|------|---|--------------------------|----------------|--------------------|
| L | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | 639,249. | 1 | 234,407. |
| | 2 | Savings and temporary cash investments | 601,942. | 2 | 618,082. |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | 571,243. | 4 | 595,082. |
| | 5 | Receivables from current and former officers, directors, trustees, key | | | |
| | ļ | employees, and highest compensated employees Complete Part II of | | | |
| | | Schedule L | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section | | | |
| | _ | 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete | | | |
| | | Part II of Schedule L | | 6 | |
| şţ | 7 | Notes and loans receivable, net | 194,415. | 7 | 133,761. |
| Assets | 8 | Inventories for sale or use | 763,947. | 8 | 549,783. |
| ⋖ | 9 | Prepaid expenses and deferred charges | 63,566. | 9 | 64,426. |
| | | Land, buildings, and equipment cost or 10a 24,449,488. | | • | |
| | '' | other basis Complete Part VI of Schedule D | | | |
| | ١ , | Less accumulated depreciation | 14,266,448. | 100 | 16,498,122. |
| | | Investments - publicly traded securities | | 11 | |
| | 11 | · • | 373,478. | 12 | 398,599. |
| | 12 | Investments - other securities See Part IV, line 11 | 3/3/4/0. | 13 | |
| | 13 | Investments - program-related See Part IV, line 11 | 737. | 14 | 633. |
| | 14 | Intangible assets | 4,622,334. | 15 | 3,127,492. |
| | 15 | Other assets See Part IV, line 11 | 22,097,359. | 16 | 22,220,387. |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 943,459. | 17 | 946,146. |
| | 17 | Accounts payable and accrued expenses | 343,433. | 18 | 340,140. |
| | 18 | Grants payable | | 19 | |
| | 19 | Deferred revenue | | 1 1 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| es | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | 21 | |
| Liabilities | 22 | Payables to current and former officers, directors, trustees, key | | | |
| jab | | employees, highest compensated employees, and disqualified | | | |
| | | persons Complete Part II of Schedule L | 11 077 200 | 22 | 11 000 000 |
| | 23 | Secured mortgages and notes payable to unrelated third parties ATCH.5. | 11,277,392. | 23 | 11,099,068. |
| | 24 | Unsecured notes and loans payable to unrelated third parties | 074 606 | 24 | 1 000 104 |
| | 25 | Other liabilities Complete Part X of Schedule D | 974,696. | 25 | 1,006,194. |
| | 26 | Total liabilities. Add lines 17 through 25 | 13,195,547. | 26 | 13,051,408. |
| es | | Organizations that follow SFAS 117, check here complete lines 27 through 29, and lines 33 and 34. | | | |
| | 27 | Unrestricted net assets | | 27 | |
| ale | 28 | Temporarily restricted net assets | | 28 | |
| <u>Б</u> | 29 | Permanently restricted net assets | | 29 | |
| Net Assets or Fund Baland | | Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. | | | |
| S O | 30 | Capital stock or trust principal, or current funds | | 30 | |
| set | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| AS | 32 | Retained earnings, endowment, accumulated income, or other funds | 8,901,812. | 32 | 9,168,979. |
| <u>e</u> | 33 | Total net assets or fund balances | 8,901,812. | 33 | 9,168,979. |
| Z | 34 | Total liabilities and net assets/fund balances | 22,097,359. | 34 | 22,220,387. |
| | 134 | Total habilities and het assets/fund balafices | | 1 54 | - 000 |

Form **990** (2009)

| Form | n 990 (2009) | | Pa | ge 12 | |
|------|--|------|---------|--------------|--|
| Pa | rt XI Financial Statements and Reporting | | | | |
| | | | Yes | No | |
| 1 | Accounting method used to prepare the Form 990 Cash X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in | İ | | | |
| | Schedule O | ŀ | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | <u></u> | X | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | Х | | |
| C | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of | | | | |
| • | the audit, review, or compilation of its financial statements and selection of an independent accountant? | | | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in | | | | |
| | Schedule O |] | 1 | } | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were | | 1 | | |
| | issued on a consolidated basis, separate basis, or both | | | | |
| | Separate basis X Consolidated basis Both consolidated and separate basis | 1 | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | | | | |
| | the Single Audit Act and OMB Circular A-133? | 3a | | X | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the | | | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | | <u> </u> | |
| | | Form | 990 | (2009) | |

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

CHARITON VALLEY ELECTRIC COOPERATIVE 42-0625814 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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. Complete if the organization answered "Yes" to 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 pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 8/17/06 2d d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, 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. 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 relating to these items

| Par | t III — Organizations Maintaini | ng Colle | ections o | of Art, Histo | rical Tre | asure | es, o | r Other Similar | Assets(c | ontinue | ed) | |
|------|---|--------------|-------------|---|---------------------|---------------|---------------|---------------------------------------|-------------|-------------|-------|-------------------|
| • | House the assessment and a security of | | | | | - £ 4b | 6-11- | 45-4 | 6 | | | |
| 3 | Using the organization's acquisition, | | ion, and o | uner records, | cneck any | or the | 10110 | wing that are a sig | nilicant u | se or its | | |
| _ | collection items (check all that apply | , | | | 7 | | -b | | | | | |
| a | Public exhibition | | | d - | - 4 | | cnan | ge programs | | | | |
| b | Scholarly research | | | e |] Othe | ·r | | | | | | |
| C | Preservation for future gen | | مممناهمالم | and avalous b | anie Alamie Sie | . | | | | | | |
| 4 | Provide a description of the organiza | ition's c | ollections | and explain r | iow they to | ırtner i | ine oi | rganization's exem | pt purpos | e in | | |
| | Part XIV | andini ti | | donations of | art histori | aal åra | | o or other amulas | | | | |
| 5 | During the year, did the organization | | | | | | | | _ | ٦,, | _ | ٦ |
| | assets to be sold to raise funds rathe | | | | | <u> </u> | | | | Yes | | No |
| Par | Escrow and Custodial A IV, line 9, or reported an | | | | | zation | ans | wered "Yes" to I | -orm 990 |), Part | | |
| 1a | Is the organization an agent, trustee | , custo d | ian or oth | er intermediai | ry for contr | bution | ns or | other assets not | | | | |
| | included on Form 990, Part X? | | | | | | | | [| Yes | |] No |
| b | If "Yes," explain the arrangement in | Part XI V | and com | plete the follo | wing table | | | | | | | |
| | | | | | | | | A | mount | | | |
| C | Beginning balance | | | | | | 1c | | | | | |
| d | Additions during the year | | | | | | 1d | | | | | |
| е | Distributions during the year | | | | | | $\overline{}$ | | | | | |
| f | Ending balance | | | | | | | | | | | |
| | Did the organization include an amor | | | Part X, line 2 | 17 | | | | <u>L</u> | Yes | L_ | No |
| | If "Yes," explain the arrangement in | | | | | | | | | | | |
| Par | t V Endowment Funds. Com | | | | | | | | | | | |
| | _ , , , | (a) Cum | ent Year | (b) Pnor yea | ar (C) | Two ye | ars ba | ck (d) Three yea | irs back | (e) Four | years | back |
| 1a | Beginning of year balance | | | ~~ - · · · · · · · · · · · · · · · · · · | | | | | | | | |
| | Contributions | | | , | | | | | | | | |
| С | Net investment earnings, gains, | | | | | | | | | | | |
| | and losses | . | | | | | | | | | | |
| | Grants or scholarships | | | <u>-</u> | | | | | | | | |
| е | Other expenditures for facilities . | | | | • | | | | İ | | | İ |
| | and programs | | | · | | | | <u>.</u> | | | | \longrightarrow |
| | Administrative expenses | | | | | | | | | | | |
| _ | End of year balance | | | | | | | | | | | |
| 2 | Provide the estimated percentage of | - | ar end bala | | | | | | | | | |
| | Board designated or quasi-endowme | | | % | | | | | | | | |
| | Permanent endowment | % | | | | | | | | | | |
| | | % | | | | | | | | | | |
| Ja | Are there endowment funds not in th | e pos s | ession of | tne organizati | on that are | e neia | and a | administered for th | е | <u></u> | . 1 | |
| | organization by | | | | | | | | | | es | No |
| | (i) unrelated organizations | | | | | | • • • | | • • • • | 3a(i) | | |
| h | (ii) related organizations | | | | | | | | • • • • | 3a(ii) | | |
| _ | If "Yes" to 3a(ii), are the related orga | | | | | | • • • | | | 3b | | |
| 4 | Describe in Part XIV the intended us tVI Investments - Land, Buil | | | | | | + 🗸 | luno 10 | | | | |
| Far | | umys, a | | | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| | Description of investment | | | or other basis estment) | (b) Cost basis (| | | (c) Accumulated depreciation | (a |) Book valu | ie | |
| 1a | Land | | | 7,596. | | - | | | | | 7,5 | 96. |
| b | Buildings | | | | 22,46 | 59,15 | 50. | 6,788,744. | | 15,680 | 0,40 | 06. |
| С | Leasehold improvements | | | | | | | | | | | |
| d | Equipment | | | | 1,83 | 39,46 | 52. | 1,076,803. | | 76 | 2,6 | 59. |
| _ е | Other | <u></u> | | | 13 | 33,28 | 30. | 85,819 | | 4 | 7,4 | 61. |
| Tota | I. Add lines 1a through 1e (Column | (d) must | equal For | m 990, Part X | (, column (| B), line | e 10(| c)) | | 16,498 | 3,12 | 22. |
| | | | | | | | | | Schedu | le D (Form | 990) | 2009 |

| Part VII | Investments - Other Securities. See F | orm 990, Part X, line | : 12 | |
|-----------------|--|---------------------------------------|---|---------------------------------------|
| | (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuatio Cost or end-of-year marke | |
| Financial d | lerivatives | | | |
| Closely-he | Id equity interests | | | |
| | | | | |
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| | | | | |
| | n (b) must equal Form 990, Part X, col (B) line 12) | <u></u> | | |
| Part VIII | Investments - Program Related. See F | orm 990, Part X, line | <u> 13. </u> | |
| | (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year marke | n t value |
| | | | | |
| | | | | |
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| | | | | |
| - | · · · · · · · · · · · · · · · · · · · | | · | · |
| Total (Colum | n (b) must equal Form 990, Part X, col. (B) line 13.) | | · | |
| Part IX | Other Assets. See Form 990, Part X, III | !i ne 15 | | |
| | | Description | | (b) Book value |
| CONSTRU | CTION WORK IN PROGRESS | Beschpiten | | 108,421. |
| | GE CAPITAL ALLOCATIONS | | | 2,921,932. |
| | D CHARGES | | | 97,139. |
| INVESTM | ENTS- LAND | | | <u> </u> |
| | | | | |
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| | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | |
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| | | | | |
| | | | | - |
| Total (Colum | n (b) must equal Form 990, Part X, col (B) line 15) | | | 3,127,492. |
| Part X | Other Liabilities. See Form 990, Part X | | | |
| 1. | (a) Description of liability | (b) Amount | | ; |
| Federal inc | · · · · · · · · · · · · · · · · · · · | (4), 1110211 | | |
| | BILLINGS | 908,411. | | |
| | R DEPOSITS | 97,783. | | |
| | | | | |
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| | ······································ | | | |
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| | | | | |
| Total (Colum | n (b) must equal Form 990, Part X, col (B) line 25) | 1,006,194. | | |
| - 3-2- (Oolulli | - (-) oquari omi ooo, i ait A, ooi (b) iiie 20) | | | |

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XIV Supplemental Information (continued)

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CHARITON VALLEY ELECTRIC COOPERATIVE

Employer identification number

42-0625814

ATTACHMENT 1

MEMBERS

PART VI, SECTION A, LINE 6

CVEC'S ARTICLES OF INCORPORATION, ARTICLE VII OUTLINES MEMBERSHIP IN THE COOPERATIVE. MEMBERS AGREE TO PURCHASE ELECTRIC ENERGY AND COMPLY WITH THE ARTICLES AND BYLAWS OF THE COOP. A MEMBERSHIP CERTIFICATE IS ISSUED UPON BOARD APPROVAL TO EACH NEW MEMBER OR TO JOINT MEMBERS. THERE IS CURRENTLY NO MEMBERSHIP FEE.

ELECTION OF BOARD

PART VI, SECTION A, LINE 7A

CVEC'S ARTICLES OF INCORPORATION ARTICLE IX OUTLINES THE ELECTION

PROCEDURES. CVEC'S 11 MEMBER BOARD OF DIRECTORS IS DIVIDED INTO 5

DISTRICTS. MEMBERS VOTE FOR ELIGIBLE CANDIDATES BY MAIL-IN BALLOT OR

SECRET BALLOT AT THE ANNUAL MEETING OF MEMBERS HELD IN SEPTEMBER.

REVIEW OF 990

PART VI, SECTION B, LINE 11

THE PROCESS INCLUDED COMPLETION OF THE FORM 990 BY INDEPENDENT AUDITORS.

THE REVIEW WAS THEN PLACED AS AN ITEM ON THE BOARD MEETING AGENDA AND

PRESENTED BY THE AUDITORS. DISCUSSION, CORRECTIONS AND ADDITIONS, AND

FINALLY APPROVAL BY THE BOARD FOLLOWED AFTER THE PRESENTATION.

CEO SALARY APPROVAL

PART VI, SECTION B, LINE 15A

BOARD PRESIDENT REQUESTED SALARY COMPARABILITY DATA AND THE GENERAL

Name of the organization

CHARITON VALLEY ELECTRIC COOPERATIVE

Employer identification number

42-0625814

ATTACHMENT 1 (CONT'D)

MANAGER PROVIDED THE REQUESTED INFORMATION. FULL BOARD OF DIRECTORS

CONDUCTED A PERFORMANCE REVIEW AND DISCUSSED SALARY CONSIDERATIONS. FULL

BOARD OF DIRECTORS AUTHORIZED THE ANNUAL SALARY INCREASE.

AVAILABILITY OF COOP INFORMATION

PART VI, SECTION C, LINE 19

CVEC'S GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST. THE CONFLICT OF INTEREST POLICY IS PROVIDED ANNUALLY TO DIRECTORS AND EMPLOYEES.

FINANCIAL STATEMENTS ARE AVAILABLE UPON MEMBER REQUEST AND INCORPORATED INTO THE ANNUAL REPORT AND MADE AVAILABLE TO EACH VOTING MEMBER PRIOR TO THE ANNUAL MEETING.

CONFLICT OF INTEREST

PART VI SECTION B LINE 12C

THE ORGANIZATION MONITORS AND ENFORCES THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS. A SIGNED DISCLOSURE STATEMENT IS REQUIRED TO BE COMPLETED BY BOTH DIRECTORS AND EMPLOYEES LISTING ANY CONFLICTS THAT MAY HAVE ARISEN.

DECISIONS OF THE BOARD

PART VI, SECTION A LINE 7B

THE COOPERATIVE MAY NOT SELL, MORTGAGE, LEASE OR OTHERWISE DISPOSE OF OR ENCUMBER ALL OR ANY SUBSTANTIAL PORTION OF PROPERTY UNLESS AUTHORIZED AT A MEETING OF MEMBERS THEREOF BY THE AFFIRMATIVE VOTE OF NOT LESS THAN TWO-THIRDS OF ALL OF THE MEMBERS OF THE COOPERATIVE.

| Name of the organization | | | Employer identification | number |
|------------------------------|-------------|----------------|-------------------------|----------|
| CHARITON VALLEY ELECTRIC COC | PERATIVE | | 42-0625814 | |
| | | | ATTACHMENT 2 | |
| FORM 990, PART VIII - INVEST | MENT INCOME | | | |
| | (A) | (B) | (C) | (D) |
| | TOTAL | RELATED OR | UNRELATED | EXCLUDED |
| DESCRIPTION | REVENUE | EXEMPT REVENUE | BUSINESS REV. | REVENUE |
| INTEREST INCOME | 41,008 | | | 41,008 |
| TOTALS | 41 008 | | | 41 008 |

ATTACHMENT 3

FORM 990, PART X - NOTES AND LOANS RECEIVABLE

BORROWER:

HAWKEYE MOLDING LOAN RLF #1

ORIGINAL AMOUNT:

90,000.

MATURITY DATE:

05/14/2008

BORROWER:

SUPERIOR MACHINE

ORIGINAL AMOUNT:

300,000.

MATURITY DATE:

04/01/2008

Schedule O (Form 990) 2009

Page 2

Name of the organization

CHARITON VALLEY ELECTRIC COOPERATIVE

Employer identification number

ATTACHMENT 3 (CONT'D)

42-0625814

BORROWER:

HAWKEYE MOLDING LOAN RLF #2

ORIGINAL AMOUNT:

120,000.

MATURITY DATE:

12/01/2010

BEGINNING BALANCE DUE

ENDING BALANCE DUE

51,073. 26,079.

BORROWER:

RELCO LOAN RLF

ORIGINAL AMOUNT:

120,000.

MATURITY DATE:

10/01/2010

BEGINNING BALANCE DUE

46,981.

ENDING BALANCE DUE

21,808.

| '• Schedule O (Form 990) 2009 | Page 2 |
|---|---|
| Name of the organization CHARITON VALLEY ELECTRIC COOPERATIVE | Employer identification number 42-0625814 |
| BORROWER: IA ALUMINUM RLF ORIGINAL AMOUNT: 120,000. MATURITY DATE: 06/01/2016 | TTACHMENT 3 (CONT'D) |
| BEGINNING BALANCE DUE | |
| TOTAL BEGINNING NOTES AND LOANS RECEIVABLE | 194,415. |
| TOTAL ENDING NOTES AND LOANS RECEIVABLES | 133,761. |
| FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES | ACHMENT 4 |
| DESCRIPTION | ENDING BOOK VALUE |
| PREPAID INSURANCE | 39,567. |
| OTHER PREPAIDS | 24,859. |
| TOTALS | 64,426. |
| FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE LENDER: RURAL UTILITIES SERVICE ORIGINAL AMOUNT: 11,032,000. | TTACHMENT 5 |
| BEGINNING BALANCE DUE | |
| LENDER: NATIONAL RURAL UTILITIES CFC LOAN #1 ORIGINAL AMOUNT: 2,941,579. BEGINNING BALANCE DUE | |

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE

11,099,068.

SCHEDULE R (Form 990)

Part 1

Related Organizations and Unrelated Partnerships

▼ See separate instructions.

' A

OMB No 1545-0047

 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36 or 37.
 ► Attach to Form 990. CHARITON VALLEY ELECTRIC COOPERATIVE Internal Revenue Service Name of the organization Department of the Treasury

Employer identification number 42-0625814

(f) Direct controlling entity (f) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (e)
Public chanty status
(if section 501(c)(3)) (e) End-of-year assets (d) Exempt Code section (d) Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33) (c) Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (b) Pnmary activity (b) Pnmary activity (a) Name, address, and EIN of related organization (a) Name, address, and EIN of disregarded entity PartII

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

Schedule R (Form 990) 2009

CHARITON

42-0625814

Schedule R (Form 990) 2009

Page 2 (j)
General or
managing
partner? Yes No (1)
Code V-UBI
amount in box 20 of
Schedule K-1
(Form 1065) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Yes No (h) Deprepartement abocatoms? (g) Share of end-of-year assets (f) Share of total income (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections
512-514) (d)
(d)
(Direct controlling entity (c) Legal domicile (state or foreign (b) Pnmary activity (a) Name, address, and EIN of related organization Part III Part IV

| IV, line 34 because it had one of more related organizations treated as a corporation of trust during the tax year) | d organizations in | eated as a corp | JORATION OF TRUST | anting the tax | year) | | |
|--|-------------------------|---|-------------------------------------|---|------------------------------|---------------------------------------|--------------------------------|
| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp. S corp. or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership |
| CHARITON VALLEY SERVICES COMPANY421509588 | INVESTMENTS | IA | CHARITON VALLEY C CORP | c corp | 0 | 16,549 | 100 0000 |
| | | | | | | |] |
| | | | | | | | |
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Schedule R (Form 990) 2009

CHARITON

Page 3

| Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.) | line 34, 35, or 36.) | |
|---|---|-----------|
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | Yes | oN Se |
| | irts II–IV | |
| a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity | 13 | × |
| b Gift, grant, or capital contribution to other organization(s) | 1b | × |
| c Gift grant or capital contribution from other organization(s) | 10 | × |
| | | × |
| | | > |
| e Loans or loan guarantees by other organization(s) | | \ |
| | • | > |
| f Sale of assets to other organization(s) | | < - |
| g Purchase of assets from other organization(s) | 19 | × |
| h Exchange of assets | 1h | × |
| | 1- | × |
| | | |
| i lease of facilities equipment or other assets from other organization/s) | | × |
| | | × |
| k Performance of services of membership of fundralising solicitations for other organization(s) | | : : - |
| I Performance of services or membership or fundraising solicitations by other organization(s) | | × |
| m Sharing of facilities, equipment, mailing lists, or other assets | × H | <u>×</u> |
| | × ut | × |
| | | - |
| | a popular and a | > |
| • Kelmbursement paid to other organization for expenses | 01 | : : - |
| p Reimbursement paid by other organization for expenses | dt | × |
| | | . (|
| q Other transfer of cash or property to other organization(s) | 19 | × |
| r Other transfer of cash or property from other organization(s) | 11. | × |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relative | covered relationships and transaction thresholds | |
| (6) | (p) (q) | |
| Name of other organization | Ation Amount | |
| | | |
| (1) | | |
| | | |
| (2) | | |
| | | |
| (3) | | |
| | | |
| (4) | | |
| | | |
| (5) | | |
| | | |
| (9) | | |
| | Schedule R (Form 990) 2009 | 0) 2009 |
| • | | |

JSA

Schedule R (Form 990) 2009

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

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

| o gross overlact, that was not a charled dynamication occurrences regarding excussion to certain investigate surps | alon tol certain lives | ווויבווו אמו ווובואו | 20 | | | | |
|--|-------------------------|--------------------------------------|--|--------------------------------|-----------------------------------|---------------------------------|-------------------------------|
| (a) Name address, and EIN of entry | (b) Primary activity | (c) Legal domicile (state or foreign | (d) Are all partners section 501(c)(3) | (e) Share of end-of-year | (f) Disproportionate allocations? | (g) Code V-UBI amount in box 20 | (h) General or managing |
| | | | Ves No | | No. | | 20% |
| | | | | | | | 3 |
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CHARITON

42-0625814

2009

CHARITON VALLEY ELECTRIC COOPERATIVE

| Participation Participatio | Description of Property | | | | | | | ATTACHMENT 6 | | | | | | | • |
|--|--|------------------------------|--------------------------------|---------|----------------------------------|-------|------------------------|--|---------------------------------------|---------|----------|--------|---|--|------------------------------|
| Particular Par | DEPRECIATION | | | | | | | | | | | | | | |
| Part | Asset description | Date placed in service | Unadjusted Cost or basis | | 179 exp reduction in basis | Basis | Basis for depreciation | Beginning Accumulated depreciation | Ending Accumulated depreciation | | └ | ACRS C | | urrent-year 179 expense | Current-year depreciation |
| 10 10 10 10 10 10 10 10 | DISTRIBUTION PLANT | 01/01/1980 | 21506004 | 100 000 | | | 21506004 | 6,184,915 | | | | | | | 165,058 |
| | OFFICE FURNITURE | 01/01/1980 | 133, 280 | 100 000 | | | 133,280 | 17,673 | | SL | 10 000 | | | | 8,146 |
| | TRANS EQUIP | 01/01/1980 | 123, 564 | 100.000 | | | 123,564 | 62, 629 | | SL | 10 000 | | | | 11,927 |
| 0.101/1580 0.1 | STORES EQUIP | 01/01/1980 | 6,518 | 100 000 | | | 6,518 | 5,452 | | SL | 27 000 | | | | 250 |
| 1,000 1,00 | SHOP EQUIP | 01/01/1980 | 122, 194 | 100 000 | | | 122, 194. | 50,944 | | SL | 25 000 | | | | |
| 1 | LAB EQUIP | 01/01/1980 | 35,100 | 100 000 | | | 35,100 | 17,074 | | SL | 14 000 | | | | 2,238 |
| 1 | TOOLS & WORK EQUIP | 01/01/1980 | 1,461,026 | 100 000 | | | 1,461,026 | 754,950 | | SL | 000 6 | | | | 92,231 |
| 1,000 0,001/1360 0,000 | COMM EQUIP | 01/01/1980 | 51,145 | 100 000 | | | 51,145 | 46,414 | | SL | 000 01 | | | | 981 |
| 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, | STRUCTURES & IMPR | 01/01/1980 | 963, 146 | 100 000 | | | 963, 146 | 443, 631 | | SL | 50 000 | | | | -4,860 |
| 1,010,1080 0,546 DO DOD DOD DOD DOD DOD DOD DOD DOD | | 01/01/1980 | 17,527 | 100 000 | | | 17,527 | 7,433 | Ī. | SL | 18 000 | | | | 1,580 |
| Section Sect | N MAIN PROPERTY | 01/01/1980 | 7,596 | 100 000 | | | | | | | | | _ | | |
| 15 15 15 15 15 15 15 15 | | | | | | | | | | | | | | | |
| 15.00 15.0 | | | | | | | | | | | | | | | |
| 1.0 | | | | | | | | | | | | | | | |
| 1 1 1 1 1 1 1 1 1 1 | | | | | | | | | | | | | | | |
| 10 10 10 10 10 10 10 10 | | | | | | | | | | | | | | | |
| SSEIS 10000 22,388 10000 22,388 10,448 14,925 51 5 000 4, | | | | | | | | | | | | | i | | |
| Seels Seel | | | | | | | | | | | | | | | |
| 1.6 | loss Retired Assets | | | | | | | | | | | | - | | |
| See 10,000 22,388 10,000 22,388 10,448 14,925 5,000 4, | 0.0000000000000000000000000000000000000 | | 0011010 | | | | | | | | | | L | | |
| 1. | Listed Property | | 001/2442 | | | | 74419504 | | 1,936,441 | | | | - | | 280, 296 |
| 10, 448 10, 10, 100 10, 148 10, 448 10, 448 10, 448 14, 925 10, 448 14, 925 10, 448 14, 925 10, 448 14, 925 10, 448 14, 925 10, 448 14, 925 10, 448 14, 925 10, 448 14, 925 10, 448 14, 925 12, 984 14, 925 12, 984 14, 925 12, 984 18, 925 18, 925 12, 928 | The state of the s | 2000, 10, 00 | | , 2000 | | | 4 | | | | | | - | | |
| 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, | MAYOEK VERICLE | 007/10/60 | 77, 388 | 00000 | | | 22, 388 | 10,448 | 14, 925 | N. S.I. | | | + | | 4,477 |
| 10,446 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 14,925 10,448 16,329 10,448 16,329 10,448 16,329 10,448 10,425 10,448 14,925 10,448 1 | | | | | | | | | | | | | + | | |
| TION Date Cost Date D | Less Retired Assets | | | | | | | | | | | | | | |
| TION Ending service basis Cost basis Accumulated amortization or 10.001/1980 Life Life Life Corrent-year amortization amortization or 10.001/1980 Life Life Life Current-year amortization amortization or 10.001/1980 Life Life Life Life Current-year amortization amortization or 10.001/1980 Life | Subtotals | | 22,388 | | | | 22,388 | 10,448 | 14,925 | | | | | | 4,477 |
| Date Cost | TOTALS | • | 24449488 | | | | 24441892 | ٠. | 7,951,366 | | | | | | 284,773 |
| Date Cost | AMORTIZATION | | | | | | | | | | | | | | |
| IT 01/01/1980 18,359 17,622 17,728 A 25 000 10,022 17,728 17,622 17,728 | Asset description | Date placed in service | Cost or basis | | | | | Accumulated amortization | Ending Accumulated amortization | | | | | | Current-year amortization |
| 18,359 | ELECTRIC PLANT | 01/01/1980 | 18,359 | | | | | 17,622 | 17,728 | | 000 | | | J | 106 |
| 18,359 | | | | | | | | | | | | | | <u> </u> | |
| 18,359 | | | | | | | | | | | | | | | |
| 18,359 | | | | | | | | | | | | | | LI | |
| 17,728 | | | | | | | | | | | | | | | |
| | TOTALS | | 18,359 | | | | | 17,622 | 17,728 | | | | | | 106 |

ATTACHMENT 6

2009

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| | i | |

| CHARITON VALLEY ELECTRIC COOPERATIVE | OPERATIVE | | | | | 2009 | | | | | | | 42-0625814 |
|--------------------------------------|------------------------------|--------------------------------|----------|----------------------------------|-------|------------------------|--|-----------------------|----------|------------|--------|--------------------------------|--------------|
| Description of Property | | | | | | | | | | | | | • |
| DEPRECIATION | | | | | | | | | | | | | |
| Asset description | Date placed in service | Unadjusted Cost or basis | Bus % | 179 exp reduction in basis | Basis | Basis for depreciation | Beginning Accumulated depreciation | Accumulated Me- | Conv | ACRS class | RS CRS | Current-year 179 expense | Current-year |
| DISTRIBUTION PLANT | 01/01/1980 | | lol | | | 21506004. | 6,184,915 | 6,349,973 | <u> </u> | T- | | | 558.747 |
| OFFICE FURNITURE | 01/01/1980 | 133,280 | 100 000 | | | 133,280 | 577, 673 | | oī | 000 0 | _ | | 12,202 |
| TRANS EQUIP | 01/01/1980 | 123,564 | 100 000 | | | 123,564 | 62, 659 | | 10 | 000 0 | | | 11,927 |
| STORES EQUIP | 01/01/1980 | 6,518 | 100 000 | | | 6,518 | 5,452 | 5,702. St | 74 | 000 75 | | | 250 |
| SHOP EQUIP | 01/01/1980 | 122, 194 | 100 000 | | | 122,194 | 50,944 | | 25. | 5.000 | _ | | 2,940. |
| LAB EQUIP | 01/01/1980 | 35, 100 | 100 000 | | | 35,100 | 17,074 | | 14 | 4 000 | | | 2,238 |
| TOOLS & WORK EQUIP | 01/01/1980 | 1,461,026 | 100 000 | | | 1,461,026 | 754,950 | | 6 | 000 6 | | | 109,990 |
| COMM EQUIP | 01/01/1980 | 51,145 | 100 000 | | | 51,145 | 46,414 | 47,200 SL | o | 000 0 | | | 786 |
| STRUCTURES & IMPR | 01/01/1980 | 963,146 | 100 000 | | | 963,146 | 443,631 | | 90 000 | 000 | | | 19,140 |
| MISC EQUIP | 01/01/1980 | 17,527 | 100 000 | | | 17,527 | 7,433 | 9,013. SL | 000 81 | 000 | | | 1,580 |
| N. MAIN PROPERTY | 01/01/1980 | 7,596 | 100 000 | | | | | | | | _ | | |
| | | | | | | | | | | | _ | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | _ | L | _ | | |
| | | | | | | | | | - | - | | | |
| | | | | | | | | | | _ | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | _ | | | |
| Less Retired Assets | | | | | | | | | | | | | |
| Subtotals | | 24427100 | | | | 24419504 | 7, 656, 145 | 7,936,441 | | | | | 719,800 |
| 6.525 | | | | | | | | | | | } | | |
| MANAGER VEHICLE | 09/01/2006 | 22,388 | 100 000 | | | 22,388 | 10, 448 | 14,925 SL | 5 | 000 | _ | | 4,477 |
| | | | | | | | | | | | | | |
| Loss Detroit | | | | | | | | | | - | | | |
| Subtotale | | | | | | | | | | | | | |
| TOTAL 0 | | 22,388 | | | | 22,388. | 10,448. | 14,925 | | | | | 4,477 |
| AMORTIZATION | | 24449488 | | | | 24441892 | 7, 666, 593 | 7, 951, 366 | | | | | 724,277. |
| Accordance to the second | Date placed in | Cost | | | | | Accumulated | Ending Accumulated | L | - | | | Current-year |
| LONG Deep lesso | Selvice | Dasis | | | | | amortization | amortization Code | - Life | | | ! . | amortization |
| ELECTRIC PLANT | 01/01/1980 | 18,359 | | | | | 17, 622 | 17,728 A | 25 000 | | | , I. | 106 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| TOTALS | | 010 | | | | | | | | | | _ ! | |
| *Assets Retired | | | | | | | 17,622 | 17,728 | | | | | 106 |
| ic. | | | | | | | | | | | | | |

Assets Retired JSA 9x9024 1 000

CHARITON

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 67

Name(s) shown on return

➤ See separate instructions.

Identifying number

| С | HARITON VALLEY ELECT | TRIC COOPER | ATIVE | | | | | 42-0625814 |
|------|--|--|---|-------------|---------------------------------------|-----------------|------------|----------------------------|
| | ness or activity to which this form relates | | | | · · · · · · · · · · · · · · · · · · · | | | |
| G | ENERAL DEPRECIATION | | | | | | | |
| Pa | rt I Election To Expense Ce | rtain Property U | nder Section | on 179 | | | | |
| | Note: If you have any list | | | | you compl | ete Part I | | |
| 1 | Maximum amount. See the instruction | s for a higher limit for | certain busine | sses | | | 1 | |
| 2 | Total cost of section 179 property place | ed in service (see inst | tructions) | | | | 2 | |
| 3 | Threshold cost of section 179 property | before reduction in li | mitation (see,ii | nstructions |) | | 3 | |
| 4 | Reduction in limitation. Subtract line 3 | from line 2 If zero or | less, enter -0- | | | | 4 | |
| 5 | Dollar limitation for tax year Subtract line 4 from lin separately, see instructions | e 1 if zero or less enter -0- | If marned filing | | | | 5 | |
| 6 | (a) Description (| | | (b) Cost (b | usiness use onl | y) (c) Elec | ted cost | |
| | | | | | | | | 1 |
| | | | | | | | | 1 |
| 7 | Listed property. Enter the amount from | line 29 | | | 7 | | | 7 |
| 8 | Total elected cost of section 179 prope | | | | | | 8 | |
| 9 | Tentative deduction Enter the smalle | r of line 5 or line 8 | | | | | 9 | |
| 10 | Carryover of disallowed deduction from | | | | | | 10 | |
| 11 | Business income limitation Enter th | e smaller of busines | s income (no | | | | tions) 11 | |
| 12 | Section 179 expense deduction Add li | nes 9 and 10, but do | not enter more | than line | 11 | | 12 | |
| 13 | Carryover of disallowed deduction to 2 | 010 Add lines 9 and | 10, less line 12 | 2 | | | | <u> </u> |
| Note | e: Do not use Part II or Part III below for | r listed property Inste | ad, use Part V | | | | | - |
| Pa | t Special Depreciation A | llowance and Ot | her Deprec | iation (E | Oo not includ | le listed prope | rty) (See | nstructions) |
| 14 | Special depreciation allowance for | or qualified property | (other tha | n listed | property) pl | aced in servi | ce | |
| | during the tax year (see instructions) | | • | | | | 14 | |
| 15 | Property subject to section 168(f)(1) el | | | | | | 15 | |
| 16 | 0.1 1 1 1 1 1 1 1 1 1 1 | | | | | | ••• | 280,296 |
| Pa | t III MACRS Depreciation (I | | | | | | | |
| | | | Sect | tion A | | | | |
| 17 | MACRS deductions for assets placed i | in service in tax vears | beginning bef | ore 2009 | | | 17 | |
| 18 | If you are electing to group any a | • | - | | | | | |
| | asset accounts, check here | The second secon | - | • | | - 1 | \neg | |
| | Section B - Assets | | | | | | iation Sys | tem |
| | (a) Classification of property | (b) Month and year placed in service | (c) Basis for d (business/inve only - see ins | stment use | (d) Recovery penod | (e) Convention | (f) Method | (g) Depreciation deduction |
| 19a | 3-year property | | | | | | | |
| b | 5-year property | | | | | | | |
| С | 7-year property | | | | | | | |
| d | 10-year property | 1 | | | | | | |
| е | 15-year property | | | | | | | |
| f | 20-year property | | | | | | | |
| | 25-year property | | | | 25 yrs | | S/L | |
| h | Residential rental | | | • • | 27 5 yrs | MM | S/L | |
| | property | | | | 27 5 yrs | MM | S/L | |
| i | Nonresidential real | | | | 39 yrs | MM | S/L | |
| | property | | | | | MM | S/L | |
| | Section C - Assets PI | aced in Service Du | ring 2009 Ta | x Year U | sing the Alte | ernative Depre | ciation Sy | stem |
| 20a | Class life | | | | T | | S/L | |
| b | 12-year | 1 | | | 12 yrs | | S/L | |
| | 40-year | | | | 40 yrs | MM | S/L | |
| | rt IV Summary (See instruction | ons.) | l | | | | J | |
| 21 | Listed property Enter amount from line | | | | | _ | 21 | 4,477 |
| 22 | Total. Add amounts from line 12, lines | | s 19 and 20 m | column (| a), and line 21 | Enter here | | 1 |
| | and on the appropriate lines of your re | | | | | | 22 | 284,773 |
| 23 | For assets shown above and placed in | service during the cu | rrent year, ento | er the | | | | |
| | portion of the basis attributable to secti | on 263A costs | | | 23 | | | I |

Form 4562 (2009) Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and Part V property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles) Yes X No 24b If "Yes," is the evidence written? 24a Do you have evidence to support the business/investment use claimed? X No Yes (e) (a) (b) **(f)** (d) Business/ Basis for depreciation Type of property (list Elected section Date placed in Recovery Method/ Depregation Cost or other basis investment use (business/investment penod 179 cost vehicles first) service Convention deduction percentage use only) Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 Property used more than 50% in a qualified business use SEE LISTED PROPERTY DETAIL Property used 50% or less in a qualified business use S/I -S/I -S/L -Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1. Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole propnetor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (b) (f) (c) (e) business/investment miles driven Vehicle 1 Vehide 3 Vehicle 2 Vehicle 4 Vehicle 5 Vehicle 6 during the year (do not include commuting 31 Total commuting miles driven during the year . . . personal (noncommuting) Total miles driven during the year Add lines 30 through 32 Yes No Yes No Yes No No Yes No Was the vehicle available for personal use dunng off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Is another vehicle available for personal Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing. Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) No Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by X your employees? Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? Do you treat all use of vehicles by employees as personal use? Х Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Х 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)...... Х Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI Amortization (b) (C) (d) Amortization Date amortization Description of costs Amortizable amount Code section period or Amortization for this year

106

106

percentage

43

Amortization of costs that begins during your 2009 tax year (see instructions)

Total. Add amounts in column (f) See the instructions for where to report

43 Amortization of costs that began before your 2009 tax year

44

9X2310 1 000