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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)

OMB No 1545-0047

Department of the Treasury

2010 Open to Public Inspection

		The diganization may have to use a copy of this retain to satisfy state			,							
<u>A</u>	For the	2010 calendar year, or tax year beginning , 2010, and en	ding			, 20						
В	Check if	applicable C Name of organization Lane Electric Cooperative, Inc		¹⁰	Employ	er identification n	umber					
	Address	change Doing Business As				93-0209125						
	Name ch	nange Number and street (or P.O. box if mail is not delivered to street address) Room	Ε	Telepho	one number							
	Initial ret				541 484-1151							
$\overline{\Box}$	Terminat	0.1										
Ħ	Amende			G	Gross re	eceipts \$ 20.	490,121					
H							✓ No					
_	Applicati	on pending F Name and address of principal officer Frederick M. Crinklaw				ncluded? Yes	=					
		mpt status				list (see instruction						
÷		<u> </u>	─ ┤			_	-,					
<u></u>		e; > www.laneelectric.com		· · · · · · ·		n number	<u> </u>					
		organization	rmation	1939	M State	of legal domicile	OR					
٢	art I	Summary										
	1	Briefly describe the organization's mission or most significant activities: Pro	vide ele	ectricity to	approx	imately 10,152						
0		cooperative members										
a a	1											
Ě												
Governance	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 2	5% of its	net assets.								
<u>ن</u>	3	Number of voting members of the governing body (Part VI, line 1a)			3		7					
ŝ	4	Number of independent voting members of the governing body (Part VI, line 1	b) .		4		7					
Ĭ	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)			5		56					
Activities &	6	Total number of volunteers (estimate if necessary)			6		0					
⋖	7a	Total unrelated business revenue from Part VIII, column (C), line 12 V			7a		0					
	Ь	Net unrelated business taxable income from Form 990-IT, line 34	70		7b		0					
_	1 -	S MAY 0 2 2011	11 हो	Prior Year	-	Current Ye	ar					
	8	Contributions and grants (Part VIII, line 1h)										
Revenue	9	Program songo royanga (Part VIII Juna 2a)	sonuce revenue (Part VIII line 2g)									
ě		Investment income (Part VIII, column (A), lines 3, 4, and 7d COEN, UT	┝╤┼		044,110		90,516					
æ	10		╌╞═┵		57,612		352,516					
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)										
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		20,3	06,155	20,	451,521					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)			9,613	··	10,272					
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0							
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u> </u>	4	153,738	··	480,658					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0	- January	0					
Š	b	Total fundraising expenses (Part IX, column (D), line 25) ▶										
ú	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		19,2	294,255	19,	521,085					
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		19,7	757,606	20,	012,015					
	19	Revenue less expenses. Subtract line 18 from line 12		5	48,549		439,506					
5		1	Begin	ning of Curr	ent Year	End of Yea	ar					
85	20	Total assets (Part X, line 16)		51,1	15,799	52	172,593					
A88	21	Total liabilities (Part X, line 26)		30,2	236,546	30	902,451					
Net Assets o	22	Net assets or fund balances. Subtract line 21 from line 20			379,253		270,142					
	art II	Signature Block		<u>-</u>								
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules and si	atements	s and to the	hest of n	ny knowledge and	helief it is					
		t, and complete Declaration of preparer (other than efficer) is based on all information of which prep				., mombage and						
_												
Sig	nn	Signature of officer		I Date								
	ere	Frederick M Cranklaw, Gueral Manager		4/	126/11							
116	:1 C	Type or print name and title				100/11						
_			Date	 -								
Pa	aid	Print/Type preparer's name Preparer's signature	Date		Check [rf						
	epare	r			self-emp	pioyea						
	se Onl	1 =		Firm's	EIN ►							
		Firm's address		Phone	e no							
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)		<u> </u>	<u></u>		s 🗌 No					
For	r Paperv	work Reduction Act Notice, see the separate instructions.	t No 11	282Y		Form 9	90 (2010)					

Form 99	90 (2010)	Page Z
Part I	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	🗀
1	Briefly describe the organization's mission:	
	Provide electricity to approximately 10,152 cooperative members.	
		•
	Did the organization undertake any significant program services during the year which were not listed on the	
2		s 🛭 No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	-	s 🗹 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocothers, the total expenses, and revenue, if any, for each program service reported.	
	(Code) (Expenses \$including grants of \$) (Revenue \$	<u> </u>
70	Provided electric service to approximately 10,152 cooperative members through wholesale purchase of power, maintenance	/ : of
	transmission and distribution facilities as well as overall operation activities.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		••
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	Other program services (Describe in Schedule O.)	
-tu	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶	

Part	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A	1		✓
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi- endowments? If "Yes," complete Schedule D, Part V	10	-	1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	1	
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e	√	_
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	✓	
	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	_	1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	1
14 a b	Did the organization maintain an office, employees, or agents outside of the United States? 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, Parts I and IV	14a	_	1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	14b 15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a		20a		1
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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 1? If "Yes," complete Schedule I, Parts I and II	21		1
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	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	√	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√ _
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 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		/ _
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
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? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		1
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		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		1
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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
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	1	

Check it schedule Contains a response to any question in the Part V 18 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 59 1b 00 19 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 00 10 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garming (gambling) winnings to prace winners? 28 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a 56 58 Islaements, field of the calendary year ending with or within the year covered by this return 2a 56 59 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b 7 7 7 7 7 7 7 7 7	Part				
the Enter the number reported in Box 3 of Form 1096. Enter -0 - if not applicable. Did the organization comply will beskup withholding rules for reportable payments to vendors and reportable gamel glambing) winnings to prize winding rules for reportable payments of to vendors and reportable gamel glambing) winnings to prize winding rules for reportable payments. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2 statements, filed for the calendar year ending with or within the year covered by this return 2 statements, filed for the calendar year ending with or within the year covered by this return 2 statements, filed for the calendar year ending with or within the year covered by this return 2 statements, filed for the calendar year, did the organization the current of \$1,000 or more during the year? So that the organization have unrelated business gross income of \$1,000 or more during the year? So the organization have unrelated business gross income of \$1,000 or more during the year? A tany 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. ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? So Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If Yes' to line 5a of 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? If Yes' to line 5a of 5b, did the organization that the accounts of the state or organization shall were not tax deductible? Organizations shall have receive deductible contributions under section 170(c). Did the organization shall have receive deductible contributions under section 170(c). If Yes' to the organization notify the donor of the value of the goods or services provided? Did th		Check if Schedule O contains a response to any question in this Part V		 Vac	L No
b Enter the number of Forms W-26 included in line 1a. Enter -0 · find applicable. Del the organization comply with backup withholding rules for reportable payments to vendors and reportable garming (gambling) winnings to prize winners? 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 Statements, filed for the calendar year ending with or within the year covered by this return Note, if the sum of lines to and 2a is greater than 250, you may be required to e-file, (see instructions) If I ask a filed a Form 990. The time year? If *Time, *Promise an explanation in Schedule O 10 · 10 · 10 · 10 · 10 · 10 · 10 · 10	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	-		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners? 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 5 If all least one is reported on line 2a, did the organization lie all required federal employment tax returns? 5 If all least one is reported on line 2a, did the organization lie all required federal employment tax returns? 5 If when the did a form 990-T for this year? If "No." provide an explanation in Schedule O 5 If "Yes," has it filed a Form 990-T for this year? If "No." provide an explanation in Schedule O 5 A 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 accountry? 5 If "Yes," enter the name of the foreign country. See instructions for filing requirements for Form ID F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 D and any taxable party notify the organization that twas or is a party to a prohibited tax shelter transaction? 6 If "Yes," did the organization melude with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations shall may receive deductible contributions under section 170(c). 9 Did the organization shall exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8282? 10 If "Yes," indicate the number of Forms 8282 field during the year 10 Did the organization shall, exchange, or otherwise dispose of tangible personal property for which it was required to life Forms 8292. 11 If the organization received a contribution of cas, boats, sirplaces, or otherwise dispose of					
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, field for the calendar year androing with or within the year covered by this return 2 56 b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3c If "Yes," has if filed a Form 990-T for this yea?" if "No.", provide an explanation in Schedule O 3b A 1 any time during the year of the authority over, a financial account, in a foreign country. ► 3c 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. ► 3c Was the organization aparty to a prohibited tax shelter transaction, at any time during the tax year? 3c Did any taxable party notify the organization that tiwas or is a party to a prohibited tax shelter transaction? 3c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 3d V Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 3d Was the organization aparty to a prohibited tax shelter transaction? 4d V "Yes" to line 5a or 5b, did the organization file Form 8886-T? 4d Does the organization shelt was enabled grown and shelt with ever not tax deductible? 4d If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 4d Does the organization shelt with evers not tax deductible? 4d If "Yes" in did not organization shelt with evers on tax deductible? 4d Did the organization shelt may receive deductible contributions under section 170(c). 4d Did the organization shelt may receive deductible contributions under section 170(c). 4d Did the organization shelt is exchange, or otherwise dispose of tangelbe personal property for which it was required to life form 8886-T? 4d If "Yes," indicate the number of Forms 8282 filed during the year 4d Did the organ	C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
Statements, field for the calendar year ending with or within the year covered by this return 2 a 55 b of at least one is reported on line 2d, did the organization file all required federal employment tax returns? Note, if the sum of lines 1 and 2a is greater than 250, you may be required to e-file. (see instructions) of the organization have unrelated business gross income of 31,000 or more during the year? 1 if Yes, *has it filed a Form 990-T for this year? If Yo, *provide an explanation in Schedule O 335 b 1 if Yes, *has it filed a Form 990-T for this year? If Yo, *provide an explanation in Schedule O 335 b 1 if Yes, *provide and year of the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account, over, and account, over, and a financial account, over, and a financial account, over, and account, over, and a financial account		reportable gaming (gambling) winnings to prize winners?	1c	✓ _	Ĺ
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Note. If the sum of lines I a and 2 ais greater than 250, your may be required to e-file, (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 5 If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3 St. 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a timencial account in a foreign country (such as a bank account, securities account, or other financial accounts. 5 If "Yes," enter the name of the foreign country. ► 5 See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization file Form 808-17. 5 Dos she organization appray to a prohibited tax shelter transaction? 6 If "Yes" to line 5 aor 5b, did the organization file Form 808-17. 7 Dos she organization are vaniting greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Drainizations that may receive deductible contributions under section 170(c). 8 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? 8 If "Yes," indicate the number of Forms 8282 filed during the year 9 Did the organization sell, exchange, or otherwise dispose of tarigible personal property for which it was required to file Form 8282? 9 Did the organization sell, exchange, or otherwise dispose of tarigible personal benefit contract? 9 Did the organization sell, exchange, or otherwise dispose of tarigible personal benefit con					-
3a	b		2b	✓	
b if "Yes," has it flied a Form 990-T for this year? if "No," provide an explanation in Schedule O A flary 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). b if "Yes," enter the name of the foreign country, so we have a subject to the subject of the subject o	20			-	ا ا
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)? 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? 5 Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction? 6 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? 7 Organizations that may receive deductible contributions under section 170(c). 9 off "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 9 off the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 off the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 10 off the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 off the organization received a contribution of qualified intellectual property, diff he organization for equivations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations and any time during the year? 9 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations maintaining donor advised funds. 10 off the organization secret and advised funds and section 509(a)(3) supporting organizations. Enter: 11 off the organization maintaining donor advised fu				-	
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fi the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 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 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders. 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? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 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. Enter the amount of reserves the organization is required to maintain by the states in which the organization receive any payments for indoor tanning services during the tax year? Is a lite organization receive any payments for indoor tanning services during the tax year? Ital organization is Schedule O. Ital organization is Schedule	f		$\overline{}$		
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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? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 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 Gross income from members or shareholders. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 11a 19,930,661 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.). 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b 15 Section 501(c)(29) qualified nonprofit health insurance issuers. 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. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 14a V It a	h		7h		
organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? 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 Gross income from members or shareholders. 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? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. Section 501(c)(29) qualified nonprofit health insurance issuers. 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. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans C Enter the amount of reserves on hand Ital 13b Ital 19,930,661 Ital 19,	8				'
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12			-		
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	0		В		
b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12		The state of the s	92	-	- '
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	_		\rightarrow		\vdash
a Initiation fees and capital contributions included on Part VIII, line 12					
a Gross income from members or shareholders	а				
a Gross income from members or shareholders	b			:	1
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year					1
against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note. See the instructions for additional information the organization must report on Schedule O. 13b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b C Enter the amount of reserves on hand 13c Indicate the analysis of the organization receive any payments for indoor tanning services during the tax year? 13a Indicate the analysis of the organization receives any payments for indoor tanning services during the tax year? 13a Indicate the analysis of the organization receives any payments for indoor tanning services during the tax year? 14a Indicate the organization is licensed to report these payments? If "No," provide an explanation in Schedule O 14b Indicate the organization of the organization is serviced and the organization is licensed to receive any payments for indoor tanning services during the tax year? 14a Indicate the organization of the organization is serviced and the organization is licensed to receive any payments for indoor tanning services during the tax year?	_				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	IJ	1 559.461			·
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		12a		Ì
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?					
a Is the organization licensed to issue qualified health plans in more than one state?	13	· · · · · · · · · · · · · · · · · · ·			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	а		13a		
the organization is licensed to issue qualified health plans					
c Enter the amount of reserves on hand	b	the assessment as a because the serve smaller of traditional and			1
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a ✓ b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . 14b	_	100			1
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . 14b			46-		
					-
	<u> </u>	in res, has it lied a rotti /20 to report these payments? If No, provide all explanation in Schedule O.		990	(2010)

	90 (2010)			Page 6
Part	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change			
	O. See instructions. Check if Schedule O contains a response to any question in this Part VI			7
Secti	ion A. Governing Body and Management	<u> </u>	<u> </u>	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 7			
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		! •
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		√
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	✓	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Does the organization have members or stockholders?	6	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	✓	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		√
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		✓_
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
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	✓	
13	Does the organization have a written whistleblower policy?	13	✓	
14	Does the organization have a written document retention and destruction policy?	14		✓_
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b	√	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			_
1	with a taxable entity during the year?	16a		✓
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			
Sect:	organization's exempt status with respect to such arrangements?	16b		
<u>Secti</u>	List the states with which a copy of this Form 990 is required to be filed none			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) for public inspection. Indicate how you make these available. Check all that apply.	s only	/) ava	ılable
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of and financial statements available to the public.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ▶ Debora Wilson 787 Bailey Hill Rd Eugene, OR 97402 541-484-1151	of the	•	

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Pag	e	•

Earm	aan	<i>(</i> 2010	۱

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. 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 (A)	(B)	L OIG	arnz)) ()	ompe	1150	(D)	(E)	, or trustee.
Name and Title	Average	` ' ' '						Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual tr or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Geraldine I. Nelson	10							11,125		
President		✓		✓			<u> </u>			
(2) Christopher B. Seubert	8		ŀ		ļ			9,250		
Vice President		/		✓	L_		L.			
(3) Loy M. Sparks Secretary	17	1		1				10,950		
(4) Patricia Dymock	g			,				10,675		
Treasurer		✓		✓	_		<u> </u>			
(5) Charles E Bangle Director	9	1						11,700		
(6) James W. Hill Director	6	1						9,625		
(7) Charles J. Leighter	7							9,325		
Director		✓			<u> </u>					
(8) Frederick M. Crinklaw	47			,	١.			178,950		72,251
General Manager				✓	✓		<u> </u>			
(9) Debora D. Wilson Manager, Office & Staff Services	54			1				101,692		34,444
(10) Douglas Stockdale Manager, Engineering Services	41					1		137,173		37,679
(11) Dariel K. Bradley	47							118,407		25,417
Journeyman Lineman				<u> </u>	<u> </u>	✓	_			
(12) George Dyer Right-of-Way Lead Foreman	46					1		113,819		32,491
(13) Bryan Dickie Serviceman	58					1		114,766		37,557
(14) Linc Linebaugh Serviceman	48				-	▼		120,765		37,341
(15)	48									
(16)					<u> </u>		-			

Part	VII Section A. Officers, Directors, Trus	stees, Key	Emplo	oyee	es, a	and	Highe	est	Compensated	Employees (con	tınued)			
	(A)	(B) (C)							(D)	(E)			F)	
	Name and title	Average hours per	Posit	เดก (ต			that ap	_	Reportable compensation	Reportable compensation from			nated unt of	
		week	or d	Inst	Officer	₩	휥	Former	from	related		ot	her	
	(describe hours for	Individual trustee or director	Institutional trustee	Ĕ	Key employee	nest loye	ॿ	the organization	organizations (W-2/1099-MISC)	CC		nsate n the	on	
	related	Q #	nal		햦	[®] S		(W-2/1099-MISC)	(2		organ	ızatıo		
		organizations in Schedule	ste	trus	İ	8	Pen.						elated zation	
		() O)	•	8			Highest compensated employee					. 9		
(17)						\vdash		\vdash	<u> </u>		 			
Y		1	ļ				1							
(18)						<u> </u>		\vdash			 			
X-17	······································	1									ŀ			
(19)														
						L								
(20)		_		l										
				<u> </u>	_	<u> </u>								
(21)		-												
(00)			_	┢	┡	┢	├─	<u> </u>	ļ					
(22)		1						İ						
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120/		1									•			
(24)					t	╁		┢	†		 			
32											1			
(25)														
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(26)														
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(27)		_		ŀ										
(0.0)				├ ─	├	<u> </u>					 			
(28)		-		}	İ			ĺ						
1b	Sub-total			<u>!</u>			L		958,222		 		2	77,180
C	Total from continuation sheets to Part	 VII. Sectio	n A	•	•	•		•	0		 		_	0
ď	Total (add lines 1b and 1c)	•						•	958,222		 		2	77,180
2	Total number of individuals (including but								<u> </u>	·	00 in			
	reportable compensation from the organ							-,						
													Yes	No
3	Did the organization list any former of													
	employee on line 1a? If "Yes," complete										L-	3		↓ ✓
4	For any individual listed on line 1a, is the													
	organization and related organizations	-											,	
_	Individual								· · · · ·			4	✓_	-
5	for services rendered to the organization	? If "Yes " (nnpe	iisa lete	Scl	hedi	ule .I i	for s	ireialeu organiz such nerson	ation of individu		5		
Section	on B. Independent Contractors					700.				<u> </u>		<u> </u>		
1	Complete this table for your five highest	compensat	ed in	dep	end	lent	contr	act	ors that receive	ed more than \$1	00.00	of O		
•	compensation from the organization.									•	,			
	(A)							Γ	(B)			(C)		
	Name and business add	tress						1	Description of s	ervices	Com		ation	
Jense	n's Tree Service - PO Box 500 - Glendale, OF	R 97442						R.	O.W. Maintenan	ce			8	40,158
C-2 U	ility - PO Box 930482 - Atlanta, GA 31193							Tre	enching				4	29,868
								\vdash						
								\vdash						
	Total number of independent contractor	are (includi	na h	ıt -		lime	od +-	<u> </u>	hose listed sh	ove) who				
2	received more than \$100,000 in compens								iose listed abi	0+G) WIIU				

Part	VIII	Statement of Rev	renue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1a	Federated campaigns	s 1a					
ran C	b	Membership dues .						
S, g	С	Fundraising events .	1c				1	
gift ar	d	Related organizations	3 1d			ļ		
E is	е	Government grants (con						
tior er s	f	All other contributions, gi						1
t de		and similar amounts not inc						I
Contributions, gifts, grants and other similar amounts	g	Noncash contributions include	ded in lines 1a-1f. \$					1
	h	Total. Add lines 1a-1	f	▶				
Program Service Revenue				Business Code	ļ			
evel	2a	Operating Revenue		221000	19,930,660	19,930,660		
ě.	b	Pole Rental Income		221000	77,829			77,829
Ş.	С			ļ				
8	d							
ram	e							
2 Og	f	All other program ser			22 222 422			
	<u></u>	Total. Add lines 2a-2 Investment income	t	>	20,008,489			
	3	and other similar amo			114 266			114,366
	4	Income from investmen	•		114,366			114,300
	5			_				
	J	noyames		(ii) Personal				
	6a	Gross Rents	500	 				
	b	Less. rental expenses	587					
	c	Rental income or (loss)						
	ď	Net rental income or (▶	(87)		•	(87)
	7a	Gross amount from sales of	(i) Secunties	(ii) Other	,,			
		assets other than inventory		14,250				ı
	b	Less: cost or other basis						
		and sales expenses .		38,013				
	С	Gain or (loss)		(23,763)		[
	d	Net gain or (loss) .		🕨	(23,763)			(23 ,763)
venue	8a	Gross income from fu	undraising					,
Other Reve		events (not including \$ of contributions reported						
Jē.		See Part IV, line 18 .	\cdot \cdot \cdot \cdot a					
ð		Less: direct expenses						
		Net income or (loss) fi		events . ►				
	9a	Gross income from ga						
	_	See Part IV, line 19 .						
		Less: direct expenses						
	C 10a	Net income or (loss) for Gross sales of in		ivilles				
	IVa	returns and allowance						
	.	Less: cost of goods s	_					
	b c	Net income or (loss) f			•			
	Ü	Miscellaneous R		Business Code				<u> </u>
	11a	Salt Creek Tunnel Mai		221000	2,677	2,677		
	b	Patronage Dividends		221000	339,537	339,537		
	C				223,207	223,237		
	d	All other revenue .			10,302	10,302		
	e	Total. Add lines 11a-		▶	352,516			
	12	Total revenue. See in			20,451,521	20,283,176	0	168,345

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
er organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
76, 8	Bb, 9b, and 10b of Part VIII. Grants and other assistance to governments and		expenses	general expenses	expenses
1	organizations in the U.S. See Part IV, line 21.	0			
2	Grants and other assistance to individuals in				ı
	the U.S. See Part IV, line 22	10,272	_		
3	Grants and other assistance to governments,				i
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				i
	·	0			
4 5	Benefits paid to or for members Compensation of current officers, directors,	U			
Ū	trustees, and key employees	459,986			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9 10	Other employee benefits	20,672			
11	Fees for services (non-employees):	20,072	 		
''	Management			,	
b	Legal		•		
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other			···	
12	Advertising and promotion	-			
13 14	Office expenses	_			
15	Royalties				
16	Occupancy				
17	Travel			•	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	1,268,457			
21	Payments to affiliates	1,819,559	_	<u> </u>	
22 23	Depreciation, depletion, and amortization . Insurance	1,013,333			
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f. If				,
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				
а	Purchased Power expense	8,095,222			
b	Transmission and Distribution expense	4,370,716			
C	Customer and Member Service expense	1,637,407			
d e	General and Administrative expense Tax expense	1,717,056 612,668			
f	All other expenses	012,000			
25	Total functional expenses. Add lines 1 through 24f	20,012,015			
26	Joint costs. Check here ▶ ☐ if following	, ,,,,,		İ	
	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			<u> </u>	<u></u>

Pa	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	538,679	1	705,294
- 1	2	Savings and temporary cash investments	63,121	2	215,715
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	3,867,755	4	3,550,044
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	-
S	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	993,880	8	959,323
	9	Prepaid expenses and deferred charges	341,594	9	422,580
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 59,975,219	·		<u> </u>
	b	Less accumulated depreciation 10b 17,044,543	42,213,827	10c	42,930,676
	11	Investments – publicly traded securities	,,,	11	
	12	Investments—other securities. See Part IV, line 11	2,720,644	12	2,988,661
	13	Investments—program-related. See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	376,299	15	400,300
	16	Total assets. Add lines 1 through 15 (must equal line 34)	51,115,799	16	52,172,593
\neg	17	Accounts payable and accrued expenses	4,284,504	17	4,017,596
į	18	Grants payable		18	
	19	Deferred revenue		19	
[20	Tax-exempt bond liabilities		20	
တ္က	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	Ŷ	22	
-1	23	Secured mortgages and notes payable to unrelated third parties .	24,430,030	23	25,039,135
	24	Unsecured notes and loans payable to unrelated third parties	24,430,030	24	23,033,133
	25	Other liabilities. Complete Part X of Schedule D	2,522,012	25	1,845,720
	26	Total liabilities. Add lines 17 through 25	30,236,546	26	30,902,451
ses		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
뚩	27	Unrestricted net assets	-	27	
줐	28	Temporarily restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶			
3	30	Capital stock or trust principal, or current funds	4,415,664	30	4,344,131
se	31	Paid-in or capital surplus, or land, building, or equipment fund	. , , , , , , , , , , , , , , , , , , ,	31	· · · · · · · · · · · · · · · · · · ·
As	32	Retained earnings, endowment, accumulated income, or other funds .	16,463,589	32	16,926,011
ē	33	Total net assets or fund balances	20,879,253	33	21,270,142
~	34	Total liabilities and net assets/fund balances	51,115,799	34	52,172,593

Form 9	90 (2010)			Pa	age 12
Par	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				V
1	Total revenue (must equal Part VIII, column (A), line 12)	1		20,45	1,521
2	Total expenses (must equal Part IX, column (A), line 25)	2		20,01	2,015
3	Revenue less expenses. Subtract line 2 from line 1	3		43	9,506
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		20,87	9,253
5 6	Other changes in net assets or fund balances (explain in Schedule O)	5		(48	3,617)
Ū	column (B))	6		21,27	0,142
Part	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			•	. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O	plaın ın			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ĺ	✓
b					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account		t 2c	/	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.			<u> </u>	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye issued on a separate basis, consolidated basis, or both:	ar were)		
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				_
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth in	3a		 ✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not underequired audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	-	3b		

Form **990** (2010)

SCHEDULE C (Form 990 or 990-EZ)

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.

OMB No 1545-0047 2010 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

	•	," to Form 990, Part IV, line 4, or Form			
		that have filed Form 5768 (election und		•	
		that have NOT filed Form 5768 (election			
		," to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-E	Z, Part V, line 35a (Proxy T	ax), then
	Section 501(c)(4), (5), or (6) organization	inizations: Complete Part III		Employer iden	tification number
	•			' '	93-0209125
	ne Electric Cooperative, Inc				
		e organization is exempt unde			organization.
1	·	the organization's direct and indire	•		4000
2	•				4006
3	Volunteer hours				
Pa	rt I-B Complete if the	e organization is exempt unde	er section 501(:)(3).	
1	•	excise tax incurred by the organiza			
2	· · · · · · · · · · · · · · · · · · ·	excise tax incurred by organization			
3		ed a section 4955 tax, did it file For	-		. Yes No
4					. Yes No
	b If "Yes," describe in Part	IV.			
Pa		e organization is exempt unde	er section 501(c	c), except section 501	(c)(3).
1		expended by the filing organiza			
	activities			\$	
2	Enter the amount of the f	filing organization's funds contribu	ited to other orga	anizations for section	
	527 exempt function activi				4006
3	Total exempt function ex	penditures. Add lines 1 and 2.	Enter here and	on Form 1120-POL,	
	line 17b			· > \$	
4	Did the filing organization f	file Form 1120-POL for this year?			🗸 Yes 🗌 No
5	Enter the names, addresse	es and employer identification num	ber (EIN) of all se	ction 527 political organiz	zations to which the filing
		nts. For each organization listed, e			
		tributions received that were prom			
	as a separate segregated	fund or a political action committee	(PAC). If addition	al space is needed, provid	de information in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If none, enter -0-
					none, enter -o-
(1)	OR Action Committee for Rural Electrification	1750 Liberty Street, SE Salem, OR 97302	47-0861601	4,000	
	Western Electricity	155 North 400 West, Suite 200			
(2)	Coordinating Council	Salt Lake City, UT 84103-1114	87-6133162	6	
(2)	<u> </u>	-			
(3)					
(4)					
(5)					
(6)					

_	•
Page	

000	5610 G (1 61111 650 G1 650 EE) 2010					, ugc =
Pa	t II-A Complete if the organization section 501(h)).	is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ► ☐ if the filing organization below	ngs to an at	filiated group.			
	Check $ ightharpoonup$ if the filing organization che			trol" provisions a	apply.	
	Limits on Lobby				(a) Filing	(b) Affiliated
	(The term "expenditures" me			.)	organization's totals	group totals
1	a Total lobbying expenditures to influence p	public opinion	(grass roots lobby	/ina)		
	b Total lobbying expenditures to influence a	•				
	c Total lobbying expenditures (add lines 1a	•	• •	9/		
	d Other exempt purpose expenditures				-	
	e Total exempt purpose expenditures (add					
	f Lobbying nontaxable amount. Enter the					
	columns.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	nt is:	1	
	Not over \$500,000	20% of the ar	mount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000	l l	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	s 5% of the excess of	over \$1,500,000		
	Over \$17,000,000	\$1,000,000				
	g Grassroots nontaxable amount (enter 259	6 of line 1f)				
	h Subtract line 1g from line 1a. If zero or les	s, enter -0-				
	Subtract line 1f from line 1c. If zero or les	s, enter -0-				
	If there is an amount other than zero of	on either line	1h or line 1i, did	d the organization	file Form 4720	
,	reporting section 4911 tax for this year?					Yes No
	(Some organizations that mad columns below. S	le a section to ee the instru	ctions for lines 2	not have to com a through 2f on pa		•
	Lobbying	Expenditures	During 4-Year A	veraging Period	1	
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2	a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					<u> </u>
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures				1	

leg ref a Vo b Pa c Me d Ma e Pu f Gra j To a Dic b If " c If " d If t	ring the year, did the filing organization attempt to influence foreign, national, state or local islation, including any attempt to influence public opinion on a legislative matter or erendum, through the use of: funteers?	Yes	No		Amoun
leg ref a Vo b Pa c Me d Ma e Pu f Gra j To a Dic b If " c If " d If t	islation, including any attempt to influence public opinion on a legislative matter or erendum, through the use of: lunteers? Indicated or management (include compensation in expenses reported on lines 1c through 1i)? Indicated advertisements? Indications, or published or broadcast statements? Indications, or published or b				
refa Vo Pa Vo Pa Me Me Pu Gra Ott To If " If till-	deterendum, through the use of: Iunteers? Identifiers of management (include compensation in expenses reported on lines 1c through 1i)? Identifiers of management (include compensation in expenses reported on lines 1c through 1i)? Identifiers of members, legislators, or the public? Includings to members, legislators, or the public? Includings to members, legislators, or the public? Includings to members, legislators, or the public? Includings to members, legislators, or the public? Includings to members, legislators, or the public? Includings to members, legislators, or the public? Includings to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public? Including to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public? Including to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public to members, legislators, or the public				
Pa Me Me Pu Gra Oth To A Did To If "	In distaff or management (include compensation in expenses reported on lines 1c through 1i)? Indicated advertisements? Indications, or published or broadcast statements? Indications, or published or broadcast statements? In ants to other organizations for lobbying purposes? In ants to other organizations for lobbying purposes? In ants to other organizations for lobbying purposes? In ants to other organizations, their staffs, government officials, or a legislative body? It is demonstrations, seminars, conventions, speeches, lectures, or any similar means? In anti-provide in anti-provide in Part IV It is anti-provide in In anti-provide in Part IV It is anti-provide in In anti-provide in In anti-provide in Section 501(c)(3)? It is anti-provide in In anti				
Me Pu Grand Director of the street of the st	adia advertisements? Inlings to members, legislators, or the public? Inlings to members, legislators, or the public? Inlings to members, legislators, or the public? Interest to other organizations for lobbying purposes? Interest contact with legislators, their staffs, government officials, or a legislative body? Interest demonstrations, seminars, conventions, speeches, lectures, or any similar means? Interest extivities? If "Yes," describe in Part IV Interest through 1: In the activities in line 1 cause the organization to be not described in section 501(c)(3)? Yes," enter the amount of any tax incurred under section 4912 Yes," enter the amount of any tax incurred by organization managers under section 4912 The filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)				
Mae Pu Gra J Dir N Ra Otl To Dic O If " I If t	allings to members, legislators, or the public? blications, or published or broadcast statements? ants to other organizations for lobbying purposes? ect contact with legislators, their staffs, government officials, or a legislative body? llies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? her activities? If "Yes," describe in Part IV tal. Add lines 1c through 1: the activities in line 1 cause the organization to be not described in section 501(c)(3)? Yes," enter the amount of any tax incurred under section 4912 Yes," enter the amount of any tax incurred by organization managers under section 4912 he filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)				
Pu Gra J Dir N Ra Otl To I Dic D If " I If t	blications, or published or broadcast statements? ants to other organizations for lobbying purposes? ect contact with legislators, their staffs, government officials, or a legislative body? llies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? her activities? If "Yes," describe in Part IV tal. Add lines 1c through 1: the activities in line 1 cause the organization to be not described in section 501(c)(3)? Yes," enter the amount of any tax incurred under section 4912 Yes," enter the amount of any tax incurred by organization managers under section 4912 he filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)				
Grand Direction of the control of th	ants to other organizations for lobbying purposes?				
Dir Ra Otl To a Dic o If " c If "	ect contact with legislators, their staffs, government officials, or a legislative body? llies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? mer activities? If "Yes," describe in Part IV tal. Add lines 1c through 1i the activities in line 1 cause the organization to be not described in section 501(c)(3)? Yes," enter the amount of any tax incurred under section 4912 Yes," enter the amount of any tax incurred by organization managers under section 4912 he filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)				
Oth To a Dic o If " c If " d If t	llies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Otl To a Did o If " e If " d If ti	ner activities? If "Yes," describe in Part IV tal. Add lines 1c through 1i If the activities in line 1 cause the organization to be not described in section 501(c)(3)? Yes," enter the amount of any tax incurred under section 4912 Yes," enter the amount of any tax incurred by organization managers under section 4912 the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)				
To a Dic b If " c If t d If t	tal. Add lines 1c through 1i				
Dice If " If the	the activities in line 1 cause the organization to be not described in section 501(c)(3)? Yes," enter the amount of any tax incurred under section 4912 Yes," enter the amount of any tax incurred by organization managers under section 4912 he filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)				
olf" olf" dlft	Yes," enter the amount of any tax incurred under section 4912 Yes," enter the amount of any tax incurred by organization managers under section 4912 he filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)				
: If " I If t I III-/	Yes," enter the amount of any tax incurred by organization managers under section 4912 he filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)		1		
d ft t! - /	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)				
rt III-/	Complete if the organization is exempt under section 501(c)(4), section 501(c	l			
	•••(•)(•).)(5), (or se	ction	
			,		Yes
	ere substantially all (90% or more) dues received nondeductible by members?			1	↓
	I the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u> </u>
Dic	the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)			3	<u> </u>
	"Yes." es, assessments and similar amounts from members		1		
	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts litical expenses for which the section 527(f) tax was paid).	of			
Cu	rrent year		2a		
	rryover from last year		2b		
: To			2c		
Ag	gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3		
	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of				
	cess does the organization agree to carryover to the reasonable estimate of nondeductible lobby				
and	d political expenditure next year?		4		
Tax	kable amount of lobbying and political expenditures (see instructions)		5		
rt IV	Supplemental Information				
plete	this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5,	and P	art II-	B, line	1ı. Al
plete :	this part for any additional information.				
I-A Li	ne 1: Cash contribution to the Action Committee for Rural Electrification (ACRE) and Western Electric	city Co	oordin	ating (Counci
suppo	ort congressional candidates who share public policy goals consistent with the mission of member of	wned	electr	c coop	erativ

chedule C (Form 990 or 990-EZ) 2010 Page 4						
Part IV	Supplemental Information (continued)					
	•					

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

ernal Revenue Service ► Attach to Form 990. ► See separate instructions.

Employer identification number

Lane	Electric Cooperative, Inc		93-0209125
Par	Organizations Maintaining Dono organization answered "Yes" to Fo	or Advised Funds or Other Similar Foorm 990, Part IV, line 6.	unds or Accounts. Complete if the
1 2 3 4 5	Total number at end of year	ct to the organization's exclusive legal con	itrol? Yes . No
6		e benefit of the donor or donor advisor, o	r for any other purpose
Par		plete if the organization answered "Yes	s" to Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held Preservation of land for public use (e.g., Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organizate easement on the last day of the tax year.	recreation or education) Preservation Preservation	of a certified historic structure
a b c d	Total number of conservation easements Total acreage restricted by conservation ease Number of conservation easements on a cer Number of conservation easements include	rtified historic structure included in (a) ded in (c) acquired after 8/17/06, and no	2c ot on a
3	historic structure listed in the National Regis Number of conservation easements modified tax year ►		
4 5	Number of states where property subject to Does the organization have a written polyiolations, and enforcement of the conserva	licy regarding the periodic monitoring, i	inspection, handling of
6	Staff and volunteer hours devoted to monitor		
7	Amount of expenses incurred in monitoring, ▶\$	•	-
8 9	Does each conservation easement reported (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization re		· · · · · · · · Yes 🗆 No
	balance sheet, and include, if applicable, the organization's accounting for conservation e	e text of the footnote to the organization's easements.	financial statements that describes the
Part	Complete if the organization answ	ections of Art, Historical Treasures, vered "Yes" to Form 990, Part IV, line	8
1a	If the organization elected, as permitted un- works of art, historical treasures, or other public service, provide, in Part XIV, the text	similar assets held for public exhibition,	education, or research in furtherance of
b	If the organization elected, as permitted unworks of art, historical treasures, or other public service, provide the following amount	similar assets held for public exhibition, ts relating to these items:	education, or research in furtherance of
	(i) Revenues included in Form 990, Part VIII	l, line 1	<u>></u> \$
2	(ii) Assets included in Form 990, Part X. If the organization received or held works following amounts required to be reported up	of art, historical treasures, or other siminater SFAS 116 (ASC 958) relating to these	▶ \$ llar assets for financial gain, provide the e items:
a b	Revenues included in Form 990, Part VIII, lin Assets included in Form 990, Part X		

		0-114:	1 111	A	Tuescone	- A	hay Cimilar !	Accete /carti	Page 2
Part 3	Organizations Maintaining Using the organization's acquisition, a	conscions of Ar	t, HIS	torical	reasures	e follov	ner Similar A	significant usi	nuea) e of its
3	collection items (check all that apply):	ccession, and othe	1 1600	ius, ciii	sok any or m	e ioliov	ving that are a	olgimount asi	C OI IIS
а	☐ Public exhibition		d		oan or excha	nge pro	grams		
b	Scholarly research		е				-		
С	☐ Preservation for future generation	s							
4	Provide a description of the organization	on's collections and	d expl	aın how	they further	the org	ganızatıon's ex	empt purpose	ın Part
	XIV.			_					
5	During the year, did the organization sassets to be sold to raise funds rather	solicit or receive do	nation	ns of ar	t, historical ti	easure	s, or other sin	niiar	
Part									
rari	line 9, or reported an amount	on Form 990. Pa	nt X. I	ine 21.	ryanization	aiiswe	ied ies to	1 01111 330, 1 a	,
1a	Is the organization an agent, trustee,				for contribut	ions o	other assets	not	
	included on Form 990, Part X?			•				· 🔲 Yes	☐ No
b	If "Yes," explain the arrangement in Pa	rt XIV and complete	the f	ollowing	table:				
								Amount	
C	Beginning balance					10	<u>: </u>		
d	Additions during the year					10	+		
е	Distributions during the year					16	-		
f	Ending balance					11			
2a	Did the organization include an amoun		X, lin	921?				. 🗌 Yes	□ NO
	If "Yes," explain the arrangement in Pa Endowment Funds. Comple		ion a	nswere	d "Yes" to l	orm 9	90 Part IV II	ne 10	
ı aı	Endownient Lands. Comple	(a) Current year		or year	(c) Two yea				rs back
1a	Beginning of year balance			-					
b	Contributions								
С	Net investment earnings, gains, and			-					
	losses								
d	Grants or scholarships								
e	Other expenditures for facilities and				1				
	programs								
f	Administrative expenses				_				
g	End of year balance L						l		
2	Provide the estimated percentage of the	•		as:					
a	Board designated or quasi-endowmen		6						
b	Permanent endowment	%							
c 3a	Term endowment ▶% Are there endowment funds not in the	nossession of the	organ	ization f	hat are held	and ac	lministered for	the	
Ja	organization by:	possession or the	organ	Zalion	mat are neio	and ac	inimistered for	Ye	s No
	(i) unrelated organizations							. 3a(i)	3 110
	(ii) related organizations							. 3a(ii)	+
b	If "Yes" to 3a(ii), are the related organization							3b	+
4	Describe in Part XIV the intended uses					·			
Part	VI Land, Buildings, and Equip	ment. See Form 9	90, F	art X, I	ine 10.				
	Description of investment	(a) Cost or other		(b) Cos	t or other basis		Accumulated	(d) Book va	lue
		(investmen	t)		(other)	d	epreciation		
				1		I		1	
1a	Land								

c Leasehold improvementsd Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

42,930,676

17,044,543

59,975,219

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	
(a	Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
(1) Financial	derivatives			
	held equity interests	,-		
(3) Other				·
	tments in Associated Organizations	2,988,661	cost	
(B)				
(C)				
(D) (E)			· -	
(E) (F)				
(G)				
(H)				
(I)				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related	J. See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of vali Cost or end-of-year m	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
_(8)				
(9)				
(10)	(b) must equal Form 990, Part X, col. (B) line 13.)		-	
Part IX	Other Assets. See Form 990, Pa	ort V. line 15		
raitin		a) Description		(b) Book value
(1) Deferre	d Compensation Plan Investments			310,524
	rtized Loan Fees	······································		10,729
	rtized Long-Range Construction Plan			79,047
(4)				
(5)	•			
(6)				***
_(7)				
(8)				<u> </u>
(9)		· · · · · · · · · · · · · · · · · · ·		
(10) Textel (Cet)		al (D) (an 45)		
	mn (b) must equal Form 990, Part X, control of the Character Other Liabilities. See Form 990,			400,300
Part X 1.	(a) Description of liability	(b) Amount	T .	
	income taxes	(b) Amount	1	
	d Power Credits	769,591		
	etirement Health Liability	356,192	-1	
	d Compensation Plan Liability	310,524		
	rtized Gain of RUS Buyout	185,596		
	eferred Credits	223,817	1	
(7)]	
(8)				
(9)]	
(10)				
(11)			1	
	(b) must equal Form 990, Part X, col. (B) line 25.)	1,845,720	<u> </u>	
	SC 740) Footnote. In Part XIV, provide		the organization's financial staten	nents that reports the
organization	n's liability for uncertain tax positions u	11061 FIN 40 (ASC 740)		

Schedul	e D (Form 990) 2010		Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	20,451,521
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	20,012,015
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	439,506
4	Net unrealized gains (losses) on investments	4	· · · · · · · · · · · · · · · · · · ·
5	Donated services and use of facilities	5	-
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	1,525
9	Total adjustments (net). Add lines 4 through 8	9	1,525
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	441,031
Part			l
1	Total revenue, gains, and other support per audited financial statements	1	20,451,521
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
С	Recoveries of prior year grants	7	
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d	26	0
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	H	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	1	
c	Add lines 4a and 4b	1 40	. 0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part			
1	Total expenses and losses per audited financial statements	1	20,010,491
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	+	20,010,101
a	Donated services and use of facilities	İ	
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV.)	,	
e	Add lines 2a through 2d	7 20	12,752
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		10,007,700
-	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a			
b	,	┥.	14,276
С 5	Add lines 4a and 4b	40	
Part			20,012,013
Comp Part V any ac Part X	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also conditional information. #2: The Cooperative does not have any uncertain tax positions. I #8 :Tax depreciation less than book and Amortization of RUS Gain	nplet	e this part to provide
Part X	III #2d :Tax depreciation less than book		
Part X	III # 4b : Amortization of RUS Gain		

Schedule D (For	rm 990) 2010	Page 5
Part XIV	Supplemental Information (continued)	
		•
	······	•••••••••••••••••

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

OMB No. 1545-0047 Open to Publi Inspection 2010

% □ (h) Purpose of grant or assistance Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II Employer identification number Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 93-0209125 ✓ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance . . (e) Amount of non- (f) Method of valuation cash assistance (book, FMV, appraisal, other) . . Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. . . (d) Amount of cash grant • Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance can be duplicated if additional space is needed. Enter total number of other organizations (b) EIN 1 (a) Name and address of organization Lane Electric Cooperative, Inc or government Partl Part II 6

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Schedule I (Form 990) (2010)

Cat. No. 50055P

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

Schedule I (F	Schedule I (Form 990) (2010)	تم
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	ı
	Part III can be duplicated if additional space is needed.	

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Educat	1 Educational Grant (Lane Community College)	4	0009			
2 Educat	2 Education Grant (VOLTA)	1	4000			
3 Youth [3 Youth Benefit Conference	-	272			
4						
2						
9						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	e this part to pro	vide the information	n required in Part I,	line 2, and any other add	itional information.

Educational Grants are budgeted annually and awarded through an interview process by the Board of Directors and members of management. Recipients are eligible for the awarded funds by enrolling in the designated program. Distributions are made directly to the appropriate institution upon verification of enrollment. Unclaimed funds are returned to the cooperative and may or may not be re-awarded at the board's discretion.

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

Name of the organization Lane Electric Cooperative, Inc

Department of the Treasury

Internal Revenue Service

Employer identification number

93-0209125

OMB No 1545-0047

2010

Open to Public

Inspection

Questions Regarding Compensation No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Compensation committee ☐ Written employment contract ☐ Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment from the organization or a related organization? 4a 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? 5a 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization? . . . 6a 6b **b** Any related organization? If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53,4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Page 2

Schedule J (Form 990) 2010

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

For each individual whose compensation must be reported 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 VIII, line 1a.

		(B) Breakdown of W-2	and/or 1099-MISC compensation				
(A) Name		(i) Base compensation	(iii) Other reportable compensation	(C) Retrement and other deferred compensation	(b) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
Frederick M Crinklaw	ε	159,910	19,040	56,881	15,370	251,201	
-	8						
Douglas Stockdale	8	129,099	8,074	26,382	11,297	174,852	
2	(II)						
James Linebaugh	(1)	119,570	1,195	26,056	11,285	158,106	
3	(ii)						
Bryan Dickie	€	109,731	5,035	26,260	11,297	152,323	
4	8						
	8						
5	(II)						į
	(E)						
9	8						
	(1)						
7	€						
	(1)						
8	(3)						
	(1)						
6	(ii)						
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13	€						
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14	€						,
	8						
15	Ξ						
	8			9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9			
16	(3)						

Schedule J (Form 990) 2010

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.
Frederick M. Crinklaw deferred compensation in the amount of \$16,000 as a participant in a Section 457 Non-qualified Deferred Compensation Plan. Earnings on that plan for 2010
were \$4,054
Schedule J (Form 980) 2010

'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 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number Name of the organization Lane Electric Cooperative, Inc 93-0209125 Form 990 Part VI Section A #6 and #7a: As a cooperative, Lane Electric is owned by our member/owners who exercise their control by electing a total of 7 board members by residential district. The 7 board members are elected from four Board Districts to each serve a three-year term. Form 990 Part VI Section B #11A: The completed Form 990 is presented to the cooperative's Board of Directors for review during the monthly board meeting prior to being filed. All disclosures and significant changes from the prior year are highlighted and discussed. Form 990 Part VI Section B #12c: Any potential conflicts of interest including its nature and effects that may exist shall be declared in advance by the individual in order to save him or herself any official action involving the conflict. Monitoring and identifying such situations is the responsibility of the individual, the President of the Board, and the Board as a whole. Monitoring and enforcement of compliance with policies as they relate to employees is the responsibility of the cooperative's General Manager. Annually the cooperative provides questionnaires to its members of the board, officers, key, and highly compensated employees. This provides a means to disclose and obtain detailed information regarding the individual relationships reportable personnel may have with the cooperative's affiliates giving rise to a potential conflict of interest. Form 990 Part VI Section B #15b: Compensation for the cooperative's General Manager is set annually by the Board of Directors. This is discretionary based on performance to the extent it falls within the established range. This range is developed and reviewed every 3 (three) years based on averages and compiled from both industry surveys and information obtained from comparable utilities. Each such review is consistent in its inclusion of the relevant data. Compensation for managers and key employees is conducted in the same fashion, however, the decision is made by the cooperative's General Manager.

Name of the organization	Employer identification number
Lane Electric Cooperative, Inc	93-0209125
Form 990 Part VI Section C #19:	
The cooperative makes governing documents, policies, and annual financial statements availab	le to members of the cooperative upon
request.	
Form 990 Part XI #5:	
Other Changes to Net Assets:	
Tax Depreciation Less Than Book \$(12,753)	
Amortization of RUS Buyout 14,276	
Change in Memberships (31)	
Patronage Retired (50,109)	
Total Other Changes to Net Assets \$(48,617)	
	••••••
······································	

4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

20**10**

Attachment Sequence No 67

Business or activity to which this form relates Identifying number Name(s) shown on return 93-0209125 Lane Electric Cooperative, Inc. **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 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 line 1. If zero or less, enter -0-. If married filing 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . . 14 15 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 1,769,654 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2010 49,905 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (g) Depreciation deduction placed in period only-see instructions) service 19a 3-year property 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs h Residential rental 275 yrs S/L MM property 275 yrs ММ S/L i Nonresidential real 39 yrs ММ S/L S/L MM Section C-Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System S/L 20a Class life 12 yrs S/L **b** 12-year c 40-year 40 yrs MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions . . . 22 1,819,559 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form	4562 (2010)															Page 2
Par		Propert	y (Inc	lude auto	mobile	s, cer	tain ot	her ve	ehicles	, certa	ain cor	nputer	s, and	prope		
				on, or amu										•	-	
				which you								lease	expense	e, comp	lete on	ly 24a
				(c) of Section												
				d Other Int]	-,
24a	Do you have e	vidence to su T	pport the b	ousiness/inves	stment us	se claime	ed? ∟ (e)	_ Yes _		246 1	"Yes," is	the evic		tten?	Yes □	No
	(a) of property (list rehicles first)	(b) Date placed in service	Business investment percentag	use Cost or o	d) ther basi		for depre ness/inver use only	stment	(f) Recove period	·	(g) ethod/ nvention		(h) preciation eduction	Ele	(i) cted sect cost	ion 179
25	Special dep the tax year			•							25				. , ,	
26	Property use	ed more tha	an 50% i	n a qualifie	d busin	ess use	e:									
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		L	<u> </u>	%							-					
27	Property use	ed 50% or l	less in a		ısıness	use:				le a		ı				
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30	Total busines			_		a) ıcle 1		(b) icle 2	Vel	(c) hicle 3		d) ıcle 4		e) cle 5	(f) Vehicle 6	
31			_	•				_	<u> </u>	••	1		1			
	Total other personal (noncommuting) miles driven															
33	Total miles driven during the year. Add lines 30 through 32															
34	Was the veh during off-du	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No			
35	Was the veh than 5% own															
36	Is another ve	hicle availab	le for per	sonal use?						1						
	wer these que than 5% ow	estions to d	letermine		t an ex	ception									who ar	e not
37	Do you mail your employ		ten polic	y statemer	it that p	orohibit 	s all pe	rsonal	use of	vehicle 	s, ınclud	ding co	mmutin	g, by 	Yes	No
38	Do you mai employees?													your		
39	Do you treat	t all use of	vehicles	by employe	es as p	ersona	al use?									
40	Do you provuse of the v	vide more t	than five	vehicles to	your e	employe	es, ob	taın ınf	ormatic	on from	your e	nploye	es abou	t the		
41	Do you mee															
Pa	t VI Amor		.,,	,,											<u> </u>	•
	(a) on of costs		(b) Date amortiz begins	ation	Amo	(c) rtızable a	mount		(d) Code sec	tion	(e) Amortiz period percen	ation f or	Amortiza	(f) tion for th	ııs year
40	A	-64- 41-	-4	d	2010+		/222.22	<u> </u>				F 5. 0011	9-			

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

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