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Form · 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

Open to Public

Department of the Treasury

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

	Inter	nal Rever	The organization may have to use a copy of this return to satisfy state r			inspection
	<u>A</u>	For the	2011 calendar year, or tax year beginning January 1st , 2011, and endi	ng Decen	ber 31st	, 20 11
	В	Check if	applicable C Name of organization MOON LAKE ELECTRIC ASSN. INC.		D Employe	r identification number
		Address		87-0154903		
	$\overline{\Box}$	E Telephon	E Telephone number			
	$\overline{\Box}$		435-722-5400			
	$\overline{\Box}$	Initial ref	1715	·		
	$\overline{\Box}$	Amende		G Gross red	ceipts \$	
	\exists		ion pending F Name and address of principal officer	H(a) Is this	a croup return fo	or affiliates? Yes V No
		Дриса		cluded? Yes No		
	_	Tay aya	GRANT EARL PO BOX 278 ROOSEVELT, UT mpt status 501(c)(3) √ 501(c) (12) ◀ (Insert no)	─ ' '		list (see instructions)
	<u>:</u>	Website		H(c) Grou	p exemption	number ▶
	ĸ		organization		` _	of legal domicile UT
		art I	Summary			
	_	1	Briefly describe the organization's mission or most significant activities. RETA	AL DISTRIBU	TION OF E	LECTRICITY TO
			MEMBER OWNERS.			
	S.]			·	
	Ē	}				
	Activities & Governance	2	Check this box ▶☐ if the organization discontinued its operations or disposed	of more that	n 25% of i	ts net assets.
	Ğ	3	Number of voting members of the governing body (Part VI, line 1a)		1 0 1	7
	og g	4	Number of independent voting members of the governing body (Part VI, line 1b)	. 4	7
	iţie	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		. 5	104
	듅	6	Total number of volunteers (estimate if necessary)		6	0
2	۲ إ	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
20%	,	ь	Net unrelated business taxable income from Form 990-T_line-34		7b	0
£;1				Prior Y	ear	Current Year
(100	Ð	8	Contributions and grants (Part VIII, line 1h)	ည့		
	Š	9	Frourant Service revenue trantivili. line 201	30		
SS	Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)(AY 1 6 2012	S 0	793,131	191,001
	Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8q, 9q, 10c, and 11e)	느 1	8,501,366	19,240,419
T		12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1	9,294,497	19,431,474
SCANNED		13	Grants and similar amounts paid (Part IX, column (A), lines 1=3)	Mar of		
Z		14	Benefits paid to or for members (Part IX, column (A), line 4)			
$\ddot{\mathbf{O}}$	Se	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		821,031	785,652
S	Expenses		Professional fundraising fees (Part IX, column (A), line 11e)			
	xpe		Total fundraising expenses (Part IX, column (D), line 25) ▶			
	ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,221,484	15,394,953
			Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		6,042,515	16,180,605
		19	Revenue less expenses. Subtract line 18 from line 12		3,251,982	3,250,868
	Assets or Balances		T	Beginning of C		End of Year
	Set		Total assets (Part X, line 16)		7,223,813	99,725,758
	절		Total liabilities (Part X, line 26)		5,442,458	25,705,889
	24		Net assets or fund balances. Subtract line 21 from line 20		1,781,355	74,019,869
	_	rt II	Signature Block			
	Und	ier penal . correct	ties of perjury, I declary that I have examined this return, including accompanying schedules and stat , and complete peclaration of preparer (other than officer) is based on all information of which prepar	ernents, and to er has any know	dedge	ly knowledge and belief, it is
						10-12
	Sig	n	Signature of officer	L	ate	10-12
	Hei		Grant J. Earl General Manager/CEO			
	1161	0	Type or print name and title			
				Date	G:	PTIN
	Pai		This type property of the control of		Check [self-empl	
		pare	I MOON LAVE ELECTRIC ACCOCIATION INC	Fire	n's EIN ▶	87-0154903
	Us	e Only	Firm's address ► 800 WEST US HWY 40		one no	435-722-5400
	May	the IR	S discuss this return with the preparer shown above? (see instructions)			·
				No 11282Y		Form 990 (2011)
						1

0111100	0 (201	''				raye 🚣
Part	Ш	Statement of Program Ser	vice Accomplishments			-
			is a response to any question	ın this Part III	<u> </u>	<u> </u>
1		fly describe the organization's r				
	MOC	ON LAKE ELECTRIC PROVIDES I	ELECTRICITY ON A RETAIL BAS	S TO THE MEMB	ER OWNERS.	
	D. 4.	Manager 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	-ift		high ware not listed on	th a
2		the organization undertake any Form 990 or 990-EZ?	significant program services of			
	•					· Yes No
		es," describe these new service the organization cease condi-		anges in how	it conducts any progr	am
•		ices?				
		es," describe these changes or				· les Milo
		cribe the organization's program		r each of its thre	e largest program servi	ces as measured by
	expe	enses. Section 501(c)(3) and 5 ts and allocations to others, the	01(c)(4) organizations and sec	tion 4947(a)(1)	trusts are required to r	eport the amount of
4a	(Cod	le: 501 (c)(12) (Expenses \$	16,180,605 including grants of	of \$) (Revenue \$	19,431,474)
						
				•••••		
4b	(Cod	e:) (Expenses \$	including grants of	of \$) (Revenue \$	· · · · · · · · · · · · · · · · · · ·
	(
	-					
4c	(Cod	e:) (Expenses \$	including grants of	vt ¢) (Revenue \$	
70	(COU	e/ (Expenses \$	Including grants c	<i>π</i> Φ) (i teveride \$	/
		·				
•						
•						
•						
•						
		r program services (Describe in				
			ng grants of \$) (Revenue \$)	
4e	Total	program service expenses	•			

-art	Checklist of Required Schedules		V	Na
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	Yes	No
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		√
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.		• •	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	✓	
đ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e	√	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	✓	
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	✓	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a		14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		√
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		✓

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
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		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		√
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37		✓
	197 Note. All Form 990 mers are required to complete ochequie O	38 Fort	n 990	(2011)

Form **990** (2011)

Part				
	Check if Schedule O contains a response to any question in this Part V			<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 18			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2 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 2a 104	- 1		-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		√
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	_		,
	·	4a		✓
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.			
E-	· · · · · · · · · · · · · · · · · · ·			
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		V
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	50	,	V
-	organization solicit any contributions that were not tax deductible?	6a		./
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		•
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		\
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	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 Form 1098-C?	7h		✓_
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		,
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		∀
10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	İ		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
1.	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	,		
_				
C	Enter the amount of reserves on hand	14a		./
14a h	If "Yes." has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14a		<u> </u>
	in 100, has a most a contract to toport those partitioned in 110, profits an explanation in deficult O		,	•

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Check if Schedule O contains a response to any question in this Part VI	s in Schedule O. S	See ins	structi	"No" ons. □
Secti	on A. Governing Body and Management	<u> </u>	<u> </u>	<u>· · · · </u>	ㅡ
0000	on A. doverning body and management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 7			
b 2	Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?		2		
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other		3		✓
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 99 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders?	on's assets?	5 6	√	√ √
b	one or more members of the governing body?		7a 7b	√	
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:				
a b 9	The governing body?		8a 8b	1	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule Con B. Policies (This Section B requests information about policies not required by the)	9 Tue C	ode.)	✓_
GCCII	on b. 1 dilices (This dection is requests information about policies not required by the	<u> </u>	100 0	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities o affiliates, and branches to ensure their operations are consistent with the organization's exemption.	f such chapters, pt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?	11a	✓	
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12a 12b	✓	√
С	Did the organization regularly and consistently monitor and enforce compliance with the indescribe in Schedule O how this was done	oolicy? If "Yes,"	12c		\
13 14 15	Did the organization have a written whistleblower policy?	and approval by and decision?	13	✓	-
a b	The organization's CEO, Executive Director, or top management official		15a 15b	√	
	Did the organization invest in, contribute assets to, or participate in a joint venture or simulation at taxable entity during the year?		16a	1984	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?	to safeguard the	16b		**************************************
Section	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	nd 990-T (Section	n 501((c)(3)s	only)
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing doct and financial statements available to the public during the tax year.				olicy,
20	State the name, physical address, and telephone number of the person who possesses the b organization:	ooks and records	of the	•	

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organi	zation nor any relate	d orga	aniz	atio	on c	ompe	ensa	ted any currer	t officer, director	, or trustee.
				•	C)					
(A)	(B)	(40.0	.at at		sition	e than e	000	(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week	office	ran	dac	irect	or/trus	~ <u> </u>	compensation from	compensation from related	amount of
	(describe	악	log.	유	6	ea F	ᇢ	the	organizations	other compensation
	hours for	Individual trustee or director	\ <u>\$</u>	Officer	Key employee	ploy	Former	organization	(W-2/1099-MISC)	from the
	related organizations	ortal	on one		[평	8 5		(W-2/1099-MISC)]	organization and related
	ın Schedule	rust	 	ļ	yee	l mg				organizations
	O)	8	Institutional trustee			Highest compensated employee				
					<u> </u>		-			
(1) DOUGLAS HOLGATE							1			
BOARD MEMBER			✓				<u> </u>	8,567		
(2) TAMARA VINCENT										
BOARD MEMBER			✓.		L.			14,608		<u> </u>
(3) A. KENT OLSEN										
BOARD MEMBER			✓			L		16,805		
(4) YORDIS NIELSON							ł			
BOARD MEMBER			✓					16,978		
(5) JEFF HENDERSON				ł				ĺ		
BOARD MEMBER			✓			<u></u>		15,624		
(6) JOE D. FIELDSTED								ļ		
BOARD MEMBER			✓				L	12,658		
(7) BRAD J. CASTO			'	Ì				1	}	
BOARD MEMBER			✓		L			14,781		
(8) TOMMY THACKER					_					
BOARD MEMBER			✓					6,814		
(9) GRANT J. EARL										
GENERAL MANAGER/CEO	40			✓	✓	✓		201,948		
(10) KENNETH WINDER				1		1			1	
MANAGER OF ENGINEERING	40				✓	✓	_	150,057		
(11) ALAN HASLEM										
MANAGER OF FINANCE	40			✓		✓		115,152		
(12) PAUL BETTS										
MANAGER OF OPERATIONS	40					1		107,938		
(13) ROBERT K KISSLING			1		\					
COLORADO MANAGER	40					1		103,723		
(14)		·								
		ļ				!				

Par	VII Section A. Officers, Directors, Trus	tees, Key E	mploy	yees			lighes	st C	ompensated E	mployees (con	tinued)			
					Pos	C) ition			(5)	<u></u>			_	
	(A) Name and title	(B) Average			eck	more	than o		(D) Reportable	(E) Reportable			(F) mated	
	Manne dire title	hours per					ıs both or/trust		compensation	compensation fro	m	amo	unt of	
		week (describe	9 5	5	Q	Ž	9 ∓	٦	from the	related organizations			her ensatio	n
		hours for	divid	stitu	Officer	y er	ghes	Former	organization	(W-2/1099-MISC		•	n the	
		related organizations	ual t	iona		Key employee	ee t cor		(W-2/1099-MISC)				nzation related	
		in Schedule	Individual trustee or director	Institutional trustee		yee	npe						zation	
		O)	8	stee			Highest compensated employee							
(4 E)		<u></u>				_	_ <u>&</u>		ļ					
(15)	·····	1	}											
(16)														
(17)	-										 			
								_						
(18)	· · · · · · · · · · · · · · · · · · ·										1			
(19)										<u></u>	+			
(20)							_		-		-		_	_
(20)														
(21)														
(22)														
												-		
	·							<u></u>						
(24)	·													
(25)	· · · · · · · · · · · · · · · · · · ·										 			
	Sub-total										-			
C	Total from continuation sheets to Part	VII. Sectio	n A	•		• •	•	>			+			
d	Total (add lines 1b and 1c)							.			1			
2	Total number of individuals (including but	not limited					above	e) w	ho received m	ore than \$100,	000 of			
	reportable compensation from the organi	zation >								····				
3	Did the organization list any former of	ficer direct	tor o	r tr	iete	A	kov c	mn	olovee or high	est compens	ited [Yes	No
	employee on line 1a? If "Yes," complete s						-					3	ļ	1
4	For any individual listed on line 1a, is the	sum of rep	portal	ole d	com	per	nsatio	n a	and other comp	ensation from	the			
	organization and related organizations	greater tha	an \$1	50,	000	? //	"Ye	s, "	complete Sch	edule J for s	uch			
5	individual		 Imper	neat	·	fror	n anv		 related organiz	 ration or individ	· Iual	4	✓	
	for services rendered to the organization?											5		✓
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization Rep												n's ta	ıx
	year.						_		(B)			(C)		
	Name and business add	ress					_		Description of s	ervices	Con	npensa		
	TRUM ENG RESOURCES OK SERVICE INC								EE TRIMING				_	B,890 5,270
	MON CORPORATION						_		G SERVICE					3,550
	TATION MAINT SERV LLC							_	G SERVICE					3,452
											_			
2	Total number of independent contracto	rs (ıncludın	ıg bu	t no	ot li	ımıt	ed to	th	ose listed abo	ove) who				_

received more than \$100,000 of compensation from the organization ▶

Par	t VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ıts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
S, S	С	Fundraising events 1c					
a ii	d	Related organizations 1d					
i, S	е	Government grants (contributions) 1e		-			
ri Si	f	All other contributions, gifts, grants,					
ig #		and similar amounts not included above 1f					
5 G	g	Noncash contributions included in lines 1a-1f. \$					
Cont	h	Total. Add lines 1a-1f	>		.]		
Program Service Revenue			Business Code				
3Ve	2a						
æ	Ь						
Ğ.	С						
Se	d						
Ë	е						
D	f	All other program service revenue.					·
<u>=</u>	g	Total. Add lines 2a–2f					
	3	Investment income (including divid					
	_	and other similar amounts)		169,245	169,245		169,245
	4	Income from investment of tax-exempt b					
	5	Royalties					ļ
		(i) Real	(ii) Personal				
	6a	Gross rents 45,043	3				
	b	Less: rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss) Gross amount from sales of (i) Securities	▶ (ii) Other	45,043	45,043		45,043
	7a	Gross amount from sales of (i) Securities assets other than inventory	 - 				
	b	Less cost or other basis	22,040				
		and sales expenses . Gain or (loss)	22,040				
	d	Net gain or (loss)		22,040	22,040		22.040
	l "	Net gaill of (loss)		22,040	22,040		22,040
levenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c).					
Other R		See Part IV, line 18 a					
ŏ		Less: direct expenses b			Ì		
		Net income or (loss) from fundraising	events . >			· · · · · · · · · · · · · · · · · · ·	
	9a	Gross income from gaming activities. See Part IV, line 19 a					
		Less: direct expenses b					
	C	Net income or (loss) from gaming act	ivities				
	IVa	Gross sales of inventory, less returns and allowances a	50 000 044				
	_						
		Less: cost of goods sold b Net income or (loss) from sales of inv		10 445 201	10 445 201		40.445.204
	C	Miscellaneous Revenue	Business Code	18,445,391	18,445,391		18,445,391
	11a	PATRONAGE DIVIDENDS	Dusiness Code	749,755	749,755		740 755
	b	***************************************		/43,/33	745,735		749,755
	C						
į	d	All other revenue	 				
	_	Total. Add lines 11a–11d	•	749,755			
	12	Total revenue. See instructions	<u>_</u>	19,431,474	19,431,474		19,431,474
	_		- 1		,		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Part IX Statement of Functional Expen	ses
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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 respon	se to any question	in this Part IX		
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	785,652		785,652	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9 10 11	Other employee benefits				
a b	Management				
c d e	Accounting				
f g 12	Investment management fees Other				
13 14	Office expenses				
15 16 17	Royalties				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20 21	Conferences, conventions, and meetings Interest	771,735	771,735		
22 23	Depreciation, depletion, and amortization . Insurance	3,764,503	3,764,503		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b c	SCH II	10,858,715	8,853,818	2,004,897	
d e	All other expenses				
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs	16,180,605	13,390,056	2,790,549	
	from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	8,667,698	1	4,360,163
2	Savings and temporary cash investments	2,048,824	2	8,691,649
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	7,236,994	4	8,264,688
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	965	5	-5,099
st e	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	Notes and loans receivable, net	534,145	7	273,325
8 ×	Inventories for sale or use	2,564,834	8	2,939,804
9	Prepaid expenses and deferred charges	115,533	9	145,907
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 124,741,702			· · · · · · · · · · · · · · · · · · ·
Ь	Less: accumulated depreciation 10b 52,469,513	73,328,651	10c	72,272,189
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	2,726,168	13	2,783,132
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	97,223,813	16	99,725,758
17	Accounts payable and accrued expenses	10,807,555	17	11,368,180
18	Grants payable		18	
19	Deferred revenue		19	, <u>-</u>
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities 23	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
コ 23	Secured mortgages and notes payable to unrelated third parties	12,234,053	23	11,804,274
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 D	2,400,850	25	2,533,435
26	Total liabilities. Add lines 17 through 25	25,442,458	26	25,705,889
	Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.	20,112,100		20,700,000
E 27	Unrestricted net assets		27	
8 28	Temporarily restricted net assets		28	··, · · · · · · · · · · · · · · · · · ·
29	Permanently restricted net assets		29	
Net Assets or Fund Balances 25 25 30 31 32 33 33 34 35 36 36 36 36 36 36 36 36 36 36 36 36 36	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ध 30	Capital stock or trust principal, or current funds		30	
9 31	Paid-in or capital surplus, or land, building, or equipment fund .	68,529,370	31	70,769,001
४ 32	Retained earnings, endowment, accumulated income, or other funds .	3,251,983	32	3,250,868
			00	74.040.000
33	Total net assets or fund balances	71,781,353	33	74,019,869

Page 1	2
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	· · · · · · · · · · · · · · · · · · ·							
Par	XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		19,43	1,474			
2	Total expenses (must equal Part IX, column (A), line 25)	2		16,18	0,605			
3	Revenue less expenses Subtract line 2 from line 1	3		3,25	0,868			
4								
5	(1)							
6								
	column (B))	6		74,01	9,869			
Part	XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII		<u></u>					
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	olain in						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	,				
b	Were the organization's financial statements audited by an independent accountant?		2b	V				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ereight	20	_				
C	of the audit, review, or compilation of its financial statements and selection of an independent account	-	2c	1				
	If the organization changed either its oversight process or selection process during the tax year, ex		20	<u> </u>	<u> </u>			
	Schedule O.	piani iii						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ar were						
•	issued on a separate basis, consolidated basis, or both:							
	☐ Separate basis ☐ Consolidated basis ☑ Both consolidated and separate basis							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in						
	the Single Audit Act and OMB Circular A-133?		3a		1			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the			<u> </u>			
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	-	3b					
			For	ո 990	(2011)			

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Employer identification number MOON LAKE ELECTRIC ASSN. INC 87-0154903 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. Total number at end of year 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 8 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Assets included in Form 990, Part X .

Parl	Organizations Maintaining	Collections	of Art, His	torical T	reasures,	or Ot	her Similar A	ssets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and	l other reco	rds, chec	k any of the	e follov	ving that are a s	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchang	e prog	rams	
b	☐ Scholarly research		е	Other				
С	☐ Preservation for future generations	;						
4	Provide a description of the organizat	ion's collection	ns and expl	ain how th	ney further	the org	ganization's exe	mpt purpose in Part
	XIV.							
5	During the year, did the organization	solicit or recei	ve donation	ns of art, i	historical tr	easure	s, or other simil	ar
	assets to be sold to raise funds rather							
Part	IV Escrow and Custodial Arra				anization a	answe	rea tes lo r	orm 990, Part IV,
	line 9, or reported an amount ls the organization an agent, trustee,	t on Form 99	other intern	ne z I.	r contribut	ione o	other assets n	ot
18	included on Form 990, Part X?	custodian or	Other intern	neulary io	i contribut	10115 01		☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa							
Ь	it fes, explain the arrangement in Fa	art AIV and Cor	ripiete trie it	Jilowing to	abie.		7	Amount
С	Beginning balance					10	:	
d	Additions during the year					10	1	
e	Distributions during the year					16		
f	Ending balance					11		
2a	Did the organization include an amoun	nt on Form 990	, Part X, line	21? .				☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa							
Par	V Endowment Funds. Comple			- ,				
		(a) Current year	r (b) Pri	or year	(c) Two year	s back	(d) Three years bac	ck (e) Four years back
1a	Beginning of year balance							2
b	Contributions	·	-					, , , , , , , , , , , , , , , , , , , ,
С	Net investment earnings, gains, and losses							4
د.	Grants or scholarships							
d e	Other expenditures for facilities and						<u>. </u>	:
·	programs							
f	Administrative expenses	***						
g	End of year balance				_			
2	Provide the estimated percentage of t	he current year	r end baland	e (line 1g	, column (a)) held	as:	
а	Board designated or quasi-endowmer	nt 🕨	%					
b	Permanent endowment ▶							
С			%					
_	The percentages in lines 2a, 2b, and 2	c should equa	1100%.				lunimintaned for t	. .
3a	Are there endowment funds not in the	e possession o	of the organi	zation tha	at are neid	and ad	iministered for t	
	organization by:							Yes No 3a(i)
	(i) unrelated organizations (ii) related organizations					• •		3a(ii)
b	If "Yes" to 3a(ii), are the related organi			 an Schedi	ule R?			3b
4	Describe in Part XIV the intended uses	of the organiz	ation's end	owment fo	unds.			L
Part								
	Description of property	(a) Cost	or other basis estment)	(b) Cost o	r other basis ther)		Accumulated epreciation	(d) Book value
1a	Land		1,728,282					1,728,282
b	Buildings		12,326,244				1,817,802	10,508,442
С	Leasehold improvements							
d	Equipment		10,525,757				6,097,654	4,428,103
е	Other		100,161,419				44,554,057	55,607,362
Total.	Add lines 1a through 1e. (Column (d) n	nust equal For	n 990, Part	X, column	(B), line 10)(c).)	<u> ▶ </u>	72,272,189

Part VII	Investments - Other Securities	. See Form 990, Part X, I	ine 12.	
	Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valuation nd-of-year market value
(1) Financia	I derivatives			
(2) Closely-	held equity interests			
(2) Other				
(A)				
(B)				
(C)				
(D)		1		
(E)				
(F)		-	-	
(G)		1		
(H)				
(l)				
	(b) must equal Form 990, Part X, col. (B) line 12)	-		
Part VIII	Investments – Program Relate	d. See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) M	lethod of valuation nd-of-year market value
(1) NRUCF	C-CAPITAL TERM CERTIFICATES	1,449,921	COST	
 	C PATRONAGE	455,089		· · · · · · · · · · · · · · · · · · ·
	PATRONAGE	878,122		
(4)		9.9,		
(5)				
(6)				
(7)				
(8)			,	
(9)				
(10)	b) must equal Form 990, Part X, col (B) line 13.)	2,783,132		
Part IX	Other Assets. See Form 990, Pa			
Tareix		a) Description	<u></u>	(b) Book value
<u></u>	`	7		
(1)				
(2)				
(3)			· · · · · · · · · · · · · · · · · · ·	
(4)				
<u>(5)</u>				
(6)				
(7)				
(8)				
(9)				
(10)	mn (b) must equal Form 990, Part X, c	ol (B) line 15)		. •
Part X	Other Liabilities. See Form 990		· · · · · · ·	: - [
1.	(a) Description of liability	(b) Book value	<u> </u>	
	Income taxes	(b) Book value		
		221 425		
	MER DEPOSITS	321,435	1	
	ETIREMENT BENEFITS	2,212,000		
(4)		-		
(5)				
(6)				
(7)		-		
(8)			1	
(9)				
(10)				
(11)				
	b) must equal Form 990, Part X, col (B) line 25.) ▶	2,533,435		
	SC 740) Footnote. In Part XIV, provide		the organization's financ	cial statements that reports the
organization	's liability for uncertain tax positions u	inder FIN 48 (ASC 740).		

	ents	o Audited Financial Stateme	XI Reconciliation of Change in Net Assets from Form 99
19,431,474	1		Total revenue (Form 990, Part VIII, column (A), line 12)
16,180,605	2		Total expenses (Form 990, Part IX, column (A), line 25)
3,250,868	3		Excess or (deficit) for the year. Subtract line 2 from line 1
	4	<u> </u>	Net unrealized gains (losses) on investments
·	5		Donated services and use of facilities
	6	 -	Investment expenses
	7		Prior period adjustments
	8		Other (Describe in Part XIV.)
-	9		Total adjustments (net). Add lines 4 through 8
3,250,868	10	bine lines 3 and 9	Excess or (deficit) for the year per audited financial statements. Co
n	Return		XII Reconciliation of Revenue per Audited Financial S
19,431,474	1		Total revenue, gains, and other support per audited financial state
			Amounts included on line 1 but not on Form 990, Part VIII, line 12:
		. 2a	Net unrealized gains on investments
			Donated services and use of facilities
		. 2c	Recoveries of prior year grants
]		Other (Describe in Part XIV.)
	2e		Add lines 2a through 2d
	3		Subtract line 2e from line 1
			Amounts included on Form 990, Part VIII, line 12, but not on line 1
	1 1		Investment expenses not included on Form 990, Part VIII, line 7b
	1		Other (Describe in Part XIV)
	4c		Add lines 4a and 4b
19,431,474	5		Total revenue. Add lines 3 and 4c. (This must equal Form 990, Par
			XIII Reconciliation of Expenses per Audited Financial
16,180,605	1		Total expenses and losses per audited financial statements
		1 - 1	Amounts included on line 1 but not on Form 990, Part IX, line 25:
	4	. 2a	Donated services and use of facilities
	1 1	. 2b	Prior year adjustments
	4		Other losses
	_		Other (Describe in Part XIV.)
	2e		Add lines 2a through 2d
	3		Subtract line 2e from line 1
			Amounts included on Form 990, Part IX, line 25, but not on line 1:
	1 1	. 4a	Investment expenses not included on Form 990, Part VIII, line 7b
	1.1	. 4b	Other (Describe in Part XIV.)
			Add lines 4a and 4b
16,180,605	4c 5	1 lime 10)	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Pe

Schedule D (Fo	m 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	
		·
		·····

SCHEDULE J (Form 990)

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 2011 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MOON LAKE ELECTRIC ASSOCIATION, INC

Employer identification number

87-0154903

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		_	
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	✓ Travel for companions ☐ Payments for business use of personal residence	ĺ	•	١.
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
	Discretionary speciality account		ŀ	
.	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment		1	
b	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	1	
^	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
2	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	1	
	directors, trustees, and the OLO/LAcoutive Director, regarding the items officead in line 12:	-	-	-
				'
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			"
	related organization to establish compensation of the CEO/Executive Director. Explain in Part III.	-		1
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee	`		
			_	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling	` .	•	
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		1
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		✓
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		✓
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
		-		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		;	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:	İ		
а	The organization?	5a		1
b	Any related organization?	5b		1
_	If "Yes" to line 5a or 5b, describe in Part III.			,
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			ł
•	compensation contingent on the net earnings of:		'	
а	The organization?	6a		1
b	Any related organization?	6b		1
D	If "Yes" to line 6a or 6b, describe in Part III.			<u> </u>
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
•	payments not described in lines 5 and 6? If "Yes," describe in Part III	7	}	1
_			 	ٺ
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
				1
_	in Part III	8		├
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			1

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

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

Note. The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII. Section A, line 1a, applicable column (D) and (E) amounts for that individual

Note. The sum of columns (B)(I)—(III)	Tor eac	in listed individual ma	ust equal the total an	nount of Form 990, Par	rt VII, Section A, line 1	a, applicable columi	n (D) and (E) amounts	s for that individual.
(B) Breakdown of W-2 and/or 1099-MISC compensation		(B) Breakdown (of W-2 and/or 1099-M	SC compensation	(C) Retirement and	Shareton M.	Total of	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(E)(I)+(D)	(F) Compensation reported as deferred in prior Form 990
GRANT EARL	€ 5	175,910	7,800	18,238	45,102	15,391	265,233	
-	Ξ							
KENNETH WINDER	€	132,582	5,800	11,675	34,054	14,763	198,873	
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Schedule J (Form 990) 2011

4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II.										Schedule J (Form 990) 2011
scriptions required for Part I, lines 1a, 1b, 3, 4a, 4										
Part III Supplemental Information sxplanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II.	iso complete this part for any additional information.									

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

MOON LAKE ELECTRIC ASSOCIATION, INC	87-0154903
PART VI, SECTION C, LINE 19	
Audited financial statements are included in the annual report and distributed to the members at the a	nnual meeting.
PART V, LINE 3a -	
Moon Lake Electric Association, Inc did not have unrelated business gross income that exceeded \$1,0	000.00 in 2010.
PART V, LINE 14b -	
Moon Lake Electric Association, Inc does not receive any payments for indoor tanning services.	
PART VI, LINE 6,7a,7b	
LINE 6 - Moon Lake Electric Association, Inc was organized in 1938 as a rural electric cooperative by	residents of Northeastern Utah and
still operates as a member owned cooperative in Northeastern Utah and Western Colorado.	
LINE 7a - All Board of Directors are elected by the members of their district and serve three year terms	5.
LINE 7b - Members are given a chance to visit with board members at the annual meetings and prior to	o monthly meetings via our webpage
e-mail, and phone calls.	
PART VI, LINE 11b -	
Moon Lake Electric Association, Inc staff presented a copy of the Form 990 to each of the governing b	oard members on May 9, 2011 prior to
filling the form to the IRS. A motion was made to except the Form 990 as presented. The 990 form was	then mailed to the IRS.
PART VI, LINE 15 a-	
Moon Lake Electric board members evaluate the compensation of the CEO and key employees.	
LINE 15b- see above	

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization MOON LAKE ELECTRIC ASSOCIATION, INC	Employer identification number 87-0154903
PART VI, LINE 19 -	
	Assert a live (Board Bolive 400) and ODA and the d
Moon Lake Electric Association, Inc makes their governing documents, conflict of in	terest policy (Board Policy 400), and CPA audited
financial statements available upon request to the public at their annual meeting that	t was held on June 9, 2011. All members of Moon Lake
Electric Association, Inc that were in attendance were given a copy of the audited fir	nancial statements at the annual meeting held on June 7.
PART XI, LINE 5	
Patronage refund to members in the amount of \$1,000,177	
Gains refund in the amount of \$12,175	
Line 5 Total = \$1,012,352	
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