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# SCANNED MAY 23 2012

Form **990** 

Department of the Treasury Internal Revenue Service

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

2011

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Α	For the	2011 cale	endar year, or tax year beg		JANUARY		and endi	ng DEC	CEMBE	R , 20	) 11
В	Check if	applicable	C Name of organization BLA	CK HILLS	ELECTRIC CO	OPERATIVE INC	C		_ D Em	ployer iden	tification number
	Address	change	Doing Business As							46-0	111503
$\Box$	Name ch	-	Number and street (or P O t	box if mail is i	not delivered to st	reet address)	Room/s	uite	E Tel	ephone num	ber
$\overline{\Box}$	Initial reti	-	PO BOX 792						ł	605-6	73-4461
$\Box$	Terminat		City or town, state or country	y, and ZIP +	4						<del></del>
$\Box$	Amended		CUSTER, SD 57730-0792						<b>G</b> Gro	ss receipts	\$
$\Box$			F Name and address of princip		DANIEL E HUT	T		H(a) is th		return for affiliat	
		p	PO BOX 792, CUSTER, SI		792						<sup>2</sup> ☐ Yes ☐ No
$\overline{}$	Tax-exer	mpt status	<del> </del>		) ◀ (insert no )	4947(a)(1) or	527				ee instructions)
<u>.</u>	Website		EC COOP		.,,,.			H(c) Gro	no exem	ption numbe	er ▶
_				Association	Other ▶	L Yea	ar of forma		<del></del>	State of lega	
	art I	Summ				_ 1				×.	
	1		escribe the organization's	s mission	or most signifi	cant activities:	BLAC	K HILLS EL	ECTRI	COOPER	RATIVE IS A
	'		OFIT, MEMBER-OWNED O								
S			LOWEST COST CONSISTE								
Activities & Governance											
Ve	2	Check th	nis box ▶ 🗌 if the organiz	zation disc	ontinued its of	perations or di	sposed	of more the	an 25%	of its ne	t assets.
Ğ	3		of voting members of the							3	7
ა ა	4		of independent voting m	•	• •	•	l line 1b	)	. $\vdash$	4	7
īţie	5		mber of individuals emplo		•		-	, .	·  -	5	29
훒	6		mber of volunteers (estim	-			,			6	0
ĕ	7a		related business revenue		-	C) line 12	•		·  -	7a	0
	b		elated business taxable in				•		· -	7b	0
		1401 41110	atou businous taxabis ir	1001110 1101			· · ·	Pnor		<del></del>	Current Year
	8	Contribu	itions and grants (Part VII	II line 1h\					· · · · · · ·	0	0
Revenue	9		service revenue (Part VI			N BEO	EIVE	<del>.</del> 0	14,673,		15,795,681
ķ	10	Investme	ent income (Part VIII, colu	ımn (Δ) lır	nes 3 1 and 7				100,		69,068
æ	11	Other re	venue (Part VIII, column (	(Δ) lines 5	6d 8c 9c 16	Cand MAD	0 0 2	N12		419	39,545
	12		enue—add lines 8 throug						14,826,5		15,904,294
	13									857	7,043
	14		rants and similar amounts paid (Part IX, column (A), lines 1=3) enefits paid to or for members (Part IX, column (A), line 4)							037	206,975
	14-		other compensation, emp			7		<del></del>	2,256,739		2,247,921
Expenses	16a		onal fundraising fees (Pa	-			J-10)		2,200,	733	2,247,321
en	b		ndraising expenses (Part				•		<del></del>	<del></del>	<del></del>
Ä	17		penses (Part IX, column						11 /17	106	12,160,868
	18		penses Add lines 13–17				E)		11,417,196 13,680,790		14,622,807
	19	-	e less expenses. Subtrac			211111 (A), IIII 23	٥)		1,145,		1,281,487
		Hevenue	riess expenses. Subtrac	t line 10 iii	om me 12	<u>· · · · · · · · · · · · · · · · · · · </u>	•	Beginning of		<del></del>	End of Year
ssets or	20	Total acc	note (Part V. June 16)						47,270,		48,638,551
ASSe Strain	21		sets (Part X, line 16) bilities (Part X, line 26)	•	• •		• •		33,097,		33,359,863
Net As	22		ets or fund balances Sub	tract line	 21 from line 20	· · · ·			14,172,	_	15,278,688
_	art II		iture Block	Juact inte	21 110111 11116 20	· · · ·	<u></u>		14,172,	310	13,270,000
_		<del></del>		and thin ration		nonuna sabadula		omanta and t	- the her	t of my know	wlades, and ballet it in
			ury, I declare that I have examin blete Declaration of preparer (ot							St Of HIS KIIO	wiedge and belier, it is
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Qi.	gn		nature of officer	يستر					Date	00/20.	1.2
	ere	1.		COMP.	\ T	nn /nynari	m = 1 7 1 1 1		Daic		
110	51 <del>C</del>			GENERA	AL MANAGI	ER/EXECU	TIVE	V.P			
_		Type or print name and title Print/Type preparer's name Preparer's signature Date						nate		T	PTIN
Pa	aid	[ 13101	The biobaid a liquid	'''	paror 3 signature			-uic		eck 📋 if	
	repare							· · · · · · · · · · · · · · · · · · ·		f-employed	
U	se On					· · · · · · · · · · · · · · · · · · ·			irm's EIN	i <b>&gt;</b>	
N. 4	nu tha 11		address >	noror sha	un aboua? (aa	o instructions			hone no		Vac Dat-
			ss this return with the pre	<del></del>	· ·	e instructions)		<u> </u>	-	• •	Yes No
Fo	r Papen	work Redi	uction Act Notice, see the	separate ir	estructions.		Cat	No 11282Y			Form <b>990</b> (2011)

Part	V Checklist of Required Schedules		-	age C
	Oncomist of nequired ouriedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A			,
•	·	1		<b>V</b>
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		<b>∀</b>
4	candidates for public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		<b>✓</b>
_	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		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		<i>'</i>
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		<i>'</i>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			<u> </u>
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	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	1	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
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	✓	<b>-</b>
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	1	-
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, 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	Did the organization maintain an office, employees, or agents outside of the United States? .	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.			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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .	14b		
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	15 16		<b>√</b>
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		<b>∀</b>
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		<b>√</b>
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		<b>✓</b>
20 a		20a	-	<b>∀</b>
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>

Fart	Checklist of Required Schedules (Continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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	<b>√</b>	
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
	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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>√</b>
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  A family member of 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		<b>√</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>√</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	✓	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? .	35a		<b>✓</b>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	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		<b>✓</b>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	-		

Form **990** (2011)

Part	3 3			
	Check if Schedule O contains a response to any question in this Part V			<u>.                                     </u>
10	February and the mumber appointed in Day 2 of Ferry 1000 February 2 of the back and		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  1a 24			
C	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			İ
Ū	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	<u> </u>	-
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 31			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
_	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	25	<u> </u>	-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<b>-</b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	<u> </u>		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country. ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ı i		
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			-
	and services provided to the payor?	7a		<b>✓</b>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	_		1
d	**************************************	7с		<b>✓</b>
e	If "Yes," indicate the number of Forms 8282 filed during the year	7-		
f	Did the organization, during the year, pay premiums, directly or indirectly, or a personal benefit contract?	7e 7f		/
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>-</b>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		<del> </del>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	'''		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			ĺ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b			ŀ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		ļ
а	Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the appropriate must be seen as Sebadule Co.	13a		
b	<b>Note.</b> 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			
U	the appropriate to be a properly to the second second to the second second to the second seco			
С	100			
14a	Enter the amount of reserves on hand	14a		
	If "Yes." has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		\ <u> </u>

Check if Schedule O contains a response to any question in this Part VI  Section A. Governing Body and Management  1a Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting nights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O  b Enter the number of voting members included in line 1a, above, who are independent  2 Did any officer, director, trustee, or key employee?  3 Did the organization disease and a special control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees?  5 Did the organization disease and a special control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?  5 Did the organization base any significant changes to its governing documents since the prior form 990 was filed?  5 Did the organization base were during the year of a significant diversion of the organization's assets?  6 Did the organization have members and sockholders?  7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint once or more members of the governing body?  5 Did the organization on set members and sockholders?  7b Did the organization on set of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following  a The governing body?  9 Is there any officer, director, trustee, or key employee lated in Part VII. Section A, who cannot be reached at the organization or seminar and addresses in Schedule O is the seminary of the process of	Part '	Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See in							
Section A. Governing Body and Management				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
a Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting rights among members of the governing body, or if the governing body delegisted broad authority to an executive committee or similar committee, explain in Schedule O between the foreign and the properties of the governing body of the foreign and the properties of the governing body of the foreign and the properties of the governing body of the foreign and the foreign and the governing body of the foreign and	Section		<del></del>	<u> </u>	:				
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participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  □ Own website □ Another's website ☑ Upon request  19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the		with a taxable entity during the year?	•	16a		<b>✓</b>			
organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE  18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply  □ Own website □ Another's website ☑ Upon request.  19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  20 State the name, physical address, and telephone number of the person who possesses the books and records of the	b				İ	ŀ			
<ul> <li>Section C. Disclosure</li> <li>17 List the states with which a copy of this Form 990 is required to be filed ► NONE</li> <li>18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only, available for public inspection. Indicate how you made these available. Check all that apply.</li> <li>☐ Own website. ☐ Another's website. ☑ Upon request.</li> <li>19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.</li> <li>20 State the name, physical address, and telephone number of the person who possesses the books and records of the</li> </ul>			o safeguard the						
<ul> <li>List the states with which a copy of this Form 990 is required to be filed ► NONE</li> <li>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.</li> <li>Own website. Another's website. Upon request.</li> <li>Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.</li> <li>State the name, physical address, and telephone number of the person who possesses the books and records of the</li> </ul>			· · ·	16b	<u> </u>	L			
<ul> <li>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.</li> <li>Own website. Another's website. Upon request.</li> <li>Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.</li> <li>State the name, physical address, and telephone number of the person who possesses the books and records of the</li> </ul>									
available for public inspection. Indicate how you made these available. Check all that apply  Own website. Another's website. Upon request  Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  State the name, physical address, and telephone number of the person who possesses the books and records of the						·			
<ul> <li>Own website</li></ul>	18		na 990-1 (Sectio	n 501	(C)(3)s	only)			
<ul> <li>Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.</li> <li>State the name, physical address, and telephone number of the person who possesses the books and records of the</li> </ul>									
<ul> <li>and financial statements available to the public during the tax year.</li> <li>State the name, physical address, and telephone number of the person who possesses the books and records of the</li> </ul>	40				·				
20 State the name, physical address, and telephone number of the person who possesses the books and records of the	19		iments, conflict (	or inte	rest p	oncy,			
	20		noke and rocords	of the	<u>.</u>				
	20		oons and records	. OI 1116	•				

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Page 7

			5-
Part VII	Compensation of Officers, Directors,	Trustees, Key Employees, Highest Compensated Employees	, and
	Independent Contractors		

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key 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 no	r any relate	d org	anız	atic	n c	ompe	ensa	ated any currer	nt officer, director	r, or trustee
(A) Name and Title	(B) Average hours per	(do n	ot ch	Pos neck ss pe	c) ition more rson		one n an	(D) Reportable compensation		(F) Estimated amount of
-	week (describe hours for related organizations in Schedule O)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) ALAN BISHOP										
DIRECTOR:	4	1						2,649		
(2) DWAYNE BREYER										
BOARD VICE PRESIDENT	14	✓		<u>.</u>				5,236		
(3) GARY KLUTHE										
BOARD TREASURER	4	1		<u> </u>	L					6,222
(4) DAVID LINDBLOM	1	١.								
DIRECTOR	4	<b>/</b>	<u> </u>	L		<u> </u>	_	5,359		
(5) AL PERRY BOARD PRESIDENT	4	1						5,532		
(6) JAMES PRESTON										
BOARD ASSISTANT SECRETARY	4	1				<u></u>		7,207		
(7) GLEN REASER										
BOARD SECRETARY	4	1	<u></u>			L	<u> </u>			3,573
(8) DANIEL HUTT	_						l			
GENERAL MANAGER, EXEC V P	47	<u> </u>	ļ	1	1	ļ	<u> </u>	153,822		66,028
(9) ALAN MICHALEWICZ						١.				
V P OF OPERATIONS & ENGINEERING	41		ļ	ļ		<b>/</b>	ـــ	108,795		51,695
(10) WALKER WITT GENERAL COUNSEL, V.P. OF ADMIN	1				١,			400.000		
	44				<b>/</b>	<u> </u>	├	126,638		58,313
(11)	1									
(12)										
(13)	-				_					
(14)	-				_					<u> </u>
	<u> </u>	L	<u> </u>		<u> </u>	L	<u> </u>			

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(C)													
	(A) Position (do not check more than			e than o	one	(C)	(E)	(F)						
	Name and title	Average hours per	Average box, unless person is both a						Reportable compensation	Reportable compensation from			mated	
		week				$\overline{}$		ı –	from	related			other	
		(describe hours for	n div	nstit	Officer	Key employee	ingh	Former	the organization	organizati (W-2/1099-N			ensation	วท
		related	ecto	utio	ଫ୍	am p	est c	व्	(W-2/1099-MISC)	(***-271033-1	VIII (100)		nızatıo	n
		organizations in Schedule	۲ <del>أ</del>	nal t		loye	) Sign						related	
		O)	Individual trustee or director	nstitutional trustee		e	bens					Orgai	nization	15
				98			Highest compensated employee							
(15)	110				-		_			-				
3		1					1							
(16)					-									
		1		!				ĺ						
(17)														
(18)														
(19)														
								<u> </u>						
(20)							ĺ							
10.11					_			ļ						
(21)	·													
(00)								ļ		<u> </u>				
(22)														
(23)														
(23)		-												
(24)				-				-	-					
35.77	•••••••••••••••••••••••••••••••••••••••													
(25)			ļ					$\vdash$	<del> </del>					
35.52		•					1							
1b	Sub-total		1	•				<b></b>	415,238		0		18	35,831
С	Total from continuation sheets to Part	VII, Sectio	n A					▶			·			
d	Total (add lines 1b and 1c)							<b>•</b>	415,238		0		18	35,831
2	Total number of individuals (including but	not limited	to th	ose	list	ted	above	e) w	ho received m	ore than \$1	00,000	of		
<del></del>	reportable compensation from the organi													
_												,	Yes	No
3	Did the organization list any former of	ficer, direc	tor, c	r tr	ust	ee,	key e	emp	oloyee, or high	est compe	ensated			
	employee on line 1a? If "Yes," complete 3									•		3		<b>✓</b>
4	For any individual listed on line 1a, is the													
	organization and related organizations individual	greater th	an \$	150,	UUU	) 7	r "Ye	s, "	complete Sch	eaule J to	or such	- 1	١,	
5	Did any person listed on line 1a receive of	· · · ·	·	nnai	hon	fra	<b>~</b> an		· rolated ergani		المنامان ما	4	<b>/</b> _	<u> </u>
5	for services rendered to the organization									ation or inc	ividuai	l l		١,
Section	on B. Independent Contractors	700, 0	,O,,,p,		-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0, 0	- Person	•		5	L	<b>✓</b>
1	Complete this table for your five highest	compensat	ed inc	den	end	ent	contr	acto	ors that receive	ad more tha	n \$100	000 0		
•	compensation from the organization Rep													ax
	year				,	,	u.o	ر	our orlaing wit		mo org	jar ii Zati	511 5 6	un
	(A)							Γ	(B)			(C)		
	Name and business add	ress							Description of s	ervices	,	Compens		
							-						,	
					-									
2	Total number of independent contractor							th	ose listed abo	ove) who				
	received more than \$100,000 of compens	sation from	the o	rgar	าเza	tion	ightharpoons							

Part	VIII	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ats ots	1a	Federated campaigns 1a				
3rai	b	Membership dues 1b				
S, C	С	Fundraising events 1c				
la it	d	Related organizations 1d				
ins,	е	Government grants (contributions) 1e				
er S	f	All other contributions, gifts, grants,				
현탕		and similar amounts not included above 1f				
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a1f Business Code	-			
Program Service Revenue	2a	SALE OF ELECTRICITY	15,382,148	15,382,148		-
Pe	b	G&T CAPITAL CREDITS	293,476	293,476		
ice	С	OTHER CO-OP CAPITAL CREDITS	82,386	82,386		· · · · · · · · · · · · · · · · · · ·
Serv	d	OTHER REVENUE	37,671	37,671		
Ë	е					
ogra	f	All other program service revenue				
مة	g	Total. Add lines 2a–2f ▶	15,795,681			
	3	Investment income (including dividends, interest,				
		and other similar amounts)	69,068			69,068
	4 5	Income from investment of tax-exempt bond proceeds			<del></del>	
	3	Royalties				
	6a	Gross rents . 12,300				
	b	Less: rental expenses 10,109				
	C	Rental income or (loss) 2,191				
	d	Net rental income or (loss)	2,191			2,191
	7a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory				
	b	Less cost or other basis				-
		and sales expenses				
	С	Gain or (loss)				:
	d	Net gain or (loss)				-
e e	8a	Gross income from fundraising				
venue	Ų.	events (not including \$				
		of contributions reported on line 1c)				
e l		See Part IV, line 18 a				
Other Re	b	Less. direct expenses b				
	С	Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a				
	b	Less: direct expenses b				
	C	Net income or (loss) from gaming activities .				-
	iua	Gross sales of inventory, less returns and allowances a 136,889				
	b	Less cost of goods sold b 135,683  Net income or (loss) from sales of inventory	1,207	1,207		
		Miscellaneous Revenue Business Code	1,201	1,207		<del> </del>
	11a	POLE ATTACHMENT RENTS	35,085	35,085		
	ь	RENT OF SUBSTATION	1,062	1,062		<del>                                     </del>
	c			,		<del>                                     </del>
	d	All other revenue .				
	е	Total. Add lines 11a-11d ▶	36,147			
	12	Total revenue. See instructions ▶	15,904,294	15,833,035	(	71,259

## Part IX Statement of Functional Expenses

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

cquire	d to complete columns (B), (O), and (D)	<del></del>		<del> </del>	
	Check if Schedule O contains a respons			· · · · · · · · · · · · · · · · · · ·	<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	7,043			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	206,975 326,550			
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 8	Other salaries and wages	1,198,563 333,658			
9	Other employee benefits	287,918			
10	D	101,232	<del></del>		<del></del>
	· ·	101,232			
11	Fees for services (non-employees)				
а	Management				
b	Legal	615			
С	Accounting	15,261			
d	Lobbying		<u> </u>		
е	Professional fundraising services. See Part IV, line 17		<u></u>	7	
f	Investment management fees				
g	Other	197,645			
12	Advertising and promotion	107,597			
13	Office expenses	100,800			
14	Information technology .	64,256			
15	Royalties				
16	Occupancy	75,246			
17	Travel	221,248			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings .	34,208			
20	Interest	1,363,558			
21	Payments to affiliates	66,698			
22	Depreciation, depletion, and amortization .	1,863,723			
23	Insurance .	68,837			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	POWER AND TRANSMISSION	7,831,191			
b					
c				<del>-</del>	
d					
e	All other expenses	149,985	<del></del>		<del></del>
25	Total functional expenses. Add lines 1 through 24e	14,622,807	<del></del>	<del> </del>	<del></del>
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if following SOP 98-2 (ASC 958-720)	14,022,007			

	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	450	1	450
ı	2	Savings and temporary cash investments	298,083	2	343,539
i	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,188,407	4	763,326
	5	Receivables from current and former officers, directors, trustees, keepen employees, and highest compensated employees. Complete Part II Schedule L		5	0
ड	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) voluntal employees' beneficiary organizations (see instructions)	ng	6	
Assets	7	Notes and loans receivable, net		7	<u> </u>
As	8	Inventories for sale or use	885,248	8	769,283
	9	Prepaid expenses and deferred charges	79,024	9	148,106
	10a	Land, buildings, and equipment cost or	· · · · · · · · · · · · · · · · · · ·		<del></del>
		other basis Complete Part VI of Schedule D 10a 59,675,	705	1	
	b	Less accumulated depreciation 10b 20,301,	685 37,709,451	10c	39,374,020
	11	Investments—publicly traded securities	2,981	11	3,168
	12	Investments—other securities See Part IV, line 11	5,100	12	5,100
	13	Investments – program-related. See Part IV, line 11	5,901,711	13	5,574,450
	14	Intangible assets	-	14	
- 1	15	Other assets See Part IV, line 11	1,128,447	15	1,657,109
	16	Total assets. Add lines 1 through 15 (must equal line 34)	47,270,013	16	48,638,551
	17	Accounts payable and accrued expenses	2,236,542	17	1,674,166
ł	18	Grants payable		18	
į	19	Deferred revenue	600,000	19	750,000
ł	20	Tax-exempt bond liabilities		20	······································
	21	Escrow or custodial account liability Complete Part IV of Schedule D.		21	
Liabilities	22	Payables to current and former officers, directors, trustees, keemployees, highest compensated employees, and disqualified person Complete Part II of Schedule L		22	
3	23	Secured mortgages and notes payable to unrelated third parties .	28,207,062	23	29,422,254
	24	Unsecured notes and loans payable to unrelated third parties	209,963	24	192,186
i.	25	Other liabilities (including federal income tax, payables to related this parties, and other liabilities not included on lines 17-24) Complete Part of Schedule D		25	1,321,257
1	26	Total tiphitising Add lines 17 through 05	33,097,097	26	33,359,863
ses	20	Organizations that follow SFAS 117, check here ▶ ☐ and comple lines 27 through 29, and lines 33 and 34.		20	33,339,803
ä	27	Unrestricted net assets	[	27	
Bal	28	Temporarily restricted net assets		28	
힏	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds .		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund .	1,064,199	31	1,213,454
Ϋ́	32	Retained earnings, endowment, accumulated income, or other funds	13,108,717	32	14,065,234
<del>-</del>	33	Total net assets or fund balances	14,172,916	33	15,278,688
S	34				

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<del></del> -		<b>/</b>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		15,90	4,294
2	Total expenses (must equal Part IX, column (A), line 25)	2		14,62	2,807
3	Revenue less expenses. Subtract line 2 from line 1	3		1,28	1,487
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		14,17	2,916
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-17	5,715
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		15,27	8,688
Part	XII 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	plaın ın			
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	1	
b	Were the organization's financial statements audited by an independent accountant?		2b	<b>√</b>	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for c	versight			
	of the audit, review, or compilation of its financial statements and selection of an independent according	untant?	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, e. Schedule O.	kplain in			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year.	or wore			
u	issued on a separate basis, consolidated basis, or both.	ai weie			
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
Ja	the Single Audit Act and OMB Circular A-133?	IOI III	3a		,
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	erao the	Ja		<u> </u>
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
				n <b>990</b>	(2011)
			Forr	11 230	(2011)

## SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

OMB No 1545-0047

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

	K HILLS ELECTRIC COOPERATIVE INC	46-0111503
Par		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year) .	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	in donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	· · 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fi	unds can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for a	any other purpose
	conferring impermissible private benefit?	· · · · 🗌 Yes 🗍 No
Par	<b>Conservation Easements.</b> Complete if the organization answered "Yes" to	Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education)	historically important land area
	☐ Protection of natural habitat ☐ Preservation of a	certified historic structure
	☐ Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution is	n the form of a conservation
	easement on the last day of the tax year	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on	a
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminal	ated by the organization during the
	tax year ►	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspec	<del>-</del>
_	violations, and enforcement of the conservation easements it holds?	· · · 🗌 Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ear	sements during the year
_	<b></b>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easeme	ents during the year
_	<b>&gt;</b> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of s (i) and section 170(h)(4)(B)(ii)?	
_	V V V V V	· · · · · L Yes L No
9	In Part XIV, describe how the organization reports conservation easements in its revenue an	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial organization's accounting for conservation easements	cial statements that describes the
Par		ther Cimilar Assets
rai	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	ther Similar Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its re-	venue statement and belove show
10	works of art, historical treasures, or other similar assets held for public exhibition, educations and the original and the o	
	public service, provide, in Part XIV, the text of the footnote to its financial statements that de	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its rev	
U	works of art, historical treasures, or other similar assets held for public exhibition, educations and the original treasures are similar assets.	
	public service, provide the following amounts relating to these items	ation, or research in fartherance o
	•	•
	(ii) Assets included in Form 990. Part X	ν Ψ
2	(i) Revenues included in Form 990, Part VIII, line 1	sets for financial gain, provide the
-	following amounts required to be reported under SFAS 116 (ASC 958) relating to these item	is
а	Revenues included in Form 990, Part VIII, line 1	·- • •
b	Assets included in Form 990, Part X	<b>ν</b>

Schedule	D	(Form	990)	2011

Page 2

Part	III Organizations Maintaining	Collections of	Art, HIS	toricai i	reasures	, or Ot	ner Similar As	ssets (c	ontını	ued)
3	Using the organization's acquisition, a collection items (check all that apply).	accession, and o	ther reco	rds, chec	k any of th	ne follov	ving that are a s	ignificar	nt use	of its
а	☐ Public exhibition		ď	☐ Loan	or exchan	ae proa	rams			
b	☐ Scholarly research			Other						
С	☐ Preservation for future generations									
4	Provide a description of the organizati		and expla	ain how t	hev further	the ord	ianization's exer	nnt nurr	11 920	n Part
	XIV		and onpo		noy raranor	1110 01 8	janization o oxor	npr purp	/OGC 11	i i ait
5	During the year, did the organization	solicit or receive	donation	s of art	historical ti	reactire	s or other simil	or		
-	assets to be sold to raise funds rather	than to be mainta	ained as i	part of the	e organizat	ion's co	ollection?	_	es 🗀	l Na
Part	IV Escrow and Custodial Arra									
	line 9, or reported an amount				amedion	anowo	100 105 1011	Jiii 550	, i ai	L IV,
1a	Is the organization an agent, trustee,					tions or	other assets n	ot		
	·	•						□ Y	es 🗌	No
ь	If "Yes," explain the arrangement in Pa	irt XIV and compl	lete the fo	ollowing to	able					
							A	mount		
С	Beginning balance					10	:			
d	Additions during the year	•			•	1d	<u> </u>			
е	Distributions during the year				•	1e	<u> </u>			
f	Ending balance					1f				
2a	Did the organization include an amoun		art X, line	21?				□ Y	es 🗌	No
b	If "Yes," explain the arrangement in Pa									
Par	EV Endowment Funds. Comple		4		"Yes" to F	Form 9	90, Part IV, line			
		(a) Current year	(b) Pri	or year	(c) Two year	rs back	(d) Three years back	(e) Fou	r years	back
1a	Beginning of year balance								4	
b	Contributions .							*		
С	Net investment earnings, gains, and									
	losses							}		~
d	Grants or scholarships							*		
е	Other expenditures for facilities and								,	.)
	programs									
f	Administrative expenses		ļ							
g	End of year balance									
2	Provide the estimated percentage of the	ne current vear er	nd balanc	e (line 1a	column (a	1)) held :	36,			
а	Board designated or quasi-endowmen	•	%	, , , , , , , , , , , , , , , , , , ,	, ooiaiiii (a	.,,	40.			
b	Permanent endowment ►	%	''							
c	Temporarily restricted endowment ▶	· <sup>70</sup>								
ŭ	The percentages in lines 2a, 2b, and 2c		nno/							
3a	Are there endowment funds not in the			zation the	at are held	and ad	ministored for th			
ou	organization by:	possession or a	ne organi	Zanon inc	at are neru	and au	ministered for tr	e	[V]	NI.
	<b>(3)</b>							0 - (1)	Yes	NO
	•	• •		•	•	-		3a(i)		
h	(ii) related organizations			Cabad	 .l- D0			3a(ii)		
ь 4	If "Yes" to 3a(ii), are the related organized Describe in Part XIV the intended uses						• •	_3b	L	
Pari										
rai				<del></del>				·		
	Description of property	(a) Cost or o (investri			r other basis ther)		Accumulated epreciation	( <b>d</b> ) Boo	ok value	•
1a	Land .		112,080		275,101				38	7,181
b	Buildings				573,028		324,728		24	8,300
С	Leasehold improvements .									
d	Equipment				2,506,669		1,595,232		91	1,437
е	Other				56,208,827		18,381,725		37,82	
Total.	Add lines 1a through 1e (Column (d) m	ust equal Form 9	90, Part 2			)(c) ) .	<b>•</b>		39,37	

Part VII Investments - Other Securities.	See Form 990, Part X, I	ine 12.	
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation st or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests .			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12 ) ▶			
Part VIII Investments—Program Related	. See Form 990, Part X,	line 13.	
(a) Description of investment type	(b) Book value	Co	(c) Method of valuation st or end-of-year market value
(1) INVESTMENT IN ASSOC ORG- PAT CAP	5,037,637	COST	
(2) INVESTMENT IN ASSOC ORG - OTHER	388,441	COST	
(3) ECONOMIC DEVELOPMENT INVESTMENT	94,333	COST	
(4) ENERGY CONSERVATION LOANS	45,299	COST	
(5) OTHER INVESTMENT	8,740	COST	
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	5,574,450		
Part IX Other Assets. See Form 990, Part IX			
	Description		(b) Book value
(1)		M	
(2)			
(3)			
(4)	<del></del>		
(5)			
(6)		<del></del> -	
(7)			
(8)	· · · · · · · · · · · · · · · · · · ·		
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, co	I (R) Inc. 15 )		<b>•</b>
Part X Other Liabilities. See Form 990,	· · · · · · · · · · · · · · · · · · ·	· · ·	
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes	(5) 500.(14.00		
(2) REFUNDABLE AID TO CONSTRUCTION	1,127,618		
(3) ELECTRIC PREPAYMENTS	128,731		•
(4) CONSUMER DEPOSITS	53,248		
(5) UNCLAIMED CAPITAL CREDITS	11,660		
(6)	11,000		
(7)	·		
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,321,257		
The continuity most aquair on a soo, rare N, our ID) into 20 /	1,341,237	L	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part)	D (Form 990) 2011		Page 4
1 1	Reconciliation of Change in Net Assets from Form 990 to Audited Financial State	ements	
•	Total revenue (Form 990, Part VIII, column (A), line 12)	1	15,904,294
2	Fotal expenses (Form 990, Part IX, column (A), line 25)	2	14,622,807
3 E	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,281,487
4 1	Net unrealized gains (losses) on investments	4	
5 [	Donated services and use of facilities	5	
6 1	nvestment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10 [	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	1,281,487
Part >	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	15,904,293
2 /	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a l	Net unrealized gains on investments 2a		
<b>b</b> 1	Donated services and use of facilities . 2b		
c l	Recoveries of prior year grants		
d (	Other (Describe in Part XIV.)		
e /	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV )		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. 5	_15,904,293
Part X	III Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return	
1	Total expenses and losses per audited financial statements	. 1	14,622,806
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV ) 2d		
e	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
~	Add lines 4a and 4b	4c	
С	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	14,622,806

Schedule D (For		Page 5
Part XIV	Supplemental Information (continued)	
••••		
	4	
**		
***************************************		

## SCHEDULE 1 (Form 990)

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

**%** 

**Employer Identification number** 46-0111503 ► Attach to Form 990. BLACK HILLS ELECTRIC COOPERATIVE INC Department of the Treasury Internal Revenue Service Name of the organization

Part   General Information on Grants and Assis	n on Grants and	Assistance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	ain records to subsite award the grants of	tantiate the amou or assistance?	nt of the grants or	assistance, the g	grantees' eligibility for	or the grants or assistance	, and Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	nization's procedur	es for monitoring t	he use of grant ful	nds in the United	States.		
Part II Grants and Other As to Form 990, Part IV,	ssistance to Go	vernments and ecipient that rec	<b>Organizations i</b> erved more than	n the United Si \$5,000. Check	tates. Complete this box if no one	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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.	
1 (a) Name and address of organization (b) EIN (c) IF (d) Name and address of organization (d) EIN (e) IF (f) IF (	(b) EIN	Space Is needed (c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	n 501(c)(3) and govorganizations listed	ernment organizat in the line 1 table	ions listed in the lii	ne 1 table			<b>A A</b>
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructions	for Form 990.		Ö	Cat No 50055P		Schedule I (Form 990) (2011)

Page 2	n 990, Part IV, line 22.	(f) Description of non-cash assistance			i					nal information.		IVE FOR A DONATION	H DISPERSEMENTS					1 1 1 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	<b>s in the United States.</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 22. is needed.	(e) Method of valuation (book, FMV, appraisal, other)								line 2, and any other additio		TION SOLICITS THE COOPERAT	ETHER OR NOT TO MAKE A DONATION. THE BOARD OF DIRECTORS REVIEW ALL CASH DISPERSEMENTS						
	nplete if the organiza	(d) Amount of non-cash assistance								n required in Part I,		, WHEN AN ORGANIZA	NATION. THE BOARD C						
dividuals in the United States. Com	Inited States. Con I.	(c) Amount of cash grant								rovide the informatic	NDS:	E THAT THEY SERVE	NOT TO MAKE A DOI	PRIOR TO DISPERSAL.	ISPERSAL.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	
	idividuals in the Ula al space is needed.	(b) Number of recipients								ete this part to pro	USE OF GRANT FUN	MMUNITY AND PEOPL	CIDES WHETHER OR	E BOARD PRIOR TO			, , , , , , , , , , , , , , , , , , ,	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	
т 990) (2011)	Grants and Other Assistance to Individual Part III can be duplicated if additional space	(a) Type of grant or assistance								Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS:	THE COOPERATIVE DONATES TO SUPPORT THE COMMUNITY AND PEOPLE THAT THEY SERVE, WHEN AN ORGANIZATION SOLICITS THE COOPERATIVE FOR A DONATION	THE COOPERATIVE REVIEWS THE REQUEST AND DECIDES WH	ANY LARGE AMOUNTS WOULD BE APPROVED BY THE BOARD					
Schedule I (Form 990) (2011)	Part III		-	2	က	4	5	9	7	Part IV	PART I, LINE	THE COOPE	THE COOPE	ANY LARGE			; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		

## **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.

OMB No 1545-0047 2011 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

BLACK HILLS ELECTRIC COOPERATIVE INC 46-0111503 Part | Questions Regarding Compensation

	<del></del>			
10	Check the appropriate having if the organization provided any of the following to aview a payor hat direction		Yes	Νo
ıa	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		l	[
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees	l	İ	
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
			ŀ	
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		1	ì
	explain	1b	İ	
2	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		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a	İ		
	related organization to establish compensation of the CEO/Executive Director. Explain in Part III		ŀ	
	Compensation committee			1
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
_		1	1	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	İ	ŀ	
	organization or a related organization.			
a	Receive a severance payment or change-of-control payment?	4a	ļ	<b>/</b>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		1
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	ļ	<b>✓</b> _
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	l		
	Only section E01(a)(3) and E01(a)(4) argonizations must complete lines E. 0			
5	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			
J	compensation contingent on the revenues of	ł		ŀ
а	The organization?	5a		l
b	Any related organization?	5b	[	
b	If "Yes" to line 5a or 5b, describe in Part III	30	····	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	1		
_	compensation contingent on the net earnings of.			ŀ
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III	<u> </u>		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	1	•	Ì
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		[
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject		<b></b> -	
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe		}	
	ın Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			<u> </u>
	Regulations section 53 4958-6(c)?	0	Ī	!

Schedule J (Form 990) 2011

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 organizations, described in the

(F) Compensation reported as deferred in prior Form 990 Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. 219,850 161,582 184,951 (E) Total of columns (B)(I)–(D) 66,028 52,787 58,313 (D) Nontaxable benefits (C) Retirement and other deferred compensation (III) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII. 9 100 100 (II) Bonus & incentive compensation 153,722 108,695 126,538 (i) Base compensation  $\Xi$  $\Xi$ (≘ € 338 **E E E** € € ΞΞ ΞΞ ΞΞ 33 ΞΞ  $\epsilon \epsilon$ ΞΞ ALAN MICHALEWICZ (A) Name **WALKER WITT** DANIEL HUTT 6 2 œ 2 F 2 5 14 5 16

Schedule J (Form 990) 2011

for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II.							•	Schedule J (Form 990) 2011
Part III Supplemental Information Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.								

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

## Supplemental Information to Form 990 or 990-EZ

2011

Department of the Treasury Internal Revenue Service 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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization Employer identification number **BLACK HILLS ELECTRIC COOPERATIVE INC** 46-0111503 FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS 7,297 VOTING MEMBERS FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS THE MEMBERS VOTE ANNUALLY ON THE BOARD OF DIRECTORS AND ANY BY-LAW CHANGES FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990 COMPTROLLER PREPARES THE FORM 990 A COPY IS PROVIDED TO THE BOARD OF DIRECTORS AND MANAGEMENT FOR REVIEW PRIOR TO FILING FORM 990, PART VI, LINC 12C - ENFOREMENT OF CONFLICTS POLICY WHEN POTENTIAL CONFLICT OF INTEREST COMES UP, GENERAL COUNSEL REVIEWS CONFLICT OF INTEREST POLICY AND THE BOARD INSURES COMPLIANCE THE POLICY IS REVIEWED ON A YEARLY BASIS FORM 990, PART VI, LINE 15A & B - COMPENSATION PROCESS A YEARLY COMPENSATION STUDY IS PREPARED AND PRESENTED TO THE BOARD. THE STUDY INCLUDES NATIONAL, REGIONAL, STATE AND LOCAL WAGE COMPARISONS FOR EACH POSITION WITHIN THE COOPERATIVE IT COMPARES INTERNAL EQUITY BASED ON BENCHMARKING A COMMON POSITION ALONG WITH EVALUATING EXTERNAL COMPETITIVENESS FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION ALL DISCLOSURES OF DOCUMENTS REQUIRED BY LAW ARE MADE AVAILABLE TO THE PUBLIC PRIVATE CORPORATE DOCUMENTS, FINANCIAL STATEMENTS, AND POLICIES MAY BE AVAILABLE TO THE PUBLIC OR MEMBERS PURSUANT TO BOARD POLICY NUMBER 111 MEMBER REQUESTS FOR INFORMATION UPON WRITTEN REQUEST THE GENERAL MANAGER SCHEDULES A TIME FOR THE REVIEW OF REQUESTED ARTICLES AT THE COOPERATIVE HEADQUARTERS ALSO AUDITED FINANCIAL STATEMENT IS MAILED

YEARLY TO ALL ACTIVE MEMBERS OF THE COOPERATIVE

Chedule O (Form 990 of 990-E2) (2011)	Page Z
Hame of the organization	Employer identification number
BLACK HILLS ELECTRIC COOPERATIVE INC	46-0111503
FORM 990, PART IX, LINE 4 - BENEFITS PAID TO OR FOR MEMBERS	
\$206,975 CAPITAL CREDITS PAID OUT TO MEMBERS	
\$200,973 CALITAC GREDITS FAID OUT TO MEMBERS	
FORM 990, PART XI, LINE 5 - OTHER CHANGES IN NET ASSETS OF FUND BALANCES	
\$206,975 RETIREMENT OF CAPITAL CREDITS	
\$32,260 RETAINED CAPITAL CREDITS (UNCLAIMED & ESTATE DISCOUNT LESS REISSUED UNCLAIM	MED)
-\$1,000 SCHOLARSHIP ISSUED FROM CONVERTED MEMBERSHIPS	
41,000 SOLIOERICATIF 1990ED I KOM CONVEKTED MEMBERSHIN S	
-\$175,715 TOTAL CHANGE	
FORMAND BART VILLING AG ANDIT OVERCIOUT	
FORM 990, PART XII, LINE 2C - AUDIT OVERSIGHT	•••••
THE BOARD OF DIRECTORS IS RESPONSIBLE FOR THE OVERSIGHT OF THE AUDIT AND THE SELE	CTION OF AN INDEPENDENT
ACCOUNTANT	
	•••••••••••••••••••••••••••••••••••••••
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Schedule O (Form 990 or 990-EZ) (2011)

## SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

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OMB No 1545-0047

Open to Public

Inspection
Employer identification number

46-0111503 Identification of Disregarded Entities (Complete of the organization answered "Yes" to Form 990, Part IV, line 33.) BLACK HILLS ELECTRIC COOPERATIVE INC Part

	(a) Name, address, and EIN of disregarded entity	(b) Primary activity		(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)							
(2)							
(3)							
(4)							
(2)							
(9)							
Part II	Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during the	Complete if the stax year.)	organization ar	<b>nizations</b> (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had sturing the tax year.)	Form 990, Part I	IV, line 34 becau	use it had
	(a) Name, address, and EIN of related organization Pr	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
							Yes No
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
(7)							
For Paperwo	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat N	Cat No 50135Y		Schedule F	Schedule R (Form 990) 2011

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

(a) Name, address, and EIN of related organization	(b) (c) Primary activity Legal domicile (state or foreign country)	(d)  Il Direct controlling entity or or yn	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Of- Disproportionate , allocations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(k) Percentage ownership
(1)						Yes No		Yes	
(2)									
(2)									
(4)									
(5)							4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
(9)									
(2)							:		
line 34 be	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)  (b)  (corp. S corp.	ed organizations treat (b) Primary activity	eated as a corp	orporation or tru:  (c) Legal domicile (state or foreign country)	ust during the t	ax year.) (e) Type of entity (C corp. S corp, or trust)	Share of total	(g) Share of end-of-year assets	(h) Percentage ownership
(1) BLACK HILLS ENGINEERING & DEVELOI	(1) BLACK HILLS ENGINEERING & DEVELOPMENT	NOT ACTIVE	G		_	ن			
(2) BLACK HILLS TELECOMMUNICATION CC	(2) BLACK HILLS TELECOMMUNICATION COOPERATIVE	THE POST ACT							
(3)	0.0000000000000000000000000000000000000		2						
(4)									
(5)									
(9)									
(2)									
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Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Schedule R (Form 990) 2011

Part V Transactio

<u>o</u>	ted organizations listed	ın Parts II–IV? · ·	Yes No
<ul> <li>b Gift, grant, or capital contribution to related organization(s)</li> <li>c Gift, grant, or capital contribution from related organization(s)</li> </ul>			10 10
			1d
e Loans or loan guarantees by related organization(s)			- -
f Sale of assets to related organization(s)			
			. 1g
			<b>-</b>
i Lease of facilities, equipment, or other assets to related organization(s)		· · · · ·	; <del>=</del>
J Lease of facilities, equipment, or other assets from related organization(s)			1,
k Performance of services or membership or fundraising solicitations for related organization(s)			<b>+</b>
Performance of services or membership or fundraising			=
<ul> <li>m sharing of facilities, equipment, mailing lists, or other assets with related organization(s)</li> <li>n Sharing of paid employees with related organization(s)</li> </ul>			-t
Reimbursement paid by related organization(s) for expenses			o at
			<b>L</b>
<ul> <li>q Other transfer of cash or property to related organization(s)</li> <li>r Other transfer of cash or property from related organization(s)</li> </ul>			. 14
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	line, including covered	relationships and tran	saction thresholds.
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(6)			
(4)			
(5)			
(9)			
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## Part VI Unrelated C

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners			(h) Disproportionate	(I) Code V—UBI		(k) Percentage
	.13	(state or foreign country)	income (related, unrelated, excluded from tax under	section 501(c)(3) organizations?	total income	end-or-year assets	allocations	of Schedule K-1 (Form 1065)	managing partner?	ownersnip
			section 512-514)	Yes No			Yes No		Yes No	
(1)										:
(2)										
(3)			; ;							
(4)										
(5)										
(9)			,							
(7)										
(8)										
(6)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
								Sche	Schedule R (Form 990) 2011	n 990) 2011

hedule R (	Form 990) 2011	Page 5
art VII	Supplemental Information  Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	-
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