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DLN: 93493320050902

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

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

East h	2011 6	londor voor e	or tax year beginning 0	1-01-2011 and ending 12-31-201	1		
		C Name of orga	anızatıon			D Employer	identification number
- Check if - Address	applicable change	GOLDEN SPRI	EAD ELECTRIC COOPERATIV	E INC		75-1941	060
_	-	Doing Busines	ss As			E Telephone	
Name c –	-					(806) 379	9-7766
Initial re	turn			not delivered to street address) Room/s	uite		ots \$ 169,933,833
Termina	ited	PO BOX 9898				u dioss receip	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
- Amende	d return		state or country, and ZIP +	4			
– Applicat	ion pending	AMARILLO, TX	X 791055898				
		F Name	and address of principa	al officer	H(a) In the		uum fau
		JACQUEL	INE HUMPHREY		affilia	s a group reti	Ulli loi
		PO BOX 9					· _ · _
		AMARILL	O,TX 791055898		1 ' '	l affiliates incl	·
Tax-ex	empt status		▼ 501(c) (12) 4 (ms4	ert no)	I _		st (see instructions)
		. , , , ,		21(110) 4347(4)(1) 01 327	H(c) Grou	p exemption	number F
Websi	ite:► WV	W GSEC CO) P				
Form of	organization	Corporation	Trust Association	Other ►	L Year of fo	rmation 1984	M State of legal domicile TX
Part I	Sum	mary			•		
1	Briefly d	escribe the or	aanızatıon's mission or	most significant activities			
		ELECTRIFICA					
2							
						=0.5	
} 2		•		ntinued its operations or disposed		1	1
		_		body (Part VI, line 1a)		3	
اذ			_	e governing body (Part VI, line 1b			
5	Total nu	mber of indivi	duals employed in cale	ndar year 2011 (Part V, line 2a)		5	
6	Total nu	mber of volunt	teers (estimate if neces	ssary)		6	C
· ′				/III, column (C), line 12		7a	a 0
	b Net unre	lated busines	s taxable income from	Form 990-T, line 34		7t	0
					Prio	r Year	Current Year
8	Contri	butions and g	rants (Part VIII, line 1	h)		0	315,158
≝ ջ	Progra	am service rev	enue (Part VIII, line 2	g)		79,437,051	152,326,105
enue 9 10	Inves	tment income	(Part VIII, column (A)	, lines 3, 4, and 7d)		12,465,924	
품 ₁₁	Other	revenue (Part	VIII, column (A), line	s 5, 6d, 8c, 9c, 10c, and 11e)		1,441,037	2,637,600
12	Total	revenue—add	lines 8 through 11 (mu	ıst equal Part VIII, column (A), lır	ne 💮		
	12) .		<u></u>			93,344,012	169,832,644
13	Grants	s and sımılar a	ımounts paıd (Part IX,	column (A), lines 1-3)		0	0
14	Benefi	ts paid to or fo	or members (Part IX, c	olumn (A), line 4)		0	0
္တ 15			pensation, employee be	enefits (Part IX, column (A), lines		4 100 504	E 035 550
(왕) 16 16 16	5-10	•				4,108,504	
₹ ^{16.}				ımn (A), line 11e)		0	0
ਡ '			ses (Part IX, column (D), line				
17	Other	expenses (Pa	rt IX, column (A), lines	s 11a-11d, 11f-24e)		42,105,411	117,759,843
18	Total	expenses Ado	d lines 13–17 (must ed	qual Part IX, column (A), line 25)		46,213,915	122,795,393
19	Reven	ue less expen	ises Subtract line 18 f	rom line 12		47,130,097	47,037,251
s %						of Current	End of Year
Security 20			4 June 4 5 5			ear	
20						191,897,357	
[편 21 변화						240,471,725	
				21 from line 20	2	251,425,632	301,483,478
Part I	_	ature Bloc					
	e and belie			his return, including accompanying s laration of preparer (other than offic			
	****					12-11-13	
ign	Signa	ature of officer			Da	ate	
lere			REY CHIEF FINANCIAL OFFIC	CER			
	Type	or print name ai	nd title				
	Prepare	rs L		Date	Check If		payer identification number
aid	Signature GARY D MITCHELL Self- (see instructions) P00005725						ons)
reparer'	S Firm's n	ame (or yours	. CONNOR MCMILLON MITC	LHELL & SHENNUM PLLC			
Jse Only	ıf self-ei	mployed),	·			EIN ▶ 26-319	95732
,	address,	and ZIP + 4	PO BOX 15650			Dhone no	(806) 372-6661
	- 1		AMARILLO TX 791055650	n		Prione no F	(806) 373-6661

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

Form	990 (2011)				Page 2
Par		nent of Program Service A Schedule O contains a response			৮
1	Briefly describe	e the organization's mission			
NEG(MEM	OTIATION AND BER SYSTEMS T	SECURING OF RELIABLE POW O CONTINUE TO PROVIDE AN	PERATIVE IS TO ENGAGE IN LO ER SUPPLY RESOURCES FOR ITS D DEVELOP DEPENDABLE, LOW R THEIR MEMBER/CONSUMERS	S MEMBERS, AND TO AC	T JOINTLY WITH ITS
2	the prior Form 9	990 or 990-EZ?	ogram services during the year wh		Γ Yes Γ No
	If "Yes," describ	oe these new services on Schedu	e O		
3	services? .		significant changes in how it condu	icts, any program	┌ Yes ┌ No
4	Describe the or expenses Sect	ion 501(c)(3) and 501(c)(4) orga	omplishments for each of its three nizations and section 4947(a)(1) ses, and revenue, if any, for each p	trusts are required to repo	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$	
40	•	, , ,	SUMER-OWNED WHOLESALE ELECTRIC PO	, ,	CTRIC DISTRIBUTION
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	(Expenses \$) (Revenue \$)
4e	Total program	service expenses►\$			

Part IV	Checklist	of Rec	uired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f 2}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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? <i>If</i> "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		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20h		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1^7 If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

•	•	
Part V	Statements Regarding	Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V \cdot . \cdot . \cdot . \cdot . \cdot . \cdot . $$			
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a.	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this			
_	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year [?]	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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 or securities account)?	4a		No
b	·			
-	If "Yes," enter the name of the foreign country ►			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
-		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
u	74			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	ĺ		
_	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	- 3		
	Form 1098-C?	7h		
3	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		
_	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a Ob		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter Instruction food and capital contributions included on Part VIII, line 12			
	Initiation fees and capital contributions included on Part VIII, line 12 10a 10b			
ט	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	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)			
.2a	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			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

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

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

Se	ection A. Governing Body and Management								
			Yes	No					
1-	Enter the number of voting members of the governing hady at the and of the tay.								
1a	Enter the number of voting members of the governing body at the end of the tax year								
b	Enter the number of voting members included in line 1a, above, who are independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No					
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		No					
4									
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Did the organization have members or stockholders?	6	Yes						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7-	V						
b	more members of the governing body?	7a 7b	Yes						
8	or persons other than the governing body?								
а	year by the following The governing body?	8a	Yes						
u b	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		103						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No					
	ection B. Policies (This Section B requests information about policies not required by the Internal								
Ке	evenue Code.)		Yes	No					
100	Did the organization have local chapters, branches, or affiliates?	10a	res	No					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10a		INO					
ט	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes						
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Yes						
b	Other officers or key employees of the organization	15b	Yes						
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)								
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No					
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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?	16b							
	ection C. Disclosure								
17	List the States with which a copy of this Form 990 is required to be filed AZ, GA, IN								
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)								

- Own website Another's website Vpon 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 See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 JACQUELINE HUMPHREY 905 S FILLMORE STREET SUITE 220

AMARILLO, TX 79101 (806) 379-7766

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

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

(a) Name and Title A verage hours par week (describe hours for related organizations in Schedule O) See Additional Data Table (b) Position (do not check more than one box, unless person is both an officer and a director/trustee) (c) Position (do not check more than one box, unless person is both an officer and a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations) (describe hours for related organizations) (describe hours for related organization) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for the director/trustee)	Check this box if neither the organiz	•	lated o	rganı	ızatı	ons	compe	ensat	ed any current or fo	ormer officer, direct	tor, or trustee
for related organizations in Schedule Officer Schedule O) organizations	(A)	(B) Average hours per week	Positi more unles an	(C) Position (do not check more than one box, unless person is both an officer and a				(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
See Additional Data Table		for	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		Miscy	I
	See Additional Data Table										

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

hours per week (descri			A verage Position (do not check hours more than one box, unless person is both week an officer and a (describe director/trustee)							compensation com from the fro organization (W-org 2/1099-MISC) (W-				ated of other sation the ion and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organiza	
See Addition	nal Data Table													
												\dashv		
												\dashv		
												\dashv		
												1		
-														
-												\dashv		
												\dashv		
1b Sub	o-Total				•	•		<u> </u>		Ι				
	al from continuation sheets							•						
	al (add lines 1b and 1c) . al number of individuals (incl						• •	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		2,350,882	- n	0		900,846
	00,000 of reportable compens	_					above	<i>,</i> •••••	o receive	d more en	•••			
	the organization list any forr ine 1a? If "Yes," complete Sch					ey e	mploy	ee, d	or highes	t compens	ated employee	3	Yes	No
4 For orga	any individual listed on line 1 anization and related organiza	la, is the sum of	f report	able d	com									No
	any person listed on line 1a	receive or accru	· · ıe comp	• oensa	• ition	• rfror	n any	• unre	· · ·	· · · janization (or individual for	4	Yes	
ser	vices rendered to the organiz	ation? <i>If</i> "Yes,"	complet	e Sch	edul	e J f	or suci	h per	son .		•	5		No
Section	on B. Independent Con	tractors												
\$10	nplete this table for your five 00,000 of compensation from within the organization's tax y	the organizatio												
	Nan	(A) ne and business add	dress							Desc	(B) ription of services		(C Comper	
2211 ELK R	POWER PARTNERS IVER ROAD SPRINGS, CO 80477									EPC CONTR	ACTOR		14	,420,950
PO BOX 848 DALLAS, TX	75284									ORIGINAL E	QUIP MANUFACTURI	E	3	3,133,239
PO BOX 698 ANDALUSIA,	, AL 36420									CONSTRUCT	TION CONTRACTOR		2	,226,543
1015 FIFTE WASHINGTO	IS & O'NEIL PC ENTH ST NW SUITE 1200 DN, DC 20005									LEGAL			1	,918,752
CH GUERNSEY INC PO BOX 960012 CONSULTING OKLAHOMA CITY, OK 73196							1	,801,671						
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►32														

Part	7.7.7.1	Statement of Revenue					
			Tot	(A) tal revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated campaigns 1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b					
ΣĒ.	c	Fundraising events 1c					
Ĕä	d	Related organizations 1d					
<u>が</u>	e	Government grants (contributions) 1e 315,	158				
등등	l f	All other contributions, gifts, grants, and 1f	 }		i		
量量	١.	similar amounts not included above	—				
置る	g	Noncash contributions included in					
<u> </u>	h	lines 1a-1f \$ Total. Add lines 1a-1f	▶	315,158			
ပ္က	⊢"			313,130			
<u>a</u>		Business Co.	de				
e e	2a	WHOLESALE POWER 22	21000	138,834,705	138,834,705		
æ	Ь	PATRON SOURCE EARNINGS 22	21000	12,890,547	12,890,547		
e S	c	PATRONAGE INCOME 22	21000	600,853	600,853		
F is	d						
Q,	e						
Program Service Revenue	f	All other program service revenue	 				
္နို	`						
	g	Total. Add lines 2a-2f		152,326,105			
	3	Investment income (including dividends, interest					
		and other similar amounts , i i i i	<u> </u>	14,552,505			14,552,505
	4		<u> </u>				
	5	Royalties					
	l_	(1) Real (11) Persona Gross rents 250,017	1				
	6a	Gross rents 250,017 Less rental 101,189					
	b	expenses					
	C	Rental income 148,828 or (loss)					
	d	Net rental income or (loss)	►	148,828			148,828
		(ı) Securities (ıı) Other					
	7a		1,276				
		from sales of assets other					
	Ь	than inventory Less cost or	0				
	"	other basis and					
	c	sales expenses Gain or (loss)	1,276				
	d	Net gain or (loss)	<u></u>	1,276	1,276		
	8a	Gross income from fundraising					
<u>o</u>		events (not including					
둢		\$					
Š		of contributions reported on line 1c) See Part IV, line 18					
ά.		a					
Other Revenue	ь	Less direct expenses b					
ŏ	c	Net income or (loss) from fundraising events	►				
	9a	Gross income from gaming activities					
		See Part IV, line 19					
	.	a	\longrightarrow				
	b	Not income or (loss) from gaming activities	<u></u>				
	10a	Net income or (loss) from gaming activities	·				
	10a	Gross sales of inventory, less returns and allowances .					
		a					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of inventory	-				
		Miscellaneous Revenue Business Co	de				
	11a	ADMIN REIMBURSEMENT 22	21000	2,488,772	2,488,772		
	ь						
	c		1				
	d	All other revenue	+				
	e	Total. Add lines 11a-11d					
			▶	2,488,772			
	12	Total revenue. See Instructions	▶	160 922 644	154 016 150	0	14 701 222
			1	169,832,644	154,816,153	U	14,701,333

3

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14 15

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23

Joint costs. Check here ► 🗀 If following

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

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) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 2,202,606 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 1,408,891 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 582,397 Other employee benefits 601,019 240,637 Fees for services (non-employees) 11 Management 61,668 Legal Accounting Lobbying Professional fundraising See Part IV, line 17 . . Investment management fees 1,127,099 g Other 12 Advertising and promotion . . . 1,328,483 Office expenses 361,797 13 Information technology Royalties . . 16 741,925 273,144 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 63,049 20 16,952,801 Payments to affiliates 22 Depreciation, depletion, and amortization 7,125,417 748,912 Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) **FUEL EXPENSE** 41,932,805 TRANSMISSION EXPENSE 33,408,305 PLANT OPS & MGT 1,957,101 MEMBER SERVICES 1,347,180 d е f All other expenses 10,330,157 25 Total functional expenses. Add lines 1 through 24f 122,795,393

Part X **Balance Sheet** (A) (B) Beginning of year End of year 529,950 1,096,260 1 6.669.489 77.836.605 2 2 Savings and temporary cash investments 3 3 48.887.474 4 131.380.867 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 183,753,733 388,068,825 7 8 1.611.439 9 9 12.584.283 Prepaid expenses and deferred charges 179.366.599 Land, buildings, and equipment cost or other basis *Complete* 10a Part VI of Schedule D 10a 10b 38,534,134 b Less accumulated depreciation 190,029,014 **10c** 140,832,465 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 Intangible assets 62,027,697 15 182,468,966 15 491,897,357 935,879,710 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 59,645,779 17 81,214,975 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 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 \ldots . \ldots . \ldots 22 23 Secured mortgages and notes payable to unrelated third parties . . . 172,467,478 23 512,746,318 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 8,358,468 40,434,939 25 D 26 240,471,725 26 634,396,232 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 Balances through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ 🔽 and complete lines 30 through 34. ö 0 30 Capital stock or trust principal, or current funds 30 Assets 13.063.020 12.545.725 31 31 Paid-in or capital surplus, or land, building or equipment fund 238,362,612 288,937,753 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 Total net assets or fund balances 251.425.632 33 301.483.478 34 Total liabilities and net assets/fund balances 491.897.357 34 935.879.710

Pa	Check if Schedule O contains a response to any question in this Part XI			. 				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		169,8	332,64			
2	Total expenses (must equal Part IX, column (A), line 25)	2	122,795,3					
3	Revenue less expenses Subtract line 2 from line 1	3		47,0	37,25			
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4							
5	Other changes in net assets or fund balances (explain in Schedule O)	5		3,0	20,59			
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		301,4	183,47			
Par	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮				
1	Accounting method used to prepare the Form 990			Yes	No			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No			
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes				
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2 c	Yes				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued		100				
	Separate basis Consolidated basis Both consolidated and separated basis							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes				

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DLN: 93493320050902

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Open to Public

	·	orm 990. F See separate instructions.		Inspection
	me of the organization DEN SPREAD ELECTRIC COOPERATIVE INC			yer identification number
Pa	rt I Organizations Maintaining Donor Adorganization answered "Yes" to Form 99			
		(a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
ŀ	Aggregate value at end of year			
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the	3	or advise	ed Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit			purpose Yes No
Pai	rt III Conservation Easements. Complete	ıf the organization answered "Yes" to	o Form	990, Part IV, line 7.
L 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualice easement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	certified	
	casement on the last day of the tax year]		Held at the End of the Year
а	Total number of conservation easements		2a	
ь	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified his	storic structure included in (a)	2c	
d	Number of conservation easements included in (c) ac	cquired after 8/17/06	2d	
3	Number of conservation easements modified, transfe	ء erred, released, extinguished, or terminate	d by the	organization during
	the taxable year 🛌			
ı	Number of states where property subject to conserva	ation eacement is located by		
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	g the periodic monitoring, inspection, hand	— dling of v	iolations, and Yes No
5	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents dur	ing the year ▶
,	Amount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation easements	during t	the year
	▶ \$			
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	2(d) above satisfy the requirements of sec	tion	ΓYes ΓNα
•	In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easen	the footnote to the organization's financial		
ar	Complete if the organization answered "		or Othe	er Similar Assets.
la	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furt	
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ir		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			▶ \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA:		r financı	
2		5 110 relating to these itellis		E 4
а	Revenues included in Form 990, Part VIII, line 1			▶ \$

b Assets included in Form 990, Part X

Реп	411 Organizations Maintaining Co	<u>liections of Art,</u>	HIS	TOFI	<u>cai irea</u>	sures, or c	tne	r Simila	r Asse	ts (co	<u>ntinuea)</u>
3	Using the organization's accession and other items (check all that apply)	records, check any	ofth	ne foll	lowing that	are a signific	ant u	se of its c	ollection	า	
а	Public exhibition		d	Γ	Loan or e	xchange prog	rams				
b	Scholarly research		е	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and explai	n hov	w the	y further th	ne organizatioi	ı's ex	cempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							nılar	Г	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Comple	te ıf	the	organizat	tion answere		es" to Fo	rm 990),	·
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermed	dıary	for c	ontributior	ns or other ass	sets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the f	ollow	/ıng ta	able	Г			Amou		
_	Dammung balanca					-	1.0		Amot	ını	
c d	Beginning balance Additions during the year					}	1c 1d				
e						-	1e				
f	Distributions during the year					-	1f				
2-	Ending balance	uma 000 Dawt V Ivaa				Ĺ				V	
2a	Did the organization include an amount on Fo		21,						,	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete i		200	wor	ad "Vac" i	to Form 990	Dar	t IV line	10		
ΓŒ	Endowment I dilds. Complete i	(a)Current Year		Prior '		Two Years Back		Three Years		Four Ye	ears Back
1a	Beginning of year balance										
b	Contributions										
C	Investment earnings or losses										
d	Grants or scholarships						<u> </u>				
е	Other expenditures for facilities and programs										
f	Administrative expenses						_				
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held a	S								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
С	Term endowment ▶										
3a	Are there endowment funds not in the posses	ssion of the organiza	tion	that a	are held an	ıd admınıstere	d for	the			
	organization by (i) unrelated organizations								3a(i)	Yes	No
	(ii) related organizations			•			•		3a(ii)		
b	If "Yes" to 3a(II), are the related organization						٠.		3b		
4	Describe in Part XIV the intended uses of th	e organization's end	owme	ent fu	ınds						
Par	t VI Land, Buildings, and Equipme	nt. See Form 990	0, Pa	irt X	, lıne 10.	_					
	Description of property				Cost or othe (investment			(c) Accumi deprecia		(d) Boo	ok value
1a	Land					2,826	5,033				2,826,033
b	Buildings					160,150),153	26,14	44,575	134	4,005,578
С	Leasehold improvements										
d	Equipment										
е	Other	<u> </u>				16,390	,413	12,3	89,559	-	4,000,854
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	rm 990, Part X, colum	nn (B)), line	10(c).) .			▶		140	0,832,465

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	(D)Book value	Cost or end-or	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
- (a) Description of investment type	(b) book value	Cost or end-or	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III	ne 15.	_	
(a) Descrip			(b) Book value
See Additional Data Table			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			182,468,966
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
ACCRUED EMPLOYEE VACATION	372,963		
ACCRUED LIAB-OVER ACCRUED REVENUE	22,477,135		
SUPPLEMENTAL PENSION LIABILITY	286,911		
ACCRUED INTEREST EXPENSE	8,906,110		
OTHER ACCRUED EXPENSES	200,923		
DEFERRED CREDITS	1,299,504		
ACCRUED PROPERTY TAX	782,899		
PATRONAGE CAPITAL PAYABLE	5,978,494		
ACCRUED FRANCHISE TAX	130,000		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	40,434,939		
((-) Site and Equal (Sim Soof (are in cor (b) mile 25)	70,75,75		

-	rotal revenue (Form 990, Part VIII, Column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
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	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
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		
c	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		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a]	
b	Other (Describe in Part XIV)]]	
C	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per F	<u>leturn</u>
1	Total expenses and losses per audited financial statements	1 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
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 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) 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
	t XIV Supplemental Information		
	pplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P		
Part	V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete t	tnis part	to provide any

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN	PART X	ON JANUARY 1, 2009, THE ORGANIZATION ADOPTED THE
TAX POSITIONS UNDER FIN 48		"UNCERTAIN TAX POSITIONS" PROVISIONS OF
		ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE
		UNITED STATES OF AMERICA THE PRIMARY TAX
		POSITIONS OF THE ORGANIZATION ARE ITS FILING
		STATUS AS A TAX EXEMPT ENTITY AND ITS NEED TO
		AVOID EXCEEDING A CERTAIN PERCENTAGE OF ITS
		INCOME FROM NONMEMBERS TO MAINTAIN ITS TAX-
		EXEMPT STATUS THE ORGANIZATION DETERMINED THAT
		IT IS MORE LIKELY THAN NOT, THAT THEIR TAX POSITION
		WILL BE SUSTAINED UPON EXAMINATION BY THE IRS, OR
		OTHER STATE TAXING AUTHORITY AND THAT ALL TAX
		BENEFITS ARE LIKELY TO BE REALIZED UPON
		SETTLEMENT WITH TAXING AUTHORITIES

Software ID: Software Version:

EIN: 75-1941060

Name: GOLDEN SPREAD ELECTRIC COOPERATIVE INC

Form 990, Schedule D, Part IX, - Other Assets

ACCRUED INTEREST RECEIVABLE 9,021,906 INVESTMENTS IN ASSOCIATED COMPANIES 109,196,160 OTHER MATERIALS & SUPPLIES 94,422 OTHER PREPAIDS 446,295 SUPPLEMENTAL PENSION 286,911 DEBT ISSUANCE COSTS 2,938,882 HOLCOMB PROJECT 1,696,296 INVESTMENTS-AMARILLO CLUB 1,125 LAND HELD FOR FUTURE USE 427,470 ESCROW DEPOSIT 8,840,376 ESCROW DEPOSIT 8,840,376 REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 10,000,000 DI STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,586 GB SALT CREEK SUBSTATION 9,275	(a) Description	(b) Book value
OTHER MATERIALS & SUPPLIES 94,422 OTHER PREPAIDS 446,295 SUPPLEMENTAL PENSION 286,911 DEBT ISSUANCE COSTS 2,938,882 HOLCOMB PROJECT 1,696,298 INVESTMENTS-AMARILLO CLUB 1,125 LAND HELD FOR FUTURE USE 427,470 ESCROW DEPOSIT 8,840,376 REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275		9,021,906
OTHER PREPAIDS 446,295 SUPPLEMENTAL PENSION 286,911 DEBT ISSUANCE COSTS 2,938,882 HOLCOMB PROJECT 1,696,298 INVESTMENTS-AMARILLO CLUB 1,125 LAND HELD FOR FUTURE USE 427,470 ESCROW DEPOSIT 8,840,376 REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	INVESTMENTS IN ASSOCIATED COMPANIES	109,196,160
SUPPLEMENTAL PENSION 286,911 DEBT ISSUANCE COSTS 2,938,882 HOLCOMB PROJECT 1,696,298 INVESTMENTS-AMARILLO CLUB 1,125 LAND HELD FOR FUTURE USE 427,470 ESCROW DEPOSIT 8,840,376 REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	OTHER MATERIALS & SUPPLIES	94,422
DEBT ISSUANCE COSTS 2,938,882 HOLCOMB PROJECT 1,696,298 INVESTMENTS-AMARILLO CLUB 1,125 LAND HELD FOR FUTURE USE 427,470 ESCROW DEPOSIT 8,840,376 REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	OTHER PREPAIDS	446,295
HOLCOMB PROJECT 1,696,298 INVESTMENTS-AMARILLO CLUB 1,125 INVESTMENTS-AMARILLO CLUB 1,125 INVESTMENTS-AMARILLO CLUB 1,25 INVESTMENTS-AMARILLO CLUB 1,25 INVESTMENTS 1,518,023 INVESTMENTS 1,518,023	SUPPLEMENTAL PENSION	286,911
INVESTMENTS-AMARILLO CLUB 1,125 LAND HELD FOR FUTURE USE 427,470 ESCROW DEPOSIT 8,840,376 REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	DEBT ISSUANCE COSTS	2,938,882
LAND HELD FOR FUTURE USE 427,470 ESCROW DEPOSIT 8,840,376 REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	HOLCOMB PROJECT	1,696,298
ESCROW DEPOSIT 8,840,376 REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	INVESTMENTS-AMARILLO CLUB	1,125
REGULATORY ASSETS 1,518,023 ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	LAND HELD FOR FUTURE USE	427,470
ANTELOPE - PHASE II 159,380 COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	ESCRO W DEPOSIT	8,840,376
COMPRESSOR - FCGS 2,421,774 7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	REGULATORY ASSETS	1,518,023
7FA GAS TURBINE - GENERATOR 20,404,561 D11 STEAM TURBINE - GENERATOR 10,000,000 FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	ANTELOPE - PHASE II	159,380
D11 STEAM TURBINE - GENERATOR FUNDS HELD BY TRUSTEE GB AUSTIN SUBSTATION GB SALT CREEK SUBSTATION 9,275	COMPRESSOR - FCGS	2,421,774
FUNDS HELD BY TRUSTEE 15,009,014 GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	7FA GAS TURBINE - GENERATOR	20,404,561
GB AUSTIN SUBSTATION 7,588 GB SALT CREEK SUBSTATION 9,275	D11 STEAM TURBINE - GENERATOR	10,000,000
GB SALT CREEK SUBSTATION 9,275	FUNDS HELD BY TRUSTEE	15,009,014
· · · · · · · · · · · · · · · · · · ·	GB AUSTIN SUBSTATION	7,588
WIND POWER PROJECTS -10,494	GB SALT CREEK SUBSTATION	9,275
	WIND POWER PROJECTS	-10,494

Form 990, Schedule D, Part X, - Other Liabilities

(a) Description of Liability

1 (a) Description of Liability	(b) A mount
ACCRUED EMPLOYEE VACATION	372,963
ACCRUED LIAB-OVER ACCRUED REVENUE	22,477,135
SUPPLEMENTAL PENSION LIABILITY	286,911
ACCRUED INTEREST EXPENSE	8,906,110
OTHER ACCRUED EXPENSES	200,923
DEFERRED CREDITS	1,299,504
ACCRUED PROPERTY TAX	782,899
PATRONAGE CAPITAL PAYABLE	5,978,494
ACCRUED FRANCHISE TAX	130,000

Compensation Information

DLN: 93493320050902

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

GUL	DEN SPREAD ELECTRIC COOPERATIVE INC	75-1941060						
Pa	rt I Questions Regarding Compensation		<u> </u>					
					Yes	Νo		
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III t							
	▼ First-class or charter travel							
	▼ Travel for companions	Γ	Payments for business use of personal residence					
	Tax idemnification and gross-up payments							
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)					
b	b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain							
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?							
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all tha	at appl	у					
	Compensation committee	_	Written employment contract					
	Independent compensation consultant	। ज	Compensation survey or study Approval by the board or compensation committee					
	Form 990 of other organizations	10	Approval by the board of compensation committee					
4	During the year, did any person listed in Form 990, Pa or a related organization	art VI	I, Section A, line 1a with respect to the filing organization					
а	Receive a severance payment or change-of-control payment?							
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?							
С								
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III							
	Only 501(c)(3) and 501(c)(4) organizations only mus	t com	plete lines 5-9.					
5	For persons listed in form 990, Part VII, Section A, li compensation contingent on the revenues of	ine 1a,	, did the organization pay or accrue any					
а	The organization?			5a				
b	Any related organization?			5b				
	If "Yes," to line 5a or 5b, describe in Part III							
6	For persons listed in form 990, Part VII, Section A, li compensation contingent on the net earnings of	ine 1a,	, did the organization pay or accrue any					
а	The organization?			6a				
b	Any related organization?			6b				
	If "Yes," to line 6a or 6b, describe in Part III							
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7				
8	Were any amounts reported in Form 990, Part VII, pa							
	subject to the initial contract exception described in I in Part III	Regs	section 53 4958-4(a)(3)? If "Yes," describe					
				8				
9	9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?							

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation			other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) MARK SCHWIRTZ	(I) (II)	441,575 0	4,650 0	0	270,790 0	22,974 0	739,989 0	
(2) JACQUELINE HUMPHREY	(I) (II)	175,922 0	1,865 0	0	57,875 0	26,515 0	262,177 0	
(3) MICHAEL WISE	(I) (II)	202,516	3,041 0	0	63,282 0	23,868 0	292,707 0	
(4) RANDY ALLISON	(I) (II)	174,189 0	2,626 0	0	53,188 0	19,243 0	249,246 0	
(5) MELODY GILLIS	(I) (II)	168,992 0	3,300 0	0	53,087 0	22,527 0	247,906 0	
(6) SHANE MCMINN	(I) (II)	137,562 0	2,170 0	0	44,623 0	21,733 0	206,088	
(7) STEVE WIEGAND	(I) (II)	132,312 0	3,019 0	0	42,342	24,014 0	201,687	
(8) WILLIAM PIPPIN	(I) (II)	130,850 0	1,336 0	0	34,925 0	18,504 0	185,615 0	
(9) MATT MOORE	(I) (II)	140,467 0	1,455 0	0	44,674 0	21,230 0	207,826 0	
_								
	-							
			ĺ					

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	1 A	AIR TRAVEL IS OCCASIONALLY CHARTERED IN ORDER FOR DIRECTORS TO ATTEND BOARD MEETINGS SUCH CHARTERED FLIGHTS ARE BOOKED WHEN MONETARILY SIMILAR AND/OR ADVANTAGEOUS COMPARED TO COMMERCIAL FLIGHTS OR MILEAGE DUE TO THE SIGNIFICANT TRAVEL REQUIREMENTS OF VARIOUS MEMBER COOPERATIVES IN REMOTE PARTS OF TEXAS MULTIPLE DIRECTORS PARTICIPATE IN A SINGLE CHARTERED FLIGHT SPOUSAL TRAVEL IS SUBMITTED AS PART OF SUBSTANTIATED EXPENSE REPORTS AND IS INCLUDED IN THE FORM W-2 OF THE EMPLOYEE OR THE FORM 1099-MISC OF THE DIRECTOR
	PART I, LINE 4B	SEE PART II COLUMN(C) DEFERRED COMPENSATION

Schedule J (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493320050902

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization GOLDEN SPREAD ELECTRIC COOPERATIVE INC **Employer identification number**

75-1941060

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	ONE CLASS OF MEMBERS EXISTS WITH EACH MEMBER COOPERATIVE HAVING EQUAL REPRESENTATION ON THE BOARD
	FORM 990, PART VI, SECTION A, LINE 7A	EACH MEMBER COOPERATIVE HAS TWO BOARD POSITIONS REPRESENTING THE VOTING GOVERNING BODY (16 MEMBER COOPERATIVES EQUATES TO 32 VOTING POSITIONS ON THE BOARD) THE MANAGER OF EACH MEMBER COOPERATIVE IS ELECTED BY THE RESPECTIVE MEMBER COOPERATIVE AND FILLS ONE OF THE TWO POSITIONS THE SECOND POSITION IS ELECTED FROM EACH EXISTING MEMBER COOPERATIVES BOARD BY THAT MEMBER COOPERATIVE
	FORM 990, PART VI, SECTION A, LINE 7B	CERTAIN DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO THE APPROVAL OF THE MEMBER COOPERATIVES
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 FOR THIS COMPANY WAS PREPARED BY AN OUTSIDE CPA FIRM AND REVIEWED BY THE AUDIT COMMITTEE.
	FORM 990, PART VI, SECTION B, LINE 12C	OFFICERS AND DIRECTORS SUBMIT FEDERAL ENERGY REGULATORY COMMISSION (FERC) ANNUAL REPORT OF INTERLOCKING POSITIONS (FORM 561) FOR GOLDEN SPREAD ELECTRIC COOPERATIVE INC
	FORM 990, PART VI, SECTION B, LINE 15	OUTSIDE PROFESSIONAL COMPENSATION CONSULTANTS ARE RETAINED TO PREPARE SALARY RANGES FOR EACH POSITION
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY IS AVAILABLE TO THE PUBLIC UPON REQUEST THE FINANCIAL STATEMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE
	FORM 990, PART VII, SECTION A, AVG HOURS PER WEEK FOR RELATED ORGANIZATIONS	ANTELOPE ELECTRIC GENERATING COOPERATIVE INC (AEGC) GS ELECTRIC GENERATING COOPERATIVE INC (GSEGC) YOAKUM ELECTRIC GENERATING COOPERATIVE INC (YEGC) FORT CONCHO GAS STORAGE INC (FCGS) GOLDEN SPREAD PANHANDLE WIND RANCH LLC (GSPWR) AEGC GSEGC YEGC FCGS GSPWR BOARD OF DIRECTORS 1 TO 2 MARK SCHWIRTZ 5 5 1 2 1 JACQUELINE HUMPHREY 4 5 2 2 5 MELODY GILLIS 1 1 1 1 1 MICHAEL WISE 2 1 1 1 1 RANDY ALLISON 8 1 1 2 2 SHANE MCMINN 0 1 1 1 3 STEVE WIEGAND 1 3 1 1 1 WILLIAM PIPPIN 22 4 1 1 2 CARRIE CLARK 1 1 1 1 1 MATT MOORE 0 0 0 0 0
POLICY QUESTIONS AS APPLICABLE TO THE ORGANIZATION'S DISREGARDED ENTITY	FORM 990, PART VI, SECTION B, LINES 12-15	DENVER CITY ENERGY ASSOCIATES, LP IS A DISREGARDED ENTITY OWNED BY THE ORGANIZATION AND REPORTED ON SCHEDULE R, PART I THE POLICY QUESTIONS ANSWERED "YES" ON FORM 990, PART IV, LINES 12 THROUGH 15 ALSO APPLY TO THE DISREGARDED ENTITY
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	UNREALIZED GAIN (LOSS) ON HEDGE OF SUBSIDIARY 14,250,000 PATRONAGE CAPITAL RETIREMENT -11,229,405 TOTAL TO FORM 990, PART XI, LINE 5 3,020,595

DLN: 93493320050902

2011

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service

Name of the organization
GOLDEN SPREAD ELECTRIC COOPERATIVE INC

75-1941060

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) (a)
Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-year assets Direct controlling Primary activity or foreign country) (1) DENVER CITY ENERGY ASSOCIATES LP GOLDEN SPREAD ELECTRIC PO BOX 9898 **ELECTRIC GENERATION** COOPERATIVE INC TX 61,269,612 130,093,466 AMARILLO, TX 79105 75-1941060

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(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 controll organiza	
						Yes	No
(1) GS ELECTRIC GENERATING COOPERATIVE INC							
PO BOX 9898	RURAL ELECTRIFICATION	TX	501(C)(12)		GOLDEN SPREAD ELECTRIC COOPERATIVE INC	Yes	
AMARILLO, TX 79105 75-2658840							
(2) MID-TEX GENERATION & TRANSMISSION ELECTRIC COOPERATIVE INC							
PO BOX 9898	RURAL ELECTRIFICATION	тх	501(C)(12)		GOLDEN SPREAD ELECTRIC COOPERATIVE INC	Yes	
AMARILLO, TX 79105 75-2157834							
(3) YOAKUM ELECTRIC GENERATING COOPERATIVE INC							
PO BOX 9898	RURAL ELECTRIFICATION	тх	501(C)(12)		GOLDEN SPREAD ELECTRIC COOPERATIVE INC	Yes	
AMARILLO, TX 79105 20-2505072							
(4) ANTELOPE ELECTRIC GENERATING COOPERATIVE INC							
PO BOX 9898	RURAL ELECTRIFICATION	тх	501(C)(12)		GOLDEN SPREAD ELECTRIC COOPERATIVE INC	Yes	
AMARILLO, TX 79105 20-0872883							

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part 1	V, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(k) Percentage ownership					
ral or aging	No				
(j) Gener mana partn	Yes				
(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)					
	О				
(h) sproprtionat llocations?	'es No				
Dispi	Yes				
(g) Share of end-of- year assets					
(f) Share of total income					
(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)					
,					
(c) Legal domicile (state or foreign country)					
Primary activity					
(a) Name, address, and EIN of related organization					

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) FORT CONCHO GAS STORAGE INC PO BOX 9898 AMARILLO, TX 79105 26-3430270	GAS STORAGE FACILITY	l _{TV}	GOLDEN SPREAD ELECTRIC COOPERATIVE INC	С		19,750,275	100 000 %
	ELECTRIC GENERATION	Tv	GOLDEN SPREAD ELECTRIC COOPERATIVE INC	С	4,926,283	164,115,880	100 000 %
						Cabadula D (F 000\ 2011

Part V	iransactions with Related Organizations (Complete if the organization answered "Yes	on Form 990, Par	t IV, line 34, 35, 3	5A, or 36.)		
Note	. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 During	the tax year, did the orgranization engage in any of the following transactions with one or more related organ	ızatıons lısted ın Parts	s II-IV?			
a Rec	upt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a	Yes	
b Gıft,	grant, or capital contribution to related organization(s)			1b	,	No
c Gıft,	grant, or capital contribution from related organization(s)			10	;	No
d Loar	s or loan guarantees to or for related organization(s)			1d	l Yes	
e Loar	s or loan guarantees by related organization(s)			1e	:	No
f Sale	of assets to related organization(s)			1f		No
g Puro	hase of assets from related organization(s)			1 g	J	No
h Exc	ange of assets with related organization(s)			1h	1	No
i Leas	e of facilities, equipment, or other assets to related organization(s)			11		No
j Leas	e of facilities, equipment, or other assets from related organization(s)			1j		No
k Perf	rmance of services or membership or fundraising solicitations for related organization(s)			1k	i	No
I Perfo	rmance of services or membership or fundraising solicitations by related organization(s)			11		No
m Shar	ng of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	n Yes	
n Sha	ing of paid employees with related organization(s)			1n	Yes	
o Rein	bursement paid to related organization(s) for expenses			10	,	No
p Rein	bursement paid by related organization(s) for expenses			1p	Yes	
q Oth	r transfer of cash or property to related organization(s)			19		No
r Othe	r transfer of cash or property from related organization(s)			1r	Yes	<u></u>
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete this line, in	cluding covered relati	onships and transact	ion thresholds		
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determ involve		ount
	ional Data Table					
(2)						
(3)						
(4)						
(5)						
(6)		1	l	1		

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on 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 (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate alloc		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 75-1941060

Name: GOLDEN SPREAD ELECTRIC COOPERATIVE INC

Form 990, Schedule R, Part V - Transactions With Related Organizations

	Name of other organization	(b) Transaction type(a-r)	(c) A mount I nvolved (\$)	(d) Method of determining amount involved
(1)	YOAKUM ELECTRIC GENERATING COOPERATIVE INC	А	4,627,954	COST
(2)	FORT CONCHO GAS STORAGE INC	А	517,234	COST
(3)	GOLDEN SPREAD PANHANDLE WIND RANCH LLC	А	3,653,709	COST
(4)	ANTELOPE ELECTRIC GENERATING COOPERATIVE INC	А	2,481,226	COST
(5)	GS ELECTRIC GENERATING COOPERATIVE INC	А	936,967	COST
(6)	DENVER CITY ENERGY ASSOCIATES LP	А	936,967	COST
(7)	YOAKUM ELECTRIC GENERATING COOPERATIVE INC	D	80,983,422	COST
(8)	FORT CONCHO GAS STORAGE INC	D	7,085,403	COST
(9)	GOLDEN SPREAD PANHANDLE WIND RANCH LLC	D	90,000,000	COST
(10)	GS ELECTRIC GENERATING COOPERATIVE INC	D	70,000,000	COST
(11)	ANTELOPE ELECTRIC GENERATING COOPERATIVE INC	D	140,000,000	COST
(12)	DENVER CITY ENERGY ASSOCIATES LP	D	70,000,000	COST
(13)	GS ELECTRIC GENERATING COOPERATIVE INC	Р	1,390,298	COST
(14)	YOAKUM ELECTRIC GENERATING COOPERATIVE INC	Р	536,766	COST
(15)	GOLDEN SPREAD PANHANDLE WIND RANCH LLC	Р	299,771	COST
(16)	ANTELOPE ELECTRIC GENERATING COOPERATIVE INC	Р	261,937	COST
(17)	GS ELECTRIC GENERATING COOPERATIVE INC	R	8,492,122	COST
(18)	YOAKUM ELECTRIC GENERATING COOPERATIVE INC	R	4,086,650	соѕт
(19)	ANTELOPE ELECTRIC GENERATING COOPERATIVE INC	М	57,000	COST
(20)	GS ELECTRIC GENERATING COOPERATIVE INC	М	120,000	COST

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(21)	YOAKUM ELECTRIC GENERATING COOPERATIVE INC	М	120,000	COST
(22)	FORT CONCHO GAS STORAGE INC	М	12,000	COST
(23)	GOLDEN SPREAD PANHANDLE WIND RANCH LLC	М	66,000	COST
(24)	ANTELOPE ELECTRIC GENERATING COOPERATIVE INC	N	115,672	COST
(25)	GS ELECTRIC GENERATING COOPERATIVE INC	N	682,357	COST
(26)	YOAKUM ELECTRIC GENERATING COOPERATIVE INC	N	227,452	COST
(27)	FORT CONCHO GAS STORAGE INC	N	66,863	COST
(28)	GOLDEN SPREAD PANHANDLE WIND RANCH LLC	N	132 681	COST

Software ID: Software Version:

EIN: 75-1941060

Name: GOLDEN SPREAD ELECTRIC COOPERATIVE INC

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and I										
(A) Name and Title	(B) Average hours		(ition that		y)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
JAMES BATTON DIRECTOR	5 20	×						18,400	0	0
VICK CHRISTIAN DIRECTOR	4 60	х						15,850	0	0
STEVE LOUDER SECRETARY/TREASURER OF THE BOARD	5 00	х						18,288	0	0
DARRELL STEPHENS DIRECTOR	4 90	х						17,100	0	0
DAVID MARRICLE DIRECTOR	5 0 0	х						17,900	0	0
ROGER BRYAN DIRECTOR	5 20	х						19,313	0	0
ROLAND WITT DIRECTOR	5 20	х						19,163	0	0
JEFF COPELAND DIRECTOR	4 30	Х						14,000	0	0
KELLY LANKFORD DIRECTOR	5 60	Х						21,100	0	0
STEVE GEE DIRECTOR	4 60	Х						15,850	0	0
STAN MCCLENDON VICE CHAIRMAN OF THE BOARD	6 60	Х						26,250	0	0
DELBERT SMITH DIRECTOR	4 50	Х						15,100	0	0
JIM STEWARD DIRECTOR	4 60	х						15,650	0	0
GAYLORD GROCE DIRECTOR	4 70	Х						16,150	0	0
BILL HARBIN DIRECTOR	5 20	Х						18,400	0	0
EARL BROWN DIRECTOR	4 90	Х						17,400	0	0
GREG HENLEY DIRECTOR	4 60	Х						15,900	0	0
CARL WILLIAMS DIRECTOR	4 90	Х						17,250	0	0
FREDDA BUCKNER DIRECTOR	4 60	х						15,600	0	0
DAVID SELL DIRECTOR	9 70	Х						18,800	0	0
RANDY MAHANNAH DIRECTOR	4 70	х						16,600	0	0
BRENT WHEELER DIRECTOR	6 0 0	х						23,100	0	0
JIMMY STOKES DIRECTOR	5 0 0	х						18,331	0	0
TOMMY JOINES DIRECTOR	5 0 0	х						17,650	0	0
JAMES DRIVER CHAIRMAN OF THE BOARD	6 80	х						17,500	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Ind	T	Com						(D)	(F)	(5)
(A) Name and Title	(B) Average hours		ition that		ly)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099- MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
WILLIAM WHITTEN DIRECTOR	4 60	Х						15,400	0	0
STEVE WILLIAMS DIRECTOR	5 20	Х						17,900	0	0
JIMIE REED DIRECTOR	4 70	Х						16,350	0	0
DARRYL SCHRIVER DIRECTOR	4 90	Х						10,050	0	0
CECIL DAVIS DIRECTOR	5 40	Х						12,250	0	0
LARRY SLOAN DIRECTOR	4 30	Х						5,000	0	0
LARRY HODGES DIRECTOR	5 40	Х						20,050	0	0
JACK PERKINS DIRECTOR	4 00	Х						12,500	0	0
MARK SCHWIRTZ PRESIDENT/GENERAL MANAGER	36 00			Х				446,225	0	293,764
JACQUELINE HUMPHREY ASSISTANT SECRETARY/TREASURER/VP/CFO	27 00			X				177,787	0	84,390
MICHAEL WISE VP OF TRANSMISSION & OPERATIONS	61 00			Х				205,557	0	87,150
RANDY ALLISON VP OF PRODUCTION	27 00			Х				176,815	0	72,431
CARRIE CLARK ASSISTANT SECRETARY/GENERAL COUNSEL	38 00			x				66,890	0	35,452
MELODY GILLIS DIRECTOR FINANCIAL REPORTING	48 00					Х		172,292	0	75,614
SHANE MCMINN MANAGER ENGINEERING	40 00					Х		139,732	0	66,356
STEVE WIEGAND MANAGER FINANCE/TREASURY®ULATION	39 00					х		135,331	0	66,356
WILLIAM PIPPIN PRODUCTION ASSET MANAGER	11 00					Х		132,186	0	53,429
MATT MOORE MANAGER MARKET OPERATIONS	50 00					Х		141,922	0	65,904