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DLN: 93493319068082

Department of the Treasury

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

OMB No 1545-0047

Open to Public

Inspection

Return of Organization Exempt From Income Tax

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011 D Employer identification number **B** Check if applicable SOCORRO ELECTRIC COOPERATIVE INC . Address change 85-0084968 Doing Business As E Telephone number Name change (575)835-0560 ☐ Initial return Number and street (or P O box if mail is not delivered to street address) G Gross receipts \$ 24,731,469 PO BOX H Terminated Amended return City or town, state or country, and ZIP + 4 SOCORRO, NM 87801 Application pending Name and address of principal officer **H(a)** Is this a group return for JOSEPH HERRERA ┌Yes ┌No affiliates? PO BOX H SOCORRO,NM 87801 H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Group exemption number 🕨 H(c)Website: ► WWW SOCORROELECTRIC COM K Form of organization
✓ Corporation
☐ Trust
☐ Association
☐ Other
► L Year of formation 1945 M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities TO PROVIDE QUALITY AND RELIABLE ELECTRIC SERVICE TO MEMBERS OF THE COOPERATIVE Activities & Governance 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 10 9 Number of independent voting members of the governing body (Part VI, line 1b) . 4 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . 5 48 0 Total number of volunteers (estimate if necessary) 6 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 . 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Prior Year Current Year** 0 8 Contributions and grants (Part VIII, line 1h) . 0 9 Program service revenue (Part VIII, line 2g) . 23,630,819 24,634,962 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 80,565 57,531 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 38,976 38,976 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 24,731,469 23,750,360 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 13,072 850 2,492,155 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 1,298,784 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 2,380,591 2,540,739 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ 19,790,658 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 19,735,457 23,643,253 24,609,053 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 $\,$. 107,107 122,416 Net Assets or Fund Balances **Beginning of Current End of Year** Year 66,582,183 70,697,352 20 Total assets (Part X. line 16) . . . 21 Total liabilities (Part X, line 26) 50,107,931 50,886,188 16,474,252 22 Net assets or fund balances Subtract line 21 from line 20 19,811,164 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. ***** 2012-11-14 Signature of officer Sign Here JOSEPH HERRERA GENERAL MANAGER Type or print name and title Date 2012-11-14 Check if Preparer's taxpayer identification number WILLIAM M MILLER self-(see instructions) sıgnature Paid employed 🕨 🧧 P00439459 Preparer's BOLINGER SEGARS GILBERT AND MOSS LLP Firm's name (or yours EIN > 75-0882037 if self-employed), address, and ZIP + 4 **Use Only**

8215 NASHVILLE AVENUE

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

LUBBOCK, TX 79423

▼Yes 「No

Phone no (806) 747-3806

Par	t III			e Accomplishments nse to any question in this P	art III	
1	Briefl	y describe the orga	nızatıon's mıssıon			
				TRIC COOPERATIVE, INC	TO MAKE ELECTRIC ENERGY AND GOOD MANAGEMENT	AVAILABLE TO ITS
2	the pr		0-EZ?		ne year which were not listed on	Γ Yes Γ No
3	Dıd th		e conducting, or ma	edule O ake significant changes in ho · · · · · · · · · ·	wit conducts, any program	└ Yes └ No
	If "Ye	s," describe these c	hanges on Schedul	e O		
4	expen	ses Section 501(c)(3) and 501(c)(4)	organizations and section 49	f its three largest program serving 47(a)(1) trusts are required to for each program service report	report the amount of
4a	(Code	<u> </u>) (Expenses \$	including grants of	f\$)(Revenue\$)
			Y TO OUR MEMBERS - :		END WERE PROVIDED ELECTRICITY ON	A COOPERATIVE BASIS THROUGH
4b	(Code) (Expenses \$	including grants of	f\$) (Revenue \$)
4 c	(Code	:) (Expenses \$	including grants of	f \$) (Revenue \$)
4d		r program services enses \$		dule O) ding grants of \$) (Revenue \$)
4e	Tota	l program service ex	(penses ⊁ -\$			

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)?	2		No
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	Yes	
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		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	Yes	
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		No
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? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
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? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? 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? 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		No
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
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N o
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	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		No
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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2011)

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

	Check it Schedule O contains a response to any question in this Part V	<u> </u>	• 1	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 36			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
3	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			
b	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
l	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			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5с 6а		Νο
L-	organization solicit any contributions that were not tax deductible?			
b	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).			
a	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	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
2	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			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		
_	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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.			
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
a	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			_
,	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			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	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.

Se	ection A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax vear							
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	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No				
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 more members of the governing body?	7a	Yes					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9								
	ection B. Policies (This Section B requests information about policies not required by the Internal							
ке	venue Code.)		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	No				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt			-110				
	purposes?	10b						
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Νo				
	Describe in Schedule O the process, if any, used by the organization to review the Form 990			Ī				
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
	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		No				
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		No				
b	Other officers or key employees of the organization	15b		No				
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No				
b	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						
Se	ection C. Disclosure							
	List the States with which a copy of this Form 990 is required to be filed▶							

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

☐ O wn website ☐ A nother's website ☐ U pon 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 See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► SOCORRO ELECTRIC ACCOUNTING DEPT 215 E DANZANARES AVE

SOCORRO, NM 87801 (575)835-0560

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, 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

Check this box if neither the organiz	•	ated or	ganız	atio	ns c	ompei	nsat	ed any current or fo	rmer officer, direct	or, or trustee
(A) Name and Title	(B) A verage hours per week (describe hours for related organizations in Schedule O)	Positi more unles an	on (d e thai	c) o no n one son er ar /trus	t che e bo is bo nd a stee)	eck x, oth	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) PAUL BUSTAMANTE	23 00	×	ā	X		원		9,287	0	0
PRESIDENT (2) DAVE WADE	12 80	x		X				9,125	0	0
VICE PRESIDENT (3) LUIS AGUILAR	6 30	X		X				5,170	0	0
SECRETARY (4) MILTON ULIBARRI	10 00	х		Х				10,809	0	0
TREASURER (5) LEO CORDOVA TRUSTEE	17 90	х						4,036	0	0
(6) LEROY ANAYA TRUSTEE	6 80	х						6,497	0	0
(7) CHARLES WAGNER TRUSTEE	24 50	х						4,718	0	0
(8) JACK BRUTON TRUSTEE	2 80	х						7,451	0	0
(9) DONALD WOLBERG TRUSTEE	12 60	х						5,111	0	0
(10) PRESCILLA MAULDIN TRUSTEE	2 20	х						0	0	0
(11) JOSEPH HERRERA GENERAL MANAGER (2/3/2011-12/31/11)	40 00			х				115,000	0	27,993
(12) RICHARD LOPEZ INTERIM MANAGER (1/1/2011-2/3/11)	40 00			х				69,140	0	16,153
(13) DAVID MONTOYA LINE SUPERINTENDENT	40 00					х		112,418	0	35,494

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

	(A) Name and Title	(B) A verage hours per week (describe	unless person is both an officer and a or director/trustee) 2							(D) (E) ortable ensation m the cation (W- 9-MISC) (E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of other compensation from the organization and related		
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former			MISC)	relat organiz		
													_	
1b Sub-T				<u> </u>	<u> </u>	_		<u> </u> ▶						
	from continuation sheets t	· · · · · · · · · · · · · · · · · · ·						•		050 760			70.510	
2 Total	number of individuals (inclu,000 of reportable compens	ıdıng but not lım	nited to	thos	e lıs		<u>a</u> bove) who	received	358,762 more tha	on O		79,640	
												Yes	No	
	ne organization list any forn e 1a? <i>If</i> "Y <i>es," complete Sch</i>					eye •	mploy •	ee,o •	or highest • • •	compens		3	No	
organ	ny individual listed on line 1 ization and related organiza dual										ch	_		
5 Did ar	ny person listed on line 1a i ces rendered to the organiza										or individual for	5	No No	
Section	B. Independent Cont	ractors												
\$100	plete this table for your five ,000 of compensation from hin the organization's tax yo	the organizatio												
	Nam	(A) ie and business add	tress							Desc	(B) ription of services	Compe	c) nsation	
	ERGY SERVICES OF DURANGO INC S CAMNO DEL RIO) 81303								L	INE CONST	RUCTION	:	1,567,922	
CBR SERVICES PO BOX 1450 EAGER, AZ 85										JTILITY PLAI	NT CONSTRUCTION		179,465	
SGS ENGINEER 401 50TH STR LUBBOCK, TX	RING LLC REET								E	NGINEERIN	G & RATE CONSULTING	i	167,949	
	umber of Independent contr	actors (ıncludır	ıg but n	ot lin	nıted	l to	those	liste	d above) v	who recei	ved more than			

\$100,000 of compensation from the organization ▶3

Form 99						Page 9
	/1111	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
nts Ots	1a	Federated campaigns 1a				
履	b	Membership dues 1b				
ું.≝	С	Fundraising events 1c				
<u>≅</u> ,⊒	d	Related organizations 1d				
ώE E	e	Government grants (contributions) 1e				
Contributions, gifts, grants and other similar amounts	f g	All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in				
Cont	h	Innes 1a-1f \$ Total. Add lines 1a-1f	•			
<u> </u>		Business Co	ode			
Program Service Revenue	2a	ELECTRIC SALES 2	21000 23,427,119	23,427,119		
æ	ь	PATRONAGE DIVIDENDS 2	21000 995,546	995,546		
931	С	SERVICE FEES 2	21000 212,297	212,297		
<u>.</u>	d					
Ē	e					
<u> </u>	f	All other program service revenue				
ž	g	Total. Add lines 2a-2f	- 24,634,962			
	3	Investment income (including dividends, interest				
		and other similar amounts)	▶ 57,531			57,531
	4	Income from investment of tax-exempt bond proceeds $\ \ .$	•			
	5	Royalties	▶			
		(ı) Real (ıı) Person				
	6a	Gross rents Less rental	38,976			
	b	expenses				
	С	Rental income or (loss)	38,976			
	d	Net rental income or (loss)	▶ 38,976			38,976
		(I) Securities (II) Other				
	7a	Gross amount from sales of assets other than inventory				
	b	Less cost or other basis and sales expenses				
	C	Gain or (loss)				
	d	Net gain or (loss)	· -			
anne	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c)				
Other Revenue		See Part IV, line 18				
ф	b	Less direct expenses b				
0	С	Net income or (loss) from fundraising events	P			
	9a	Gross income from gaming activities See Part IV, line 19 a				
	b c	Less direct expenses b Net income or (loss) from gaming activities	<u></u>			
	10a	Gross sales of inventory, less returns and allowances .				
	b	Less cost of goods sold b				
	С	Net income or (loss) from sales of inventory	▶			
		Miscellaneous Revenue Business Co	ode			
	11a					
	ь					
	С					
	d	All other revenue				
	e	Total. Add lines 11a-11d	.			
	12	Total revenue. See Instructions	24,731,469	24,634,962	0	96,507
	1		,, 5 -, 10 5	, 55 1, 552		, ,,,,,,,,,

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 Fundraising 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 21 850 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 2,492,155 5 Compensation of current officers, directors, trustees, and 290,490 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) . . . 7 Other salaries and wages 1,216,577 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 246,681 Other employee benefits 515,392 111,451 10 Fees for services (non-employees) 11 Management Legal Accounting Lobbying Professional fundraising See Part IV, line 17 . . Investment management fees g Advertising and promotion . . . 12 Office expenses 13 14 Information technology 15 Royalties . . 16 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 19 Conferences, conventions, and meetings 2,140,271 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 1,906,236 23 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) **PURCHASED POWER** 13,360,012 DISTRIBUTION EXPENSE 904,662 ADMIN & GENERAL EXP 743,314 CUSTOMER SERVICE 358,590 d е f All other expenses 322,372 25 Total functional expenses. Add lines 1 through 24f 24,609,053 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

Pa	rt X	Balance Sheet								
					(A) Beginning of year		(B) End of year			
	1	Cash—non-interest-bearing			1,667,281	1	4,134,554			
	2	Savings and temporary cash investments			3,700,000	2	248,414			
	3	Pledges and grants receivable, net	•			3				
	4	Accounts receivable, net		1,516,475	4	1,713,838				
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of								
		Schedule L		5						
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ Complete Part II of		4958(f)(1)) and						
76		Schedule L		6						
Assets	7	Notes and loans receivable, net			22,157	7	280,552			
8	8	Inventories for sale or use			1,886,763	8	529,946			
⋖	9	Prepaid expenses and deferred charges			4,177,850	9	4,286,972			
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	76,684,671						
	ь	Less accumulated depreciation	10b	23,590,391	48,943,601	10 c	53,094,280			
	11	Investments—publicly traded securities				11				
	12	Investments—other securities See Part IV, line 11		•		12				
	13	Investments—program-related See Part IV, line 11			4,635,751	13	6,403,568			
	14	Intangible assets		14						
	15	Other assets See Part IV, line 11	32,305	15	5,228					
	16	Total assets. Add lines 1 through 15 (must equal line 34)			66,582,183	16	70,697,352			
	17	Accounts payable and accrued expenses .			1,345,941	17	1,709,248			
	18	Grants payable		18						
	19	Deferred revenue			19					
	20	Tax-exempt bond liabilities								
- 46	21	Escrow or custodial account liability Complete Part IV of Schedul	169,104	21	155,809					
abilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified								
뎦		persons Complete Part II of Schedule L		22	ı					
Ξ	23	Secured mortgages and notes payable to unrelated third parties	46,185,683	23	47,664,160					
	24	Unsecured notes and loans payable to unrelated third parties				24				
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par		2,407,203	25	1,356,971				
	26	D Total liabilities. Add lines 17 through 25			50,107,931	26	50,886,188			
	20	Organizations that follow SFAS 117, check here F and comp	latal	inas 27	30, 107, 331	20	30,000,100			
Balances		through 29, and lines 33 and 34.	nete i	ines 27						
<u> </u>	27	Unrestricted net assets			27					
ă	28	Temporarily restricted net assets		28						
Fund	29	Permanently restricted net assets				29	_			
Œ		Organizations that do not follow SFAS 117, check here ► 🔽 and	d con	plete						
ō	20	lines 30 through 34.				20	^			
왍	30	Capital stock or trust principal, or current funds			0	30	0			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31				
τ Α	32	Retained earnings, endowment, accumulated income, or other fu	nas		16,474,252		19,811,164			
Net	33	Total net assets or fund balances			16,474,252		19,811,164			
	34	Total liabilities and net assets/fund balances			66,582,183	34	70,697,352			

Pal	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		24,7	731,46
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		1	122,41
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		16,4	174,25
5	Other changes in net assets or fund balances (explain in Schedule O)	5		3,2	214,49
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		19,8	311,16
Par	Check If Schedule O contains a response to any question in this Part XII			・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	No
1	Accounting method used to prepare the Form 990			1 63	NO
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2 c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Additional Data

Software ID:

Software Version:

EIN: 85-0084968

Name: SOCORRO ELECTRIC COOPERATIVE INC

Form 990, Special Condition Description:

Special Condition Description

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319068082

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990,

Supplemental Financial Statements

temal		Form 990. ► See separate instructions.	120	Inspection	
	me of the organization		Employ	er identification number	_
SOC	CORRO ELECTRIC COOPERATIVE INC		85-008	34968	
Pa	rt I Organizations Maintaining Donor				he
	organization answered "Yes" to Form S		(h)	Funds and other assemble	
	Total number at end of year	(a) Donor advised funds	(0)	Funds and other accounts	—
2	Aggregate contributions to (during year)				—
- 3	Aggregate grants from (during year)				—
1	Aggregate value at end of year				_
5	Did the organization inform all donors and donor ad funds are the organization's property, subject to the		onor advised	Yes No	— °
5	Did the organization inform all grantees, donors, an used only for charitable purposes and not for the be conferring impermissible private benefit			urpose Yes N o	0
Pal	rt III Conservation Easements. Complete	e if the organization answered "Yes"	' to Form 9	90, Part IV, line 7.	=
L 2	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreation protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualitation the last day of the tax year	ation or pleasure) Preservation of a	a certified hi		
				Held at the End of the Year	\neg
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easemen	ts	2b		
c	Number of conservation easements on a certified h	nistoric structure included in (a)	2c		
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d		
3	Number of conservation easements modified, trans	sferred, released, extinguished, or termina	ited by the o	rganization during	
	the taxable year ►				
1	Number of states where property subject to conser	rvation easement is located 🕨			
5	Does the organization have a written policy regarding enforcement of the conservation easements it hold		andling of vio	olations, and Yes No	0
5	Staff and volunteer hours devoted to monitoring, in:	specting and enforcing conservation ease	ements durir	ng the year ►	
,	A mount of expenses incurred in monitoring, inspec	ting, and enforcing conservation easemei	nts during th	e year	
	▶ \$				
3	Does each conservation easement reported on line $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	e 2(d) above satisfy the requirements of s	ection	ΓYes ΓNα	0
•	In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text o the organization's accounting for conservation ease	of the footnote to the organization's financ			
ar	Organizations Maintaining Collecting Complete of the organization answered	ions of Art, Historical Treasures	, or Othe	r Similar Assets.	
La	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its f	ld for public exhibition, education or resea	arch in furthe		
b	If the organization elected, as permitted under SFA historical treasures, or other similar assets held fo provide the following amounts relating to these iter	or public exhibition, education, or research			
	(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, his following amounts required to be reported under SF		for financia	'	_
а	Revenues included in Form 990, Part VIII, line 1			▶ \$	_

b Assets included in Form 990, Part X

كسد	Organizations Maintaining Co	Hections of Art	<u>, nis</u>	COLL	cai ii	east	ares, or o	uic	i Sillillai ASS	ets (c	ontinuea)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing	that aı	re a significa	nt u	se of its collecti	on	
а	Public exhibition		d	Γ	Loan	orexc	hange progr	ams			
b	Scholarly research		e	Γ	Other	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	/ furthe	er the	organızatıon	's ex	empt purpose ır	1	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									- Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answere	d "Y	es" to Form 99	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	forc	ontrıbu	itions	or other ass	ets r		Yes	✓ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving ta	able		Г		Λ	ount	
_								4 -	Am	ount	
c d	Beginning balance						-	1c 1d			
	Additions during the year						-	1a 1e			
e •	Distributions during the year						-				
f	Ending balance	000 5					L	1f	-		
2a	Did the organization include an amount on Fo	•	e 21?	1					١٠	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV				عدال الم	-11 1	F 000	Г.	. TV 40		
Par	t V Endowment Funds. Complete	f the organization (a)Current Year)Prior \			Form 990, wo Years Back			(e) Four Y	'ears Back
1a	Beginning of year balance	(a)current rear	(5	<i>)</i> 1 1101	Cai	(6)11	WO TCGTS DGCK	(4)	Thice rears back	(C)i oui i	CG13 DGCK
b	Contributions										
c	Investment earnings or losses							t			
d	Grants or scholarships										
e	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	as			•			•		
a	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that a	re held	danda	admınıstere	for	the	Yes	No
	(i) unrelated organizations								За(i)	
	(ii) related organizations				_	_			3a(ii	i)	
											
b	If "Yes" to 3a(II), are the related organizatio	ns listed as require	d on S	Sched	ule R?				<u>3b</u>		
4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the second or the secon	ns listed as require e organization's en	d on S dowm	Sched ent fu	ule R? nds	•		•	3b		
4	If "Yes" to 3a(II), are the related organizatio	ns listed as require e organization's en	d on S dowm	Sched ent fu	ule R? nds	•			3b	 	
4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the second or the secon	ns listed as require e organization's en	d on S dowm	ent fu art X (a)	ule R? nds	• 10.			(c) Accumulated depreciation	(d) Bo	ook value
4 Par	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the tyle Land, Buildings, and Equipment	ns listed as require e organization's en	d on S dowm	ent fu art X (a)	ule R? nds line: Cost or	• 10.	(b)Cost or of basis (other		(c) Accumulated	(d) Bo	
4 Par	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the two controls that the two controls the two controls that the two controls the two controls that the two controls the two controls that the two controls that the two controls the two controls that the two controls the two control	ns listed as require e organization's en	d on S dowm	ent fu art X (a)	ule R? nds line: Cost or	• 10.	(b)Cost or of basis (othe	r)	(c) Accumulated		86,262
Par la L b E	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the total Land, Buildings, and Equipment Description of property and	ns listed as require e organization's en	d on S dowm	ent fu art X (a)	ule R? nds line: Cost or	• 10.	(b)Cost or of basis (othe	r) ,262	(c) Accumulated depreciation		86,262
Par 1a L b E	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the tVI Land, Buildings, and Equipment Description of property and	ns listed as require e organization's en	d on S dowm	ent fu art X (a)	ule R? nds line: Cost or	• 10.	(b)Cost or of basis (othe	r) ,262 ,418	(c) Accumulated depreciation		86,262 487,562
1a L b E c L d E	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the tVI Land, Buildings, and Equipment Description of property and	ns listed as require e organization's en	d on S dowm	ent fu art X (a)	ule R? nds line: Cost or	• 10.	(b)Cost or of basis (othe	r) ,262 ,418 ,742	(c) Accumulated depreciation		86,262 487,562

Part VII Investments—Other Securities. See	Form 990, Part X, line 1:				
(a) Description of security or category (including name of security)	(b)Book value		(c) Method of valuation ost or end-of-year market value		
(1)Financial derivatives		Cost of end-of	-year market value		
(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	e Form 990, Part X, line	13.			
(a) Description of investment type	(b) Book value		od of valuation		
See Additional Data Table		Cost or end-of	f-year market value		
See Additional Data Fable					
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)					
Part IX Other Assets. See Form 990, Part X, III			(b) Book value		
(a) Descrip	ocion		(b) Book value		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X					
1 (a) Description of Liability	(b) A mount				
Federal Income Taxes	(b) //mount				
CONSUMER DEPOSITS	81,269				
ACCRUED EMPLOYEE COMPENSATED ABSENCES	148,896				
ACCUMULATED PROVISION FOR POST RETIREMENT					
ACCOUNT TAYER & EDANICHISE EEES	363,371				
ACCRUED TAXES & FRANCHISE FEES OTHER CURRENT & ACCRUED LIABILITIES	326,001 122,893				
POWER COST OVERCOLLECTED	98,677				
DEBT SERVICE ADJUSTMENT OVERCOLLECTED	43,920				
DEFERRED CREDITS	156,689				
DEFERRED INSURANCE FUND	15,255				
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	1,356,971				

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	24,731,469
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	24,609,053
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	122,416
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	851,064
8	Other (Describe in Part XIV)	8	2,363,432
9	Total adjustments (net) Add lines 4 - 8	9	3,214,496
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,336,912
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	24,796,355
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 64,886		
e	Add lines 2a through 2d	2e	64,886
3	Subtract line 2e from line 1	3	24,731,469
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) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	24,731,469
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	
1	Total expenses and losses per audited financial statements	1	22,181,784
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]	
С	Other losses]	
d	Other (Describe in Part XIV) 2d 64,886	1	
e	Add lines 2a through 2d	2e	64,886
3	Subtract line 2e from line 1	3	22,116,898
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)]	
c	Add lines 4a and 4b	4c	2,492,155
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	24,609,053

Part XIV Supplemental Information

Identifier	Return Reference	Explanation
	Part IV , Line 2b	PURSUANT TO THE COOPERATIVE'S BYLAWS ARTICLE VIII, SECTION 3-5, THE COOPERATIVE SHALL TRANSFER RETIREMENTS OF PATRONAGE CAPITAL, WHICH HAVE REMAINED UNCLAIMED FOR A PERIOD OF TWO YEARS, TO SOCORRO ELECTRIC FOUNDATION TO BE USED FOR SCHOLARSHIPS TO ENABLE STUDENTS FROM RURAL AREAS TO ATTEND COLLEGE, TECHNICAL SCHOOL OR OTHER POST SECONDARY EDUCATION INSTITUTION A PORTION OF THESE UNCLAIMED CAPITAL CREDITS PAYMENTS ARE MAINTAINED IN A DESIGNATED ACCOUNT HELD BY THE COOPERATIVE
Description of Uncertain Tax Positions Under FIN 48	Part X	ON JANUARY 1, 2010, THE COOPERATIVE ADOPTED THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA THE PRIMARY TAX POSITION OF THE COOPERATIVE IS ITS FILING STATUS AS A TAX EXEMPT ENTITY THE COOPERATIVE DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT ITS TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE, AND THAT ALL TAX BENEFITS ARE LIKELY TO BE REALIZED UPON SETTLEMENT WITH TAXING AUTHORITIES
Part XI, Line 8 - Other Adjustments		OTHER COMPREHENSIVE INCOME- NET UNREALIZED GAINS ON INVESTMENTS 3,093 RETIREMENTS OF PATRONAGE CAPITAL -46,425 TRANSFER OF DONATED CAPITAL -991 OTHER COMPREHENSIVE INCOME- PROVISION FOR PENSION AND BENEFITS -84,400 PATRONAGE CAPITAL ASSIGNABLE 2,492,155 Total to Schedule D, Part XI, Line 8 2,363,432
Part XII, Line 2d - Other Adjustments		EXPENSES RECORDED IN NON-OPERATING MARGINS RECLASSIFIED TO EXPENSES 64,886
Part XIII, Line 2d - Other Adjustments		EXPENSES RECORDED IN NON-OPERATING MARGINS RECLASSIFIED TO EXPENSES 64,886
Part XIII, Line 4b - Other Adjustments		PATRONAGE CAPITAL ASSIGNABLE 2,492,155
		Part IX THE AMOUNT OF OTHER ASSETS ON FORM 990, PAGE 11, PART X, LINE 15 DOES NOT EQUAL OR EXCEED 5 PERCENT OF THE TOTAL ASSETS ON FORM 990, PAGE 11, PART X, LINE 16, COLUMN B CONSEQUENTLY IN ACCORDANCE WITH IRS INSTRUCTIONS SCHEDULE D, PART IX HAS BEEN LEFT BLANK PART XIII, Line 4B FOR THE AUDITED FINANCIAL STATEMENTS, THE AMOUNT OF PATRONAGE DIVIDENDS PAID OR ALLOCATED TO THE MEMBERS IS REPORTED AS AN INCREASE IN EQUITY AND NOT AS AN EXPENSE THEREFORE, NET INCOME PER THE AUDITED FINANCIAL STATEMENTS IS REPORTED GROSS OF THE AMOUNT OF PATRONAGE DIVIDENDS THAT ARE EITHER ALLOCATED OR TO BE ALLOCATED AT THE TIME THE AUDITED FINANCIAL STATEMENTS ARE PREPARED HOWEVER, BECAUSE THE ALLOCATION OF PATRONAGE DIVIDENDS IS ONE ASPECT OF HOW THE COOPERATIVE FULFILLS ITS TAX EXEMPT PURPOSE OF OPERATING ON A COOPERATIVE BASIS, THE AMOUNT OF PATRONAGE DIVIDENDS EITHER ALLOCATED OR TO BE ALLOCATED TO THE MEMBERS IS REPORTED ON FORM 990, PART IX, LINE 4 AS "BENEFITS PAID TO MEMBERS" PATRONAGE DIVIDENDS ARE ALLOCATED ON A PATRONAGE BASIS AND DONE SO PURSUANT TO A PRE-EXISTING OBLIGATION AS PROVIDED FOR IN THE "NON-PROFIT OPERATION" ARTICLE OF THE COOPERATIVE'S BYLAWS

Additional Data

Software ID: Software Version:

EIN: 85-0084968

Name: SOCORRO ELECTRIC COOPERATIVE INC

С

С

Form 990, Schedule D, Part VIII - Investments— Program Related					
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value			
PATRONAGE CAPITAL - NATIONAL RURAL UTILITIES COOP FIN CORP	147,955	С			
PATRONAGE CAPITAL - FEDERATED INSURANCE	149,319	С			
PATRONAGE CAPITAL - SOUTHEASTERN DATA COOPERATIVE, INC	78,717	C			
PATRONAGE CAPITAL - TRI-STATE	4,958,516	С			
PATRONAGE CAPITAL - WESTERN UNITED ELECTRIC	75,371	С			
CAPITAL TERM CERTIFICATES - NATIONAL RURAL UTILITIES COOP FIN CORP	509,213	С			
MEMBERSHIPS - NATIONAL RURAL UTILITIES COOP FIN CORP	1,000	С			
NOTES RECEIVABLE - WEATHERIZATION LOANS	93,815	С			

388,335

1,327

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

INSURANCE AND EDUCATION FUND

OTHER INVESTMENTS

1 (a) Description of Liability	(b) A mount
CONSUMER DEPOSITS	81,269
ACCRUED EMPLOYEE COMPENSATED ABSENCES	148,896
ACCUMULATED PROVISION FOR POST RETIREMENT HEALTH BENEFITS	363,371
ACCRUED TAXES & FRANCHISE FEES	326,001
OTHER CURRENT & ACCRUED LIABILITIES	122,893
POWER COST OVERCOLLECTED	98,677
DEBT SERVICE ADJUSTMENT OVERCOLLECTED	43,920
DEFERRED CREDITS	156,689
DEFERRED INSURANCE FUND	15,255

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As Filed Data -

DLN: 93493319068082

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Transactions with Interested Persons

Complete if the organization answered

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

OMB No 1545-0047

2011

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Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Schedule L

	of the organization O ELECTRIC COOPERATIVE INC							E	mployer i	dent if ica	tion numbe	er	
								8	5-00849	68			
Part I	="										ıne 40b		
1	(a) Name of disq							o, or Form 990-EZ, Part V, line 4				(c) Corrected?	
_						(2) 2 33					Yes	No	
	ter the amount of tax impos		_		-	disqualified pers			ear unde/ •	r • æ			
	ter the amount of tax, if any												
						e organization :				<u> </u>			
Part I) Deat IV has 26		000 [
	Complete if the organiz			d Yes on F	orm 990	, Part IV, line 26	, or For	m 990-i	(f)		<u>a</u>		
(a) Nan	ne of interested person and	1 ' '	oan to m the	(c)0 rig	unal		(e)		Approved		(g)Writi		
(a) Nan	purpose		zation?	principal		(d)Balance due	defau	ılt?			agreeme	agreement?	
		То	From	1			Yes No				Yes No		
									+	+			
Total .					▶ \$	1							
Part II						Persons.			<u> </u>				
	Complete if the orga	nızatıd	n ansv	wered "Yes	" on Fo	rm 990, Part IV	, line i	27.					
	(a) Name of interested pers	on	(een interested per ganization	son	(c) A n	nount of g	rant or ty	pe of assi	stance	
							+						

Part IV Business Transactions Involving Interested Persons
--

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	ii aliswered tes oli i	ronn 990, Part IV, III	ie zoa, zob, or zoc.		
(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
	organization			Yes	No
(1) TRI-STATE GENERATION AND TRANSMISSION ASSOCIATION INC	A BOARD MEMBER OF THE COOPERATIVE SERVES ON TRI- STATE G&T'S BOARD		THE COOPERATIVE PURCHASES ITS POWER FROM TRI-STATE GENERATION AND TRANSMISSION ASSOCIATION, INC		No

Part V Supplemental Information

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

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493319068082

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2011
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Name of the organization	Employer identifi	cation number
SOCORRO ELECTRIC COOPERATIVE INC		
	85-0084968	

ldentifier	Return Reference	Explanation
RECLASSIFICATION OF BENEFITS PAID TO MEMBERS	Form 990, Part I, Line 14	THE INSTRUCTIONS FOR THE 2011 FORM 990 CLARIFY THAT "BENEFITS PAID TO MEMBERS" SHOULD INCLUDE THE AMOUNT OF PATRONAGE DIVIDENDS PAID TO THE MEMBERS OF SECTION 501(C)(12) COOPERATIVES CONSISTENT WITH THIS CLARIFICATION IN THE INSTRUCTIONS, THE COOPERATIVE HAS REPORTED ON PART I, LINE 14 FOR THE CURRENT YEAR THE AMOUNT OF PATRONAGE DIVIDENDS PAID (ALLOCATED OR TO BE ALLOCATED) TO THE COOPERATIVE'S MEMBERS FOR THE 2011 CALENDAR YEAR SINCE PART I SUMMARIZES BOTH PRIOR AND CURRENT YEAR DATA, THE COOPERATIVE HAS CHOSEN TO ALSO REPORT ON PART I, LINE 14 FOR THE PRIOR YEAR THE AMOUNT OF PATRONAGE DIVIDENDS PAID TO THE MEMBERS FOR THE 2010 CALENDAR YEAR BECAUSE THE INSTRUCTIONS FOR THE 2010 FORM 990 DID NOT PROVIDE FOR SUCH A CLARIFICATION, THE 2010 FORM 990 WAS NOT PREPARED IN THIS MANNER THE COOPERATIVE BELIEVES THAT BOTH THE PRIOR YEAR AND CURRENT YEAR COLUMNS OF PART I SHOULD BE PREPARED CONSISTENTLY IN ORDER TO REFLECT THAT THE COOPERATIVE HAS A PRE-EXISTING OBLIGATION TO ALLOCATE PATRONAGE DIVIDENDS TO ITS MEMBERS FOR EACH YEAR THAT IT OPERATES FOR THE BENEFIT OF THE MEMBERS

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section A, line 6	THE COOPERATIVE WAS FORMED BY THE MEMBERS TO PROVIDE ELECTRIC SERVICE AT COST ON A COOPERATIVE BASIS

Identifier	Return Reference	Explanation
	, ,	THE MEMBERS OF THE COOPERATIVE VOTE ON THE BOARD OF TRUSTEES AND DO SO ON A VOTING DISTRICT BY VOTING DISTRICT BASIS EACH MEMBER WITHIN THE VOTING DISTRICT IS ENTITLED TO ONE VOTE DURING ELECTIONS REGARDLESS OF THE VALUE OR QUANTITY OF COOPERATIVE SERVICES USED

Identifier	Return Reference	Explanation
	VI, Section A,	THE FOLLOWING ACTS REQUIRE APPROVAL OF THE MEMBERS OF THE COOPERATIVE 1 DISSOLUTION/LIQUIDATION OF THE COOPERATIVE 2 MERGER OR CONSOLIDATION OF THE COOPERATIVE WITH ANOTHER ORGANIZATION 3 THE DISPOSAL OF A SUBSTANTIAL PORTION OF THE COOPERATIVE'S ASSETS 4 AMENDMENTS TO THE BY-LAWS AND ARTICLES OF INCORPORATION

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 11	THE FORM 990 WAS REVIEWED AND DISCUSSED BY THE BOARD AT THE FIRST BOARD MEETING OCCURRING SUBSEQUENT TO THE DATE THE FORM 990 WAS FILED

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 12c	OFFICERS ARE REQUIRED TO REVIEW AND BE FAMILIAR WITH THE POLICIES OUTLINED IN THE COOPERATIVE'S CONFLICT OF INTEREST POLICY OFFICERS ARE REQUIRED TO DISCLOSE ANY ACTION OR SITUATION THAT MIGHT VIOLATE THE POLICY TO THE THE FULL BOARD OF TRUSTEES AS SOON AS POSSIBLE ADDITIONALLY, THE BY-LAWS DISQUALIFY A TRUSTEE FROM SERVING ON THE BOARD, INCLUDING BUT NOT LIMITED TO, IF HE/SHE (1) IS EMPLOYED BY OR INVESTS IN A COMPETING BUSINESS, (2) IS AN ELECTED PUBLIC OFFICIAL AND (3) HAS A FAMILY RELATIONSHIP WITH ANOTHER TRUSTEE/OFFICER OR EMPLOYEE OF THE COOPERATIVE

Identifier	Return Reference	Explanation
		THE COOPERATIVE POSTS THE COOPERATIVE'S BY-LAWS AND SUMMARIZED COPIES OF THE MOST RECENTLY COMPLETED AUDITED FINANCIAL STATEMENTS ON THE COOPERATIVE'S WEBSITE. PURSUANT TO THE AMENDMENT TO ARTICLE VI, SECTION 5 AS ADOPTED BY THE MEMBERS IN APRIL 2010, THE COOPERATIVE VOLUNTARILY AGREES TO ABIDE BY THE REQUIREMENTS OF THE OPEN MEETING ACT AND THE INSPECTION OF PUBLIC RECORDS ACT

ldentifier	Return Reference	Explanation
INDEPENDENT TRUSTEE	Form 990, Part VI, Line 1b	LEROY ANAYA PER IRS FORM 990 INSTRUCTIONS IS NOT AN INDEPENDENT TRUSTEE BECAUSE HE IS ON THE BOARD OF TRI-STATE G&T ASSOCIATION, INC, A TAXABLE COOPERATIVE. THE COOPERATIVE PURCHASES ITS ELECTRIC ENERGY FROM TRI-STATE AND THE COOPERATIVE IS A MEMBER OF TRI-STATE. AS SUCH, MR. ANAYA IS THE COOPERATIVE'S REPRESENTATIVE ON TRI-STATE'S BOARD. MR. ANAYA HAS NO OWNERSHIP INTEREST IN TRI-STATE AND RECEIVES NO DIRECT OR INDIRECT BENEFIT FROM THE COOPERATIVE DOING BUSINESS WITH TRI-STATE.

ldentifier	Return Reference	Explanation
VOTING MEMBERS	Form 990, Part VI, Section A, Line 1	THE COOPERATIVE HAS 10 TRUSTEES, ALL 10 ARE ALLOWED TO VOTE HOWEVER, THE BOARD PRESIDENT VOTES ONLY IN THE CASE OF A TIE

ldentifier	Return Reference	Explanation
TO PROVIDE DETAIL REGARDING OFFICER'S OTHER COMPENSATION	Form 990, Part VII, Column F	IN ORDER TO PROVIDE RETIREMENT BENEFITS TO ITS EMPLOYEES, THE COOPERATIVE HAS ESTABLISHED A DEFINED CONTRIBUTION PLAN UNDER SECTION 401(K) OF THE INTERNAL REVENUE CODE AS PART OF THE PLAN DOCUMENT, THE COOPERATIVE PROVIDES A MATCHING CONTRIBUTION UP TO 11% OF A PARTICIPATING EMPLOYEE'S SALARY ADDITIONALLY, THE COOPERATIVE PARTICIPATES IN A MULTI-EMPLOYER DEFINED BENEFIT PLAN CONTRIBUTIONS TO THIS PLAN ARE BASED ON 7% OF A PARTICIPATING EMPLOYEE'S SALARY BUT MAY NOT EXCEED THE FULL FUNDING LIMITATION OF SUCH PLAN EMPLOYER CONTRIBUTIONS FOR BOTH PLANS ARE AVAILABLE TO PARTICIPATING EMPLOYEES, INCLUDING OFFICERS, MEETING THE ELIGIBILITY REQUIREMENTS OF SUCH PLANS THE COOPERATIVE ALSO PROVIDES HEALTH, DENTAL, VISION AND LIFE INSURANCE TO ALL EMPLOYEES, INCLUDING OFFICERS, THROUGH A QUALIFIED PLAN THE AMOUNTS REPORTED ON PART VII, COLUMN (F) FOR THE OFFICER IS COMPRISED OF THE ACTUARIAL INCREASE IN THE DEFINED BENEFIT PLAN FOR THE OFFICER, THE TOTAL AMOUNT CONTRIBUTED TO THE 401(K) PENSION PLAN AND THE INSURANCE PREMIUMS PAID FOR THE BENEFIT OF THE OFFICER IN ADDITION TO THE ABOVE PENSION PLANS, THE COOPERATIVE ALSO PROVIDES POST-RETIREMENT HEALTH INSURANCE BENEFITS THROUGH AN UNFUNDED WELFARE BENEFIT PLAN THE PER PERSON VALUE OF THESE BENEFITS HAS NOT BEEN ESTIMATED

ldentifier	Return Reference	Explanation
GENERAL MANAGER RESPONSIBILITIES	Form 990, Part VII, Section A	THE BOARD OF TRUSTEES CONSIDERS THE GENERAL MANAGER TO BE BOTH THE TOP MANAGEMENT OFFICIAL AND THE TOP FINANCIAL OFFICIAL THEREFORE, ONLY THE GENERAL MANAGER IS LISTED AS AN EMPLOYEE OFFICER

ldentifier	Return Reference	Explanation
PATRONAGE DIVIDENDS	Form 990, Part VIII, Line 2	PATRONAGE DIVIDENDS RESULT FROM THE PURCHASE OF WHOLESALE POWER FROM A GENERATION & TRANSMISSION COOPERATIVE PATRONAGE DIVIDENDS ALSO RESULT FROM THE PAYMENT OF INTEREST FROM COOPERATIVE BANKS AND THE PURCHASE OF SUPPLIES AND SERVICES FROM OTHER COOPERATIVE ORGANIZATIONS THE EXPENSES ASSOCIATED WITH PURCHASES FROM AND PAYMENTS TO SUCH COOPERATIVE ORGANIZATIONS ARE A DIRECT COMPONENT OF COST OF THE ELECTRIC SERVICE PROVIDED BY THE COOPERATIVE TO ITS MEMBERS

ldentifier	Return Reference	Explanation
ACCOUNTING SYSTEM	Form 990, Part IX	THE ACCOUNTING RECORDS OF THE COOPERATIVE ARE MAINTAINED IN ACCORDANCE WITH THE UNIFORM SYSTEM OF ACCOUNTS AS PRESCRIBED BY THE FEDERAL ENERGY REGULATORY COMMISSION FOR CLASS A AND B ELECTRIC UTILITIES MODIFIED FOR ELECTRIC BORROWERS OF THE RURAL UTILITIES SERVICE(RUS) THE UNIFORM SYSTEM OF ACCOUNTING DOES NOT RECORD EXPENSES IN THE GENERAL EXPENSE CATEGORIES PROVIDED ON PART IX LINES 1 - 23 THE COOPERATIVE WILL BREAK OUT SALARIES AND WAGES, EMPLOYEE BENEFITS AND PAYROLL TAXES THAT ARE ALLOCATED IN ACCORDANCE WITH THEIR ACCOUNTING SYSTEM, BUT OTHER EXPENSES THAT ARE DESCRIBED IN LINES 1 - 23 WILL BE REPORTED ON LINE 24 UNDER THE EXPENSE CATEGORIES REQUIRED BY THE UNIFORM SYSTEM OF ACCOUNTS

ldentifier	Return Reference	Explanation
RECONCILIATION OF WAGES PER RETURN TO FORM W-3	Form 990, Part IX, Lines 5-7	SALARIES AND WAGES ARE ALLOCATED TO ASSET, LIABILITY, AND EXPENSE ACCOUNTS BASED ON THE ACCOUNTING SYSTEM DESCRIBED ABOVE. IN AN EFFORT TO EXPLAIN WHY THE AMOUNTS REPORTED ON LINES 5-7 DO NOT AGREE TO THE W-3 THE FOLLOWING RECONCILIATION IS PROVIDED TOTAL PER LINES 5-7 \$1,507,067 LESS DIRECTORS FEES REPORTED ON 1099-MISC (62,204) LESS OFFICERS BENEFITS REPORTED ON LINE 5 (44,146) PLUS SALARIES AND WAGES ALLOCATED TO ASSET ACCOUNTS 604,812 RECONCILIATION TO W-3 \$2,005,529

ldentifier	Return Reference	Explanation
BREAKDOWN OF EXPENSES INCLUDED IN ADMINISTRATIVE AND GENERAL	Part IX, Line	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS ADMINISTRATIVE AND GENERAL EXPENSE ON FORM 990, PART IX, LINE 24 MISCELLANEOUS GENERAL EXPENSE \$214,927 OFFICE SUPPLIES AND EXPENSE 81,856 OUTSIDE SERVICES EMPLOYED 151,578 ASSOCIATION DUES 114,747 DIRECTOR EXPENSES 26,331 MAINTENANCE OF GENERAL PLANT 153,875 TOTAL ADMINISTRATIVE AND GENERAL EXPENSE PER 990 \$743,314

ldentifier	Return Reference	Explanation
TO PROVIDE DETAIL REGARDING OTHER EXPENSES	Form 990, Part IX, Line 24e	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS OTHER EXPENSES ON FORM 990, PART IX, LINE 24E. TAXES EXPENSE \$207,082 SALES EXPENSE 20,621 OTHER DEDUCTIONS 94,669 TOTAL OTHER EXPENSES PER FORM 990 LINE 24E \$322,372

ldentifier	Return Reference	Explanation
	Form 990, Part IX, Line 4	THE FORM 990 INSTRUCTIONS FOR THE CURRENT YEAR CLARIFIES THAT THE AMOUNT OF PATRONAGE DIVIDENDS PAID TO THE MEMBERS SHOLLD BE REPORTED ON PART IX, LINE 4 THE HEMASE "PATRONAGE DIVIDENDS PAID" REPERS TO THE PROCESS, SUBSEQUENT TO YEAR-BND, BY WHICH THE COOPERATIVE ALLOCATES PATRONAGE CAPITAL TO AND, THEREFORE, OPERATES AT COST WITH ITS MEMBERS THE COOPERATIVE BASIS TAX LAW DEPINES" OPERATING ON A COOPERATIVE OPERATES AND TO DO SO ON A COOPERATIVE BASIS TAX LAW DEPINES" OPERATING ON A COOPERATIVE OPERATES AT COST THROUGH THE ALLOCATION OF TRUE PATRONAGE DIVIDENDS (ALSO REPERRED TO AS ALLOCATIONS OF PATRONAGE CAPITAL, DISTRUMBERS PATRONAGE DIVIDENDS ARE CONSIDERED PAID THE ALLOCATIONS OF PATRONAGE (APITAL) TO IS MEMBERS PATRONAGE DIVIDENDS ARE CONSIDERED PAID THE THE ALLOCATIONS OF PATRONAGE (1) PURSUANT TO A PRE-EXISTING OBLIGATION, (2) FROM THE MARGINS PRODUCED FROM THE TRANSACTIONS DONE WITH OR FOR MEMBERS, AND (3) IN A FAIR AND EQUITABLE BASIS ON THE BASIS OF PATRONAGE (1E PURCHASES) ADDITIONALLY, THE ALLOCATION OF PATRONAGE DIVIDENDS SHOULD BE MADE WITHIN A REASONABLE TIME PERIOD AFTER THE CLOSE OF THE COOPERATIVE'S YEAR-BND OF DECEMBER'S 1EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE DIVIDEND IS PROVIDED FOR IN THE NON-PORT OPERATION ARTICLE OF THE COOPERATIVE'S BYLAWS AND IS SUMMARIZED AS FOLLOWS (A) IN ORDER TO INDUCE PATRONAGE AND TO ASSURE THAT THE COOPERATIVE WILL OPERATE ON A NOIFMOFTI BASIS, THE COOPERATIVE IS OBLIGATED TO ACCOUNT ON A PATRONAGE BY DEPARAGE OF THE PATRONAGE FOR ALL AMOUNTS RECEIVED AND RECEIVABLE FROM THE FURNISHED BY THE MEMBER'S AS CAPITAL (C) THE COOPERATING COSTS AND EXPENSES PROPERLY CHARGABLE AGAINST SUCH SERVICES (IE MARGINS FROM THE PROVISION OF BLICATED TO PAY BY CREDITS TO A CAPITAL ACCOUNT OF A PAY MEMBER SHALL HAVE THE SAME STATUS AS THOUGHT THEY HAD BEEN PAID TO THE MEMBER'S AS CAPITAL (C) THE COOPERATIVE IS BULICATED

Identifier	Return Reference	Explanation
-	XI, line 5	Prior period adjustments 851,064 OTHER COMPREHENSIVE INCOME- NET UNREALIZED GAINS ON INVESTMENTS 3,093 RETIREMENTS OF PATRONAGE CAPITAL -46,425 TRANSFER OF DONATED CAPITAL -991 OTHER COMPREHENSIVE INCOME-PROVISION FOR PENSION AND BENEFITS -84,400 PATRONAGE CAPITAL ASSIGNABLE 2,492,155 Total to Form 990, Part XI, Line 5 3,214,496

ldentifier	Return Reference	Explanation
AUDIT COMMITTEE	Form 990, Part XII, Line 2c	THE BOARD AS A WHOLE IS RESPONSIBLE FOR OVERSEEING THE FINANCIAL STATEMENT AUDIT AND SELECTING THE INDEPENDENT FINANCIAL STATEMENT AUDITOR

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DLN: 93493319068082

Employer identification number

SCHEDULE R (Form 990)

Name of the organization SOCORRO ELECTRIC COOPERATIVE INC

Related Organizations and Unrelated Partnerships

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

2011

OMB No 1545-0047

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Internal Revenue Service

Attach to Form 990. See separate instructions.

					85-008496	3		
Part I Identification of Disregarded Entities (Com	plete	ıf the organızatıon	answered "Yes" (on Form 990, Pa	rt IV, line 33.)			
(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		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	nizat g the	t ions (Complete ıf tax year.)	the organization a	answered "Yes"	on Form 990, Pa	rt IV, line 34 becaus		
(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 statu: (if section 501(c)(3)		Section 5 cont	g) i12(b)(13 rolled uzation
							Yes	No
(1) SOCORRO ELECTRIC FOUNDATION PO BOX H SOCORRO, NM 878010278 23-7044964	TO VAI	OVIDE SCHOLARSHIPS LEDICTORIANS OF DLS IN COOP'S SERVICE	NM	501(c)(3)		PF N/A	Yes	
For Privacy Act and Paperwork Reduction Act Notice, see the Instru	tions	for Form 990.	Cat No 501	.35Y	•	Schedule R (F	orm 990)	2011

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(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) Disproprtionate allocations?		Disproprtionate		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No					
												i				

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) Рптагу 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

Schedu	le R (Form 990) 2011		Pε	age 3
Part	V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	ote. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Dur	ing the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a l	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
Ь	Gift, grant, or capital contribution to related organization(s)	1b		No
c (Gift, grant, or capital contribution from related organization(s)	1c		No
d I	oans or loan guarantees to or for related organization(s)	1d		No
e I	oans or loan guarantees by related organization(s)	1e		No
f S	sale of assets to related organization(s)	1f		No
g l	urchase of assets from related organization(s)	1g		No
h I	exchange of assets with related organization(s)	1h		No
i L	ease of facilities, equipment, or other assets to related organization(s)	1 i		No
j L	ease of facilities, equipment, or other assets from related organization(s)	1j		No
k I	Performance of services or membership or fundraising solicitations for related organization(s)	1k	Yes	
I P	erformance of services or membership or fundraising solicitations by related organization(s)	11		No
m S	haring of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	Yes	
n s	Sharing of paid employees with related organization(s)	1n		No
o 1	Reimbursement paid to related organization(s) for expenses	10		No
р	Reimbursement paid by related organization(s) for expenses	1р	Yes	
q (Other transfer of cash or property to related organization(s)	1q		No
r	ther transfer of cash or property from related organization(s)	1r		No
2 I	f 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 (a) (b) Transaction (c) Method of de	(d)		

(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	Method of determining amount involved
(1) SOCORRO ELECTRIC FOUNDATION - NA LESS THAN 50000	М		
(2) SOCORRO ELECTRIC FOUNDATION - NA LESS THAN 50000	Р		
(3) SOCORRO ELECTRIC FOUNDATION - NA LESS THAN 50000	к		
(4)			
(5)			
(6)			

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)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(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