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DLN: 93493207009001

# Form **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)

2010

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010 Γ

B Check if applicable Address change			C Name of organization Intermountain Rural Electric Asso		D Employer identification number 84-0235244						
┌ Nar		_	Doing Business As			E Telephone					
Init		_	Name to a set of the office P.O. have		I D /						
Ter			Number and street (or P O box 5496 North Highway 85	if mail is not delivered to street address)	Room/suite	(303) 68					
☐ Am		return n pending	City or town, state or country, a Sedalia, CO 80135	nd ZIP + 4		<b>G</b> Gloss lece	pts \$ 246,507,046				
			<b>F</b> Name and address of Patrick Mooney	principal officer	H(a) Is this	a group return for aff	iliates? Yes V No				
			2142 S Milwaukee St Denver, CO 80210		H(b) Are all	affiliates include	d?				
			Deliver, CO 80210		If"N	o," attach a lıs	st (see instructions)				
I Ta	x-exen	npt status	501(c)(3) 501(c) ( 12	) ◀ (insert no )	H(c) Grou	ıp exemption i	number 🕨				
J W	ebsit	e: 🕨 www	w ıntermountaın-rea com								
			Corporation Trust Assoc	ation Other ►	<b>L</b> Year of fo	rmation 1938	M State of legal domicile CO				
Pd	rt I		mary								
ደ		The Ass		ssion or most significant activities i Rural Electric Distribution Cooperative ;	e to provide the	best possible	electric service to its				
Governance											
Ē ē											
505	2	Check th	nis box 🛏 if the organization	discontinued its operations or dispose	d of more than 2	5% of its net	assets				
	3	Number	of voting members of the gov	erning body (Part VI, line 1a)		3	7				
<u>&amp;</u>	4	Number	of independent voting membe	rs of the governing body (Part VI, line 1	lb)	. 4	7				
Activities &	5	Total nui	mber of individuals employed	ın calendar year 2010 (Part V, line 2a)		5	220				
Ş	6	Total nui	mber of volunteers (estimate	ıf necessary)		6					
-	7a	Total uni	related business revenue fror	n Part VIII, column (C), line 12		7a	0				
	ь	Net unre	lated business taxable incom	ne from Form 990-T, line 34		7b					
					Prio	r Year	Current Year				
a.	8		butions and grants (Part VIII		•		0				
an Lie	9 Program service revenue (Part VIII, line 2g		am service revenue (Part VIII	[, line 2g)	-	202,627,065	246,330,850				
<b>В</b> эуе	10			ımn (A), lines 3, 4, and 7d)	•	175,683	163,556				
<u> </u>	11 Other revenue (Part VIII, column (						1,366				
	12		_	11 (must equal Part VIII, column (A), l	line	202,802,748	246,495,772				
	13			art IX, column (A), lines 1-3)			0				
	14	Benefi	ts paid to or for members (Pa			0					
88	15	Salarıe 10)	es, other compensation, empl	oyee benefits (Part IX, column (A), line	s 5-	17,347,099	17,622,751				
Expenses	16a	•	sional fundraising fees (Part	IX, column (A), line 11e)		. ,	0				
÷.	ь	Total fu	indraising expenses (Part IX, column	ı (D). line 25) ▶ <sup>0</sup>							
ш	17		- , , , , ,	A), lines 11a-11d, 11f-24f)	-	182,645,450	198,435,698				
	18			must equal Part IX, column (A), line 25		199,992,549	216,058,449				
	19	Reven	ue less expenses Subtract li	ne 18 from line 12		2,810,199	30,437,323				
Net Assets or Fund Balances				_	g of Current 'ear	End of Year					
989 1986 1986	20	Total	assets (Part X, line 16)			922,065,106	970,661,091				
38	21	Totall	liabilities (Part X, line 26) .			788,013,912	805,000,362				
	22			act line 21 from line 20		134,051,194	165,660,729				
	t II	_	ature Block								
	edge	and belie		mined this return, including accompanying ete. Declaration of preparer (other than off							
		****									
Sign		Signa	Signature of officer Date								
Here			ck Mooney General Manager								
		Туре	or print name and title								
		Print/Type preparer's		Preparer's signature	Date	Check if self- employed •	PTIN				
Paid	}	Firm's nar		I		employed F	Firm's EIN				
Prepa	arer	Fırm's add	dress •				THITS LIN F				
Use (							Phone no •				
Mayt	he IR	S discus	ss this return with the prepare	er shown above? (see instructions)			┌Yes ┌No				

Form	990 (2010)				Page <b>2</b>
Par		<b>ent of Program Service A</b> Schedule O contains a response			
1	Briefly describe	the organization's mission			
	Association was e owest possible co		istribution Cooperative to provide	the best possible electric s	service to its members at
2	the prior Form 9	90 or 990-EZ?		nich were not listed on	Yes ▼ No
		e these new services on Schedu			
3	services?		significant changes in how it condu		Yes V No
	If "Yes," describ	e these changes on Schedule O			
4	Section 501(c)(	3) and 501(c)(4) organizations a	each of the organization's three lar and section 4947(a)(1) trusts are venue, if any, for each program ser	required to report the amou	
4a	(Code	) (Expenses \$ 210	5,058,449 including grants of \$	) (Revenue \$	246,495,772 )
	The Association dis	stributed electricity to 139,494 member	consumers in 10 Colorado counties		
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other program	services (Describe in Schedule	0)		
	(Expenses \$	ıncludıng	grants of \$	) (Revenue \$	)
4e	Total program s	service expenses►\$ 21	5,058,449		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		Νο
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	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Νο
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Νο
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νο
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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Par	t IV Checklist of Required Schedules (continued)			
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 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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		No
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		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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		Νο
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V . . . .

	Check it Schedule O contains a response to any question in this Part V	•	-1	
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	<b>1b</b> 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	163	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Νο
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		Νo
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for 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		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Νo
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		Νo
7	Organizations that may receive deductible contributions under section 170(c).	_		
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	file Form 8282?	7c		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
f	contract?	7e 7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7: 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		Νo
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νo
10 a	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		Νo
b	Enter the amount of reserves the organization is required to maintain by the states			
r	In which the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand			
	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		Νo

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

Check if Schedule O contains a response to any question in this Part VI	v question in this Part VI
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Se	ction A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year							
b	Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		N o				
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		No				
4	supervision of officers, directors or trustees, or key employees to a management company or other person?  4 Did the organization make any significant changes to its governing documents since the prior Form 990 was							
5	filed?  Did the organization become aware during the year of a significant diversion of the organization's assets? .	<b>4</b> 5		No No				
6	Does the organization have members or stockholders?	6	Yes					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes					
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo				
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)							
			Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo				
Ь	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		No				
11a	11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a		No				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise							
c	to conflicts?	12b		No				
•	describe in Schedule O how this is done	12c	Yes					
13	Does the organization have a written whistleblower policy?	13	Yes					
14	4 Does the organization have a written document retention and destruction policy?							
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	Yes					
b	Other officers or key employees of the organization	15b	Yes					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes					
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 organization's exempt status with respect to such arrangements?	16b		N o				
Se	ection C. Disclosure	_		· ·				
17	List the States with which a copy of this Form 990 is required to be filed <b>▶</b>							
18	Section 6104 requires an organization to make its Form 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 interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨

Anne Thomas CFO 5496 N Highway 85 Sedalia, CO 801358618 (303) 688-3100

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

Check if Schedule O contains a response to any question in this Part VII . . . . . . . . . . . . . .

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(B) Average hours		tion (	che		II		( <b>D)</b> Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	rrom the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
40 00					х		180,346	0	55,231
40 00					х		233,666	0	31,109
3 00	х		х				31,868	0	0
40 00			х				476,140	0	34,279
5 00	х		х				21,442	0	0
40 00			х				409,434	0	103,268
0 00					х		148,225	0	90,520
4 00	х						8,100	0	0
40 00				х			183,706	0	42,989
40 00				х			314,881	0	32,243
6 00	х						34,898	0	0
2 00	х		х				28,898	0	0
3 00	х		х				28,298	0	0
40 00					х		159,856	0	38,338
3 00	х						30,698	0	0
40 00			х				151,655	0	46,454
	A verage hours per week (describe hours for related organizations in Schedule O) 40 00 40 00 500 40 00 40 00 40 00 40 00 60 00 2 00 3 00 40 00 3 00 40 00 3 00 40 00 3 00 40 00 3 00	A verage hours per week (describe hours for related organizations in Schedule O)  40 00  40 00  40 00  5 00  X  40 00  40 00  40 00  X  40 00  X	A verage hours per week (describe hours for related organizations in Schedule O)  40 00  40 00  40 00  5 00  40 00  40 00  5 00  X  40 00  40 00  A 00  A 00  X  40 00  X	A verage hours per week (describe hours for related organizations in Schedule O)  40 00  40 00  3 00  X X X X 40 00  40 00  40 00  40 00  X 50 00  X 60 00  X 7 00  X 8 00  X 8 00  X 9 00	A verage hours per week (describe hours for related organizations in Schedule O)  40 00  40 00  3 00  X  40 00  X  4	Average hours per week (describe hours for related organizations in Schedule O)  40 00  40 00  40 00  X  4	Average hours per week (describe hours for related organizations in Schedule O)  40 00  40 00  3 00  X  40 00  X  A  A  A  A  A  A  A  A  A  A  A  A	A verage hours per week (describe hours for related organizations in Schedule O)	A verage   hours   per   week (describe   hours   for related organizations in Schedule O)

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

<b>(A)</b> Name and Title	(B) Average hours		(tion that a			II		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation		(F) Estima mount o	ited fother
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		from related organizations (W- 2/1099- MISC)	10	compens from t rganizati relati organiza	:he on and ed
(17) Amanda Zımmerman Cons/Info Svcs Mgr	40 00					х		149,147		0		35,59
1b Sub-Total						· ·	•					
c Total from continuation sheets d Total (add lines 1b and 1c) .							<b>&gt;</b>	2,591,258			ı	510,024
2 Total number of individuals (incl \$100,000 in reportable compens	uding but not lim	nited to	thos	e lıs				, ,	n			
									F		Yes	No
3 Did the organization list any form on line 1a? If "Yes," complete Sch									ated employee	3		Νο
4 For any individual listed on line 1												

			162	110
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	V	
		4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

#### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B)	(C)			
Utilix Corporation P O Box 97009 Kent, WA 980649709	Description of services  Utility cable servic	2,077,222			
Stanley Consultants Inc 8000 S Chester Street Suite 500 Centennial, CO 80112	Engineering Consult	2,439,762			
Five Point Partners LLC 2526 Mt Vernon Rd Ste B348 Atlanta, GA 30338	Info Tech Consulting	1,785,238			
Colorado Powerine Inc 5401 N Peterson Rd Sedalia, CO 80112	Utility Construction	14,386,862			
Cayenta 1 Antares Dr Suite 400 Ottawa, ON K2E 8C4 CA	Info Tech Consulting	2,387,857			
2 Total number of independent contractors (including but not limited to those listed above) who received more than					

Part \		2010)					Pag	e <b>9</b>
Part		Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
14 -								514
Contributions, gifts, grants and other similar amounts		Federated campaigns	1a					
,gr mol		Membership dues						
ifts ≖a		Fundraising events						
s, g mik		Related organizations Government grants (contributions)						
iion rsi	_							l
ibu The		All other contributions, gifts, grants similar amounts not included above	e					
agr.	g	Noncash contributions included in l	ines 1a-1f \$					
ᅙ	h	Total. Add lines 1a-1f			0			
лне	3-	Datus and a Country Country		Business Code				
evel	b	Patronage Capital Credits Other Service Revenues		221000 221000	4,331,466 524,354			
Program Service Revenue	С	Joint Pole Revenue		900002	882,292			882,29
er vi (	d	Distrib of Electricity		221000	240 487 134	240,487,134		
ۍ ار	е	All Other Program Service		221000	105,604			
୍ଦି । ଆଧାର	f	All other program service re	venue					
Š	g	Total. Add lines 2a-2f			246,330,850			
	3	Investment income (includir	ng dividends, interest					
		and other similar amounts)			163,556			163,55
	4 5	Income from investment of tax-ex Royalties		}	0			
	•	Royalties	(ı) Real	(II) Personal				
	6a	Gross Rents	12,640					
	ь	Less rental expenses	11,274					
	С	Rental income or (loss)	1,366					
	d	Net rental income or (loss)			1,366			1,36
	7-	Gross amount	(ı) Securities	(II) O ther				
	7 a	from sales of assets other						
	h	than inventory Less cost or						
	В	other basis and sales expenses						
	С	Gain or (loss)						
		Net gain or (loss)			0			
ne	8a	Gross income from fundraisi (not including	ng events					
Other Revenue		\$	location.					
æ		of contributions reported on See Part IV, line 18						
her			а					
ŏ		Less direct expenses . Net income or (loss) from fu	_		0			
			activities See Part IV, line 19 . a					
	ь	Less direct expenses .						
		Net income or (loss) from ga			0			
	10a	Gross sales of inventory, les returns and allowances	SS					
			a					
		Less cost of goods sold .			2			
	С	Net income or (loss) from sa Miscellaneous Revenue	nies of inventory F	Business Code	0			
	11a			Dasilless Code				
	b	-						
	C							
	d	All other revenue	•					
	е	Total. Add lines 11a-11d			0			
			F		0			
	12	Total revenue. See Instructi	ana 🛌					

# Part IX Statement of Functional Expenses

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

А	Section $501(c)(3)$ and $501(c)(4)$ organizations must ll other organizations must complete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> 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, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,591,258			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	7,852,372			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,204,717			
9	Other employee benefits	2,829,272			
10	Payroll taxes	2,145,132			
а	Fees for services (non-employees) Management	0			
b	Legal	138,579			
c	Accounting	58,468			
d	Lobbying	126,403			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	47,381			
12	Advertising and promotion	0			
13	Office expenses	829,856			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	103,460			
20	Interest	34,550,512			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	21,259,770			
23 24	Insurance	628,895			
_	line 25, column (A) amount, list line 24f expenses on Schedule O)	7 746 400			
_		7,316,133			
b	Maintenance Expenses Gen/Purchased Power	5,761,889 117,605,784			
c d	Customer Accounts & Information	3,568,248			
a e		4,139,712			
f	All other expenses	2,300,608			
25	Total functional expenses. Add lines 1 through 24f		0	0	0
26	Joint costs. Check here ► [ If following	216,058,449	U	"	<u> </u>
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			911,921	1	1,922,243
	2	Savings and temporary cash investments			1,388,229	2	5,437,683
	3	Pledges and grants receivable, net				3	0
	4	Accounts receivable, net		16,929,204	4	10,834,412	
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, ke	y employees, and			
		Schedule L				5	0
	6	Receivables from other disqualified persons (as defined under persons described in section $4958(c)(3)(B)$ , and contributing a sponsoring organizations of section $501(c)(9)$ voluntary emploorganizations (see instructions)	mplo	yers, and			
şţê		Schedule L				6	0
Assets	7	Notes and loans receivable, net				7	0
⋖	8	Inventories for sale or use			3,682,859	8	2,853,247
	9	Prepaid expenses and deferred charges			16,472,735	9	15,146,061
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	1,074,188,198			
	ь	Less accumulated depreciation	10Ь	155,545,253	868,686,831	<b>10</b> c	918,642,945
	11	Investments—publicly traded securities	48,435	11	53,964		
	12	Investments—other securities See Part IV , line 11 $$ . $$ .		12	0		
	13	Investments—program-related See Part IV, line 11		13,904,909	13	15,736,332	
	14	Intangible assets			14	0	
	15	Other assets See Part IV, line 11		39,983	15	34,204	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .			922,065,106	16	970,661,091
	17	Accounts payable and accrued expenses .			16,536,437	17	15,459,986
	18	Grants payable				18	
	19	Deferred revenue				19	
(6)	20	Tax-exempt bond liabilities				20	
<u>o</u>	21	Escrow or custodial account liability Complete Part IV of Schedu	ıle D			21	
abilities	22	Payables to current and former officers, directors, trustees, ke employees, highest compensated employees, and disqualified	у				
Lia		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .	•	741,853,692	23	755,272,268
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			29,623,783	25	34,268,108
	26	<b>Total liabilities.</b> Add lines 17 through 25			788,013,912	26	805,000,362
Fund Balances		Organizations that follow SFAS 117, check here ► and come through 29, and lines 33 and 34.	plet e	lines 27			
lan	27	Unrestricted net assets				27	
Ba	28	Temporarily restricted net assets				28	
pu	29	Permanently restricted net assets				29	
Fu		Organizations that do not follow SFAS 117, check here 🕨 🔽 a	nd co	mplet e			
oľ		lines 30 t hrough 34.					
35	30	Capital stock or trust principal, or current funds			040.405	30	000.005
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			619,195		623,695
	32	Retained earnings, endowment, accumulated income, or other f	unds		133,431,999	<del>                                     </del>	165,037,034
Net	33	Total net assets or fund balances			134,051,194		165,660,729
	34	Total liabilities and net assets/fund balances			922,065,106	34	970,661,091

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		246.4	195,77
2	Total expenses (must equal Part IX, column (A), line 25)	2			058,44
3	Revenue less expenses Subtract line 2 from line 1	3		30,4	137,32
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		134,0	051,19
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1,1	172,21
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		165,6	560,72
Par	TEXII Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII		<u>.                                      </u>	୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 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		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3а	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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		Νo

DLN: 93493207009001

#### OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

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

♣ Se If the	ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Pai ction 501(c)(4), (5), or (6) organizations Complete Part III	Part II-B	Do	not co	mplete Part		
	me of the organization Emountain Rural Electric Association	mploye	rıde	ntıfıca	tion numbe	er	
1116		4-0235	244	ļ			
Par	t I-A Complete if the organization is exempt under section 501(c) or is a se	ection	52	7 org	janizatio	n.	
1	Provide a description of the organization's direct and indirect political campaign activities in Part	IV					
2	Political expenditures	١		\$			
3	V olunteer hours						
Par	t I-B Complete if the organization is exempt under section 501(c)(3).						
1	Enter the amount of any excise tax incurred by the organization under section 4955			\$ <u>_</u>			
2	Enter the amount of any excise tax incurred by organization managers under section 4955		۰	\$ _			
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				☐ Yes	厂	No
4a	Was a correction made?				☐ Yes	厂	No
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ection	50	1(c)	(3).		
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	ivities	<b>-</b>	\$			
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	27					
	exempt funtion activities		F	\$		11,	,500
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b	<b>-</b>	\$		11,	,500
4	Did the filing organization file Form 1120-POL for this year?				✓ Yes	Γi	No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organization made payments. For each organization listed, enter the amount paid from the filing or amount of political contributions received that were promptly and directly delivered to a separate separate segregated fund or a political action committee (PAC). If additional space is needed, pro-	ganızatı politica	on's org	funds anızat	Also ente	rthe	

(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter - 0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-
(1) Senate Majority Fund	1420 W Canal Court Suite Littleton, CO 80120	14-1858703	4,500	
(2) COLORADO LEADERSHIP FUND	P O Box 238 Denver, CO 80201	84-1664434	7,000	

Sc	hedule C (Form 990 or 990-EZ) 2010						Page <b>2</b>
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c	)(3) and fi	led Form 5768	
A B	Check   If the filing organization belongs to a Check   If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a			)		<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)						
c	c Total lobbying expenditures (add lines 1a and 1b)						
d	d Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	e following table	ın both				
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa				
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	,000 plus 15% of the	excess over \$500,00	0			
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

art II-B	Complete if the organization is exempt under section 501(c)(3) and has	NOT filed Fo	rm 5768
	(election under section 501(h)).		

		1.	a)		(b)	
		Yes	No		\ moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?			_		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	** THE A. Computate if the every instinction is every mention down as attem FA4/a//4/ as attem t					n
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c	)(5), (	or se		
	501(c)(6).	501(c	)(5), « 		Yes	No
1	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?	501(c	)(5), ( 	1		
1 2	<b>501(c)(6).</b> Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c	)(5), ( 	1 2		
1 2 3	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
1 2 3	<b>501(c)(6).</b> Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c	)(5), (	1 2 3	Yes	No
1 2 3	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I	501(c	)(5), (	1 2 3	Yes	No
1 2 3 Par	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	501(c II-A, 1 2a 2b	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	501(c II-A, 1 2a 2b 2c	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2a 2b 2c 3	)(5), (	1 2 3	Yes	No

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1 Also, complete this part for any additional information

Ident if ier Return Reference | Explanation efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493207009001

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

**Supplemental Financial Statements** 

Open to Public

Inspection Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization Intermountain Rural Electric Association 84-0235244 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 Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No 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 may 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 Part II 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 importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-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 Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount 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 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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 (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

PaTi	<b>Till</b> Organizations Maintaining Co						•				ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing	that a	ire a significa	ant u	se of its collecti	on	
а	Public exhibition		d	Γ	Loan	orex	change prog	rams			
b	Scholarly research		e	$\Gamma$	Other	r					
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain hov	w the	y furthe	er the	organızatıor	n's ex	empt purpose ıı	า	
5	During the year, did the organization solicit of	or receive donations	s of ar	t, hıs	torıcal	treas	ures or othe	rsım	ıılar		
	assets to be sold to raise funds rather than t								<u> </u>	Yes	☐ No
Par	Part IV, line 9, or reported an an						on answere	d "Y	es" to Form 9 <sup>1</sup>	90, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					utions	or other ass	ets r		Yes	☐ No
b	If "Yes," explain the arrangement in Part XI\	/ and complete the	follow	/ıng ta	able		Г				
							-		Am	ount	
с	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance							1f	_		
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?						Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV										
Pa	rt V Endowment Funds. Complete	f the organizatio (a)Current Year		)Prior \			Form 990, wo Years Back			(a)Eour V	'ears Back
1a	Beginning of year balance	(a) Curient Tear	(0	JETIOI	i Cai	(6)	WO TEATS DACK	(u)	Tillee Tears back	(e)i oui i	ears back
b	Contributions										
c	Investment earnings or losses							+			
d	Grants or scholarships							+			
e	Other expenditures for facilities							<u> </u>			
_	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and	admınıstere	d for	the		
	organization by									Yes	No
	(i) unrelated organizations					•		•	3a(i	-	<del>                                     </del>
	(ii) related organizations							•	3a(i	- 1	<del>                                     </del>
ь 4	If "Yes" to 3a(II), are the related organizatio Describe in Part XIV the intended uses of th					•		•	3b		
	t VI Investments—Land, Buildings					1 00	Part X line	10			
		o, una Equipme			Cost or c		(b)Cost or of		(c) Accumulated		
	Description of investment				(investr		basis (othe		depreciation	(d) Bo	ook value
	Land		•				8,97	8,936		1	8,978,936
	Buildings		•				12,960	6,739	3,804,591	1	9,162,148
	Leasehold improvements		•							1	
d	Equipment		•				1,052,44		151,944,626	90	00,501,582
	Other		•	<u> </u>				3,685		+	279
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colui	mn (B)	), line	10(c).)						18,642,945
									Schedule D	(Form 9	990) 2010

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
<ul><li>(a) Description of security or category (including name of security)</li></ul>	( <b>b)</b> Book value		d of valuation f-year market value
(1)Financial derivatives			,
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		12	
Part VIII Investments—Program Related. See			d of valuation
(a) Description of investment type	(b) Book value		f-year market value
(1) Investments in Associated Coop Org	15,736,332		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, In			/L\ D = -ll
(a) Descrip	LION		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
Regulatory Liabilities	2,390,216		
POST RETIREMENT BENEFITS	8,427,632		
POST RETIREMENT BENEFITS OTHER CURRENT & ACCRUED LIABILITIES			
	8,427,632		
OTHER CURRENT & ACCRUED LIABILITIES	8,427,632 11,668,607		
OTHER CURRENT & ACCRUED LIABILITIES DEFERRED CREDITS	8,427,632 11,668,607 7,035,698		
OTHER CURRENT & ACCRUED LIABILITIES  DEFERRED CREDITS  CUSTOMER DEPOSITS	8,427,632 11,668,607 7,035,698 326,171		
OTHER CURRENT & ACCRUED LIABILITIES  DEFERRED CREDITS  CUSTOMER DEPOSITS	8,427,632 11,668,607 7,035,698 326,171		
OTHER CURRENT & ACCRUED LIABILITIES  DEFERRED CREDITS  CUSTOMER DEPOSITS	8,427,632 11,668,607 7,035,698 326,171		
OTHER CURRENT & ACCRUED LIABILITIES  DEFERRED CREDITS  CUSTOMER DEPOSITS	8,427,632 11,668,607 7,035,698 326,171		
OTHER CURRENT & ACCRUED LIABILITIES  DEFERRED CREDITS  CUSTOMER DEPOSITS	8,427,632 11,668,607 7,035,698 326,171		

Part XI, Line 8

	Ident if ier	Return Reference			Explanati	ion	
Part		Part XII, lines 2d and 4b, and Part XI					
	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,						
5 Dar	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)						
с -	Add lines 4a and 4b		4c				
Ь	Other (Describe in Part XIV) 4b						
a	·	ded on Form 990, Part VIII, line 7b		4a		4	
4		, Part IX, line 25, but not on line 1:					
3			•			3	
e	Add lines <b>2a</b> through <b>2d</b>					2e	
d	Other (Describe in Part XIV)		•	2d		4	
c	Other losses			2c		4	
b	Prior year adjustments			2b		4	
а	Donated services and use of fa	cilities		2a		4	
2		not on Form 990, Part IX, line 25					
1	Total expenses and losses per statements	audited financial				1	
		penses per Audited Financia	Stat	ement	s With Expenses	per	Return
5		<b>4c.</b> (This should equal Form 990, Par				5	
c	Add lines 4a and 4b					4c	
b	Other (Describe in Part XIV)			4b		]	
а	Investment expenses not inclu	ded on Form 990, Part VIII, line 7b	.	4a			
4		, Part VIII, line 12, but not on line 1					
3	Subtract line <b>2e</b> from line <b>1</b> .					3	
e	Add lines 2a through 2d .					2e	
d	Other (Describe in Part XIV)		.	2d			
c	Recoveries of prior year grants		.	2c			
ь	Donated services and use of fa-		.	2b			
a	Net unrealized gains on investi		.	2a			
2	· -	not on Form 990, Part VIII, line 12	•	- •	· · ·		
1		support per audited financial stateme				1	tui II
		er financial statements Combine line venue per Audited Financial			: With Pevenue n		turn
10	Total adjustments (net) Add line					10	
9	,					9	
8	Other (Describe in Part XIV)					8	
7	Prior period adjustments					7	
6	Investment expenses	nees				6	
5	Donated services and use of faci		5				
4	Net unrealized gains (losses) on		4				
3	Excess or (deficit) for the year S					3	
2	Total expenses (Form 990, Part					2	
1	Total revenue (Form 990, Part V					1	
Par	Reconciliation of Ch	ange in Net Assets from Fori	ท 990	to Fii	ianciai Statemer	าธร	

Part XI, Line 8 Other Changes in

Net Assets or Fund Balances

Other Comprehensive Income \$1496233 Increased Membership \$4500 PATRONAGE CAPITAL REFUND \$ -

221277 UNCLAIMED CAPITAL CREDITS \$ -107244

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DLN: 93493207009001

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Inte	mountain Rural Electric Association						
Do	t I Questions Regarding Compensation			84-0235244			
Ра	t I Questions Regarding Compensation					Yes	Νο
1a	Check the appropriate box(es) if the organization provi	ıdad ə	ny of the following to or for a person l	isted in Form		165	NO
IG	990, Part VII, Section A, line 1a Complete Part III t						
	First-class or charter travel	Γ	Housing allowance or residence for	personal use			
	Travel for companions	$\sqcap$	Payments for business use of perso	onal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiat	ion fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chau	ffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organism termbursement or provision of all the expenses describ			•	1b	Yes	
2	Did the organization require substantiation prior to rei						
	officers, directors, trustees, and the CEO/Executive D	Jirect	or, regarding the items checked in lir	ie la?	2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all tha			2			
	Compensation committee		Written employment contract				
	Independent compensation consultant	Ī					
	Form 990 of other organizations	<u> </u>	Approval by the board or compensa	ition committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art V I	I, Section A, line 1a with respect to t	he filing organization			
а	Receive a severance payment or change-of-control pa	aymer	nt from the organization or a related o	organization?	4a		Νo
Ь	Participate in, or receive payment from, a supplement	al nor	nqualified retirement plan?		4b	Yes	
c	Participate in, or receive payment from, an equity-bas	sed co	ompensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	vide th	he applicable amounts for each item i	n Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	t com	plete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	ne 1a	, did the organization pay or accrue a	ny			
а	The organization?				5a		
b	Any related organization?				5b		
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue a	ny			
а	The organization?				6a		
b	Any related organization?				6b		
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, lipayments not described in lines 5 and 6? If "Yes," de			n-fixed	7		
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in F in Part III				8		

section 53 4958-6(c)?

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) William Schroeder Jr	(ı) (ıı)	134,435	18,100	27,811	28,784	26,447	235,577	
(2) Walter Jones	(ı) (ıı)	156,158	35,025	42,483	3,972	27,137	264,775	
(3) Stanley R Lewandowskı Jr	(1) (11)	308,000	120,100	48,040	4,900	29,379	510,419	
(4) Patrick Mooney	(ı) (ıı)	278,438	60,025	70,971	74,848	28,420	512,702	
(5) Michael Rheinberger	(ı) (ıı)	120,796	6,050	21,379	64,303	26,217	238,745	
(6) Konstantinos Lagos	(ı) (ıı)	134,436	30,100	19,170	17,231	25,758	226,695	
(7) John E Pope	(I) (II)	211,054	45,100	58,727	4,900	27,343	347,124	
(8) Edwin Jenks Jr	(ı) (ıı)	130,479	10,600	18,777	12,633	25,705	198,194	
(9) Anne Thomas	(ı) (ıı)	122,774	11,050	17,831	20,733	25,721	198,109	
(10) A manda Zımmerman	(ı) (ıı)	125,741	10,050	13,356	10,926	24,667	184,740	
( 11 )								
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								
1	•							l- 1 /F 000\ 2010

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	A dditional	Part I, Line 4b Stanley R Lewandowski, Jr Participant in a non-qualified annuity as a retirement plan \$1,528Patrick MooneyParticipant in a non-qualified annuity as a retirement plan \$16,500Walter JonesParticipant in a non-qualified annuity as a retirement plan \$16,500Walter JonesParticipant in a non-qualified annuity as a retirement plan \$16,500
Line 1a	· '	The Association provides upto \$300 toward dues of a wellness program as a taxable benefit available to employees Five of the above individuals are participating in this benefit

Schedule J (Form 990) 2010

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DLN: 93493207009001

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Attach to Form 990

Name of the organization Intermountain Rural Electric Association Employer identification number

84-0235244

Identifier	Return Reference	Explanation
	Form 990, Part VI, Line 16b - Gov, Mgt & Disc - Int in Joint Venture	The investment in Comanche III results in no receipt of revenue or profit from the plant. Rather, teh Association receives energy. The Association does not participate in joint ventures or similar arrangements with taxable entities with the expectation of receiving revenue or profits, therefore, no written policy or procedure is necessary.

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Line 16a - Gov, Mgt & Disc - Int in Joint Venture	he Association entered into a joint ow nership agreement for construction and operation of a 770 megaw att coal-fired electric power generation plant in Pueblo, Colorado known as Comanche III. The Association's total investment is about \$375,900,000 for their 25 333% ow nership interest. Public Service Company of Colorado is the operating agent of this plant. The parties share operating expenses and receive energy from the plant in proportion to their ow nership interest. Comanche III achieved commercial operation in July 2010.

ldentifier	Return Reference	Explanation
		All offices are under the common management of the Board of Directors, and subject to the same written policies and procedures governing the activites of the Association

ldentifier	Return Reference	Explanation
	, , ,	In addition to its Association Headquarters in Sedalia, the Association maintains three separately located District offices in Strasburg, Conifer, and Woodland Park, Colorado

ldentifier	Return Reference	Explanation
VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The Bylaw's of the Association and the Annual Report are available on the Association's web site at www intermountain-rea com Other governing documents, Board Minutes, Annual Financial Statements, Form 990, etc. are available to the public upon request at the Association's headquarters office

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	Compensation for management employees, including salaries and benefits, is evaluated by Human Resources personnel under the direction of the General Manager, using comparisons with industry standards, with other cooperatives, and in consideration of local employment and economic markets. The resulting compensation program recommendations are reviewed by the General Manager with the Board of Directors.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Officers, directors, and key employees are required to disclose any conflicts of interest as events or circumstances giving rise to a conflict occur. The General Manager reviews any potential conflicts that are brought to his attention and makes the determination for key employees. The Board of Directors reviews and makes determinations for the General Manager and at the director level. Restrictions on persons with a conflict generally result in removing the person from decision making authority concerning the conflict. It may include a director abstaining from vote on the related agenda item.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	The Form 990, including the related schedules, are completed internally by staff of the Association under the direction of the Chief Financial Officer, who in turn reviews the Governance, Management and Disclosure sections required by the Form 990 and presents a draft of the completed report to the General Manager. The return is then completed and filed

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 7a	Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	Each member of the Association shall be entitled to one vote and no more upon each matter submitted to a vote at a meeting of the members. The Association is divided into 7 districts, and each district is represented by one Board Member (Director). Board Members are elected by their respective district members to staggered four-year terms.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	The Association is comprised of approximately 139,500 members