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DLN: 93493153007202

990 Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2011

Open to Public Inspection

	revenue			2011		4.4			Inspection
			lendar year, or tax year beginning 01-01 C Name of organization	-2011	and ending 12-31-20:	11	D Emplo	yer i	dentification number
	eck if a dress ch	pplicable	INLAND POWER & LIGHT CO				91-0	2672	115
_		_	Doing Business As				E Teleph		
	me cha	_					(509)	747	-7151
Init	tıal retu	rn	Number and street (or P O box if mail is not	delivered	to street address) Room/s	suite			ts \$ 59,640,679
Tei	rmınate	d	10110 W Hallett Rd				C 0.1033	СССТР	
┌ Am	ended	return	City or town, state or country, and ZIP + 4		•				
	plication	pending	Spokane, WA 992247435						
			F Name and address of principal of	ficer		H(a)	Is this a group	retu	ırn for
			Sandi McKee				affiliates?		⊤Yes √ No
			10110 W Hallett Rd Spokane, WA 99224			Ш	A!! -ff:!:-4		uded?
						1 ' '	Are all affiliates		st (see instructions)
I Ta	x-exem	pt status	「 501(c)(3)) F 4	947(a)(1) or	l l	Group exemp		
J W	ebsite	e: F www	v ınlandpower com						
K For	m of org	ganızatıon	Corporation Trust Association Other	er ►		L Yea	r of formation 19	937	M State of legal domicile
Da	rt I	Sumi	mary						WA
- С			escribe the organization's mission or mo	st sianii	icant activities				
ar.			ion and sale of electricity	J. Jigiili	.canc activities				
Governance	-								
Ē									
š	2	Check th	ıs box ► if the organization discontinu	ied its o	perations or disposed	of more t	han 25% of its	net	assets
	3 1	Number	of voting members of the governing body	(Part V	I, line 1a)			3	9
Activities &	4 1	Number	of independent voting members of the go	verning	body (Part VI, line 1b	o)		4	8
He H	5	Total nur	mber of individuals employed in calenda	year 20	011 (Part V, line 2a)			5	124
ੀ	6	Total nur	mber of volunteers (estimate if necessar	y) .				6	0
4	7a -	Total unr	elated business revenue from Part VIII	, columr	n (C), line 12			7a	0
	ь	Net unrel	ated business taxable income from Form	n 990-T	, line 34			7b	0
							Prior Year		Current Year
a.	8		outions and grants (Part VIII, line 1h)			·		0	0
Revenue	9		m service revenue (Part VIII, line 2g)		55,373,991		58,776,356		
3.6 <u>6</u>	10		ment income (Part VIII, column (A), lin		,	·	530,		522,269
_	11		revenue (Part VIII, column (A), lines 5,				303,	828	330,108
	12		evenue—add lines 8 through 11 (must e			ne	56,208,	041	59,628,733
	13		and similar amounts paid (Part IX, colu					064	48,849
	14		s paid to or for members (Part IX, colun				,	0	1,732,707
	15		es, other compensation, employee benef						
\$		5-10)					8,497,	191	8,776,029
Expenses	16a	Profess	sional fundraising fees (Part IX, column	(A), line	e 11e)			0	0
ਡੋ	b	Total fur	ndraising expenses (Part IX, column (D), line 25)	- 0					
	17		expenses (Part IX, column (A), lines 11				44,109,	-	44,973,288
	18		expenses Add lines 13–17 (must equal				52,652,	-	55,530,873
	19	Revenu	ue less expenses Subtract line 18 from	line 12			3,555,	-	4,097,860
Net Assets or Fund Balances						Begi	inning of Curre Year	nt	End of Year
e e	20	Total a	ssets (Part X, line 16)				146,286,	813	150,226,914
Age Age	21		abilities (Part X, line 26)				66,488,	-	65,816,864
žŽ	22		sets or fund balances Subtract line 21				79,798,	456	84,410,050
Pa	rt II	Signa	ature Block						
know			erjury, I declare that I have examined this r i, it is true, correct, and complete. Declarat						
		_					2012-06-01		
Sigr		Signa	ture of officer				Date		
Her	е		McKee CFO						
		Гуре	or print name and title	ı			 		
		Preparer			Date	Check If self-	Preparer (see inst		payer identification number
Paid		signature	· F			employed			·· - ,
•	arer's	Firm's na	ime (or yours				EIN Þ		
Use (Unly		and ZIP + 4				_		
		1					l Phone ne	0	

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

┌Yes ┌No

Par			ice Accomplishments ponse to any question in this P	art III	
1		the organization's mission	· · ·		,
_	ribution and sale of				
2			ant program services during th	e year which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on S	chedule O		
3	services?		make significant changes in ho		「Yes ▼ No
	If "Yes," describe	these changes on Scheo	ule O		
4	expenses Sectio	n 501(c)(3) and 501(c)(4	1) organizations and section 49	f its three largest program servic 147(a)(1) trusts are required to r for each program service reporte	eport the amount of
4a	(Code) (Expenses \$	53,798,165 including grants o	f\$)(Revenue\$	59,628,733)
	Distribution and sale	e of electricity			
	-				
4b	(Code) (Expenses \$	ıncludıng grants of	\$) (Revenue \$)
	-				
4c	(Code) (Expenses \$	ıncludıng grants of	\$) (Revenue \$)
	-				
	-				
		/D			
4d	Other program s (Expenses \$	services (Describe in Scl O inc	nedule O) cluding grants of \$	0)(Revenue \$	0)
4e		ervice expenses►\$	53,798,165	5) (November 4	~ <i>/</i>

			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	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> " <i>Yes,"</i> complete Schedule D, Part V	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		No
	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
	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		No
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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "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		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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 $\textcircled{\textbf{5}}$	21	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "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		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
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	

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

	Check it Schedule O contains a response to any question in this Part V		• 1	
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 59			
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	Yes	
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	24	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	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? <i>If "No," provide an explanation in Schedule O</i>	3b		
•	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			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	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		
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		
	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.	<u> </u>		
а	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 Instruction food and control contributions uncluded on Bart VIII. line 12			
	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 10b			
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
_	sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	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			
c	Enter the aggregate amount of reserves on hand 13c			
la	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		

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							
14	year							
b	Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?							
4								
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No				
6	Did the organization have members or stockholders?	6	Yes					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 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	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No				
Se	ection B. Policies (This Section B requests information about policies not required by the Internal							
Re	evenue Code.)							
			Yes	No				
	Did the organization have local chapters, branches, or affiliates?	10a		No				
b	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 purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give	406	V					
_	rise to conflicts?	12b	Yes					
C	In Schedule O how this was done	12c	Yes					
13	Did the organization have a written whistleblower policy?	13	Yes					
14	Did the organization have a written document retention and destruction policy?	14	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
b	Other officers or key employees of the organization	15b	Yes					
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)							
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							
17								
10	Section 6104 requires an organization to make its Form 1022 (or 1024 if applicable) 990, and 990, T (501/c)							

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

Own website Another's website V Upon request

(509)747-7151

- 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 ►
 Inland Power Light Co
 10110 W Hallett Rd
 Spokane, WA 992247435

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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) A verage hours per week (describe hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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	
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	lighest Key		MISC)	organizations			
(1) Vernon Kımble Trustee	1	х						10,023	0	0	
(2) Michelle Caird President	7	х		х				20,817	0	5,100	
(3) James Kroll Trustee	7	Х						24,952	0	0	
(4) Nate Narrance Trustee	3	х						14,598	0	5,500	
(5) Gerald Davis Treasurer	6	х		Х				21,127	0	0	
(6) Gale Rettkowski Trustee	6	х						24,777	0	0	
(7) Ken Jacobsen Trustee	3	х						19,902	0	0	
(8) Kristina Bahr Secretary	6	х		х				28,636	0	0	
(9) Dave Shill Treasurer	5	х		х				25,452	0	0	
(10) Brian Slaybaugh Trustee	5	х						21,584	0	0	
(11) Kris Mikkelsen CEO	50			х				184,182	0	120,055	
(12) Sandra McKee CFO	50			х				128,525	0	64,121	
(13) Kevin Shaw Journey Lineman	54					х		144,543	0	36,070	
(14) Thomas Duncan Journey Lineman	54					х		145,727	0	49,475	
(15) Fred Rettenmund Energy Manager	36					х		127,644	0	59,589	
(16) George Brown Operations Manager	45					х		125,822	0	59,516	
(17) John Francisco IT & Conservation Manager	45					х		119,056	0	48,213	

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

	(A) Name and Title	(B) Average hours per week (describe							cor	(D) eportable npensation from the nization (W-	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of oth compensation from the organization a	
_		hours for related organizations in Schedule O)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relati organiza	
												+		
												+		
												+		
												+		
												1		
1b	Sub-Total							<u> </u>				-		
d	Total from continuation sheets Total (add lines 1b and 1c) .					•		-		1,187,367		0		447,639
2	Total number of individuals (incl \$100,000 of reportable compen						above) who	o rece	ved more tha	an			
3	Did the organization list any for on line 1a? <i>If "Yes," complete Scl</i>					ey e		ee, c	or high	est compens	ated employee	3	Yes	No No
4	For any individual listed on line a organization and related organization and related organization.											4	Yes	
5	Did any person listed on line 1a services rendered to the organiz									_	or individual for •	5		No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio												
		(A) ne and business ad	dress							Desc	(B) ription of services		(C Comper	
	tain Power Construction									Contract Lat				
	N Pleasant View Rd Falls, ID 838544802									Contract Lat	oor			316,447
Post F Associ										Tree Reclea				650,693
Post F Associ PO Bo Hayde Tice E 5405	falls, ID 838544802 lated Arborists x 2971 en, ID 838350000 lectric North Lagoon Ave									+	rıng			
Post F Associ PO Bo Hayde Tice E 5405 Portla Qualit PO BO	alls, ID 838544802 ated Arborists x 2971 en, ID 838350000 lectric									Tree Reclea	ring oor			650,693
Post F Associ PO Bo Hayde Tice E 5405 Portla Qualit PO BO Spoka Utilx I 22820	falls, ID 838544802 lated Arborists x 2971 en, ID 838350000 lectric North Lagoon Ave nd, OR 97217 y Resources Services DX 14781 line, WA 99214									Tree Reclea Contract Lat	ring oor			650,693 493,615

Form 9								Page 9
Part \	/1111	Statement of	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
まま	1a	Federated cam	paigns 1a	0				
E E	b	Membership du	ies 1b	0				
ું. ⊞	c	Fundraising eve	ents 1c					
<u>≅</u> ,≅	d		zations 1d	0				
έĒ	e	Government grant	s (contributions) 1e	0				
atío er ∢	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	0				
들	g		ibutions included in					
Contributions, gifts, grants and other similar amounts	.	lines 1a-1f \$ _	 sla-1f	.	o			
<u> </u>	h	TOTAL Add lines	5 1 d - 1 1		, , ,			
e E	2a	Operating Revenue	•	Business Code	50 776 256	E0 776 2E6		
ever	b	- Operating Revenue	<u> </u>	221000	58,776,356	58,776,356	0	0
2 <u>2</u> 32	C							
Ž.	d							
R.	_ _ e	-						
Ē	f	All other progra	am service revenue		0	0	0	0
Program Service Revenue								
	д 3		s 2a-2f		58,776,356			
			ome (including dividen ar amounts)		481,936	0	0	481,936
	4		stment of tax-exempt bond	F	0	0	0	0
	5	Royalties		▶ ↑	0	0	0	0
			(ı) Real	(II) Personal				
	6a	Gross rents	273,918	0				
	b	Less rental expenses	11,946	0				
	c	Rental income or (loss)	261,972	0				
	d	Net rental inco	me or (loss)		261,972	0	0	261,972
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	0	40,333				
	Ь	Less cost or other basis and	0	0				
	c	sales expenses Gain or (loss)	0	40,333				
	d	Net gain or (los	_	▶	40,333	o	0	40,333
<u> </u>	8a	Gross income f events (not inc	rom fundraising luding					
Other Revenue			os reported on line 1c)					
ē	ь	less directer	penses b	0				
₹	_ c		(loss) from fundraising	events 🟲	О		0	0
	9a	Gross income f See Part IV, lin						
	ь	less director	penses b	0				
	c		(loss) from gaming acti	vities	o	0	0	0
	10a	Gross sales of returns and allo	inventory, less owances .					
	b	Less cost of a	a oods sold b	0				
	С		(loss) from sales of inv		О	0	0	0
		Miscellaneou	s Revenue	Business Code				
	11a	Notes Receival	ble Interest	900099	22,672	0	0	22,672
	Ь	Common Ditch	Income	221000	42,502	42,502	0	0
	c	Co-Gen Meter		221000	2,325	2,325	0	
	d	All other reven			637	637	0	0
	12		Saa Instructions		68,136			
	**	iocai ievenuė.	See Instructions .	• • • [59,628,733	58,821,820	0	806,913

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)

	heck if Schedule O contains a response to any question in this Part IX of include amounts reported on lines 6b,	(A)	(B)	(c)	(D)
	p, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	30,849			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	18,000			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	1,732,707			
5	Compensation of current officers, directors, trustees, and key employees	676,360			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	4,941,154			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,545,186			
9	Other employee benefits	1,142,517			
10	Payroll taxes	470,812			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	39,879			_
C	Accounting	28,340			
d	Lobbying	2,000			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	89,881			
12	Advertising and promotion	15,797			
13	Office expenses	167,000			
14	Information technology	30,774			
15	Royalties	0			
16	Occupancy	562,839			
17	Travel	1,153,146			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	144,408			
20	Interest	2,721,491			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,176,596			
23	Insurance	203,707			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Cost of Purchased Power	27,589,175			
ь	Utility Plant Operations	1,085,415			
c	Utility Plant Maintenance	2,026,181			
d	Consumer Accounts & Taxes	3,760,906			
e					
f	All other expenses	175,753			_
25	Total functional expenses. Add lines 1 through 24f	55,530,873	0	0	0
26	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	,	· ·		orm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 2.851,658 126,219 1 0 2 0 2 0 0 3 3 9.142.728 7.849.938 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 0 6 208,407 579,824 7 2.114.518 8 2.351.199 9 476,513 489.324 Prepaid expenses and deferred charges 193,331,999 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 62,052,509 b Less accumulated depreciation 128,750,295 10c 131,279,490 11 0 11 0 0 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 0 14 14 5,096,716 15 5,196,898 15 146,286,813 150,226,914 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 7,750,724 17 8,991,296 17 Accounts payable and accrued expenses . 18 18 0 19 19 0 20 20 0 0 21 21 0 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 0 22 23 Secured mortgages and notes payable to unrelated third parties . . . 54.379.847 23 52.682.982 24 Unsecured notes and loans payable to unrelated third parties 24 0 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 4,357,786 25 4,142,586 D 26 66,488,357 26 65,816,864 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 Balances through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ 🔽 and complete lines 30 through 34. ö 0 0 30 Capital stock or trust principal, or current funds 30 Assets 583.955 597.810 31 31 Paid-in or capital surplus, or land, building or equipment fund 79,214,501 83,812,240 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 79.798.456 33 84.410.050 34 Total liabilities and net assets/fund balances 146.286.813 34 150.226.914

4.	Check if Schedule O contains a response to any question in this Part XI			. [고			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		59 (628,73		
2	Total expenses (must equal Part IX, column (A), line 25)	2	55,530				
3	Revenue less expenses Subtract line 2 from line 1	3					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		79,	798,45		
5	Other changes in net assets or fund balances (explain in Schedule O)	5		į	513,73		
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, colu(B))	mn 6		84,4	410,05		
Par	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		-	୮			
				Yes	No		
1	Accounting method used to prepare the Form 990	_					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		Νo		
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 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, expl Schedule O		2c	Yes			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year won a separate basis, consolidated basis, or both	ere issued					
	▼ Separate basis						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth Single Audit Act and OMB Circular A-133?	n the	3a	Yes			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits .	he required	3b	Yes			

Additional Data

Software ID: 11000129

Software Version: v1.00

EIN: 91-0267315

Name: INLAND POWER & LIGHT CO

Form 990, Special Condition Description:

Special Condition Description

DLN: 93493153007202

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

Open to Public Inspection

2,000

f the organization answered "Yes,'	' to Form 990, Part I\	/, Line 3, or Form	990-EZ, Part V, line	46 (Political Campaign	Activities),
hen					

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

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name	of the	organization
INLAND	POWER	& LIGHT CO

Employer identification number

91-0267315

	Part I-A	Complete if the	organization is	exempt under	section 501(c)) or is a section	n 527 organization.
--	----------	-----------------	-----------------	--------------	----------------	-------------------	---------------------

- in opposition to candidates for public office in Part IV Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes Was a correction made?
 - If "Yes," describe in Part IV

exempt funtion activities

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year?
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name (1) Washington Rural Electric Cooperative Political Action	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
Committee	Olympia, WA 98507	91-1236389	2,000	0

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 Over \$1,0	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1			expenses, and share of excess lob	bying expenditures)		_	•	
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Diver \$500,000 Diver \$500,000 Diver \$500,000 but not over \$1,000,000 Diver \$1,000,000 but not over \$1,000,0	3	Check	ıf the filing organization checked bo	ox A and "limited contro	ol" provisions app	ly	1	1
(The term "expenditures" means amounts paid or incurred.) Ital Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S100,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 The lobbying nontaxable amount is: Not over \$500,000 Over \$1,000,000 Over \$1,000,00					l.)		Organization's Totals	Group Totals
b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,7000,000 Over \$1,000,000 but not over \$1,7000,000 S225,000 plus 15% of the excess over \$1,000,000 Over \$1,7000,000 Over \$1,7000,000 F17,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$1,7000,000 F17,000,000 S1,000,000 F17,000,000 F17,000,		-			1 \		100013	1 ocars
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 In the excess over \$1,000,000 F1,000,000 F1,000,0								
d O ther exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000					ying)			
Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is:			,	b)				
f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$17,000,000 but not over \$1,7000,000 Over \$17,000,000 but not over \$17,000,000 S225,000 plus 10% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 S225,000 plus 5% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 S1,000,000 S1,000,0	d	Otherexe	empt purpose expenditures					
Columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 Over \$1,500,000 S1,000,000	e	Total exe	mpt purpose expenditures (add lines 1	.c and 1d)				
Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,500,000 but not over \$1,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 S1,000,000 Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- Subtract line 1f from line 1c If zero or less, enter -0- If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount	f		nontaxable amount Enter the amount	from the following table	in both			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Section \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on lii	ne 1e			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount								
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Grassroo	ts nontaxable amount (enter 25% of li	ne 1f)				
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

	,	
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT fi	led Form 5768
	(election under section 501(h)).	

	(ciccion ander section 501(n)).	((a)		(b)	
		Yes	No	'	Amoun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		•			
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		ļ	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		ļ	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part answered "Yes".				ectio	n
1	Dues, assessments and similar amounts from members	1				

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	

4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1, Also, complete this part for any additional information

Identifier	Return Reference	Explanation
SchC_P1A_S00_L01	l '	Contribution of \$2,000 made to Washington Rural Electric Cooperative Political Action Committee

4

5

DLN: 93493153007202

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Name of the organization

Employer identification number

INLAND POWER & LIGHT CO		01 0267215
		r Funds or Accounts. Complete if th
organization answered "Yes" to Forn	n 990, Part IV, line 6. (a) Donor advised funds	(b) Funds and other accounts
L Total number at end of year	(a) Donor advised funds	(b) Funds and other accounts
2 Aggregate contributions to (during year)		
B Aggregate grants from (during year)		
Did the organization inform all donors and donor funds are the organization's property, subject to	the organization's exclusive legal control	Yes No
Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit		
Part II Conservation Easements. Compl	ete if the organization answered "Ye	s" to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by t Preservation of land for public use (e g , rec Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a	reation or pleasure)	of a certified historic structure
easement on the last day of the tax year		
		Held at the End of the Year
a Total number of conservation easements		2a
b Total acreage restricted by conservation easem		2b
c Number of conservation easements on a certifie	d historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d
Number of conservation easements modified, tra the taxable year ►	insferred, released, extinguished, or termi	nated by the organization during
Number of states where property subject to cons	servation easement is located ►	
Does the organization have a written policy rega enforcement of the conservation easements it ho	rding the periodic monitoring, inspection,	handling of violations, and Yes No
Staff and volunteer hours devoted to monitoring,	inspecting and enforcing conservation ea	sements during the year ►
 A mount of expenses incurred in monitoring, insp 		
► \$	g,	,
Does each conservation easement reported on I 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ine 2(d) above satisfy the requirements of	f section Yes No
In Part XIV, describe how the organization reporbalance sheet, and include, if applicable, the tex the organization's accounting for conservation e	t of the footnote to the organization's finar	
Organizations Maintaining Collection Complete if the organization answer	ctions of Art, Historical Treasure red "Yes" to Form 990, Part IV, line 8	es, or Other Similar Assets.
If the organization elected, as permitted under S art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to it	FAS 116, not to report in its revenue stat held for public exhibition, education or res	tement and balance sheet works of search in furtherance of public service,
b If the organization elected, as permitted under S historical treasures, or other similar assets held provide the following amounts relating to these in	l for public exhibition, education, or resear	
(i) Revenues included in Form 990, Part VIII, li	ne 1	► \$
(ii) Assets included in Form 990, Part X		▶- \$
If the organization received or held works of art, following amounts required to be reported under		
a Revenues included in Form 990, Part VIII, line:	<u>-</u>	▶ \$

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tre</u>	asures, or (<u>Othe</u>	<u>r Similar Ass</u>	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	lowing tha	at are a signific	ant u	ise of its collection	on	
а	Public exhibition		d	Γ	Loan or	exchange prog	grams	5		
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y further i	the organizatio	n's e	xempt purpose ın		
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						ed "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	for c	ontributio	ons or other as	sets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able			Amo	ount	
С	Paginning halance						1c	Allk	June	
d	Beginning balance Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990 Dart V lin	ر 11 c						Yes	□ No
	If "Yes," explain the arrangement in Part XIV	•	C Z I '					'	163	, 140
	t V Endowment Funds. Complete		n ans	Wer	od "Yes"	to Form 990) Pai	rt IV line 10		
r ea	Endowment I dids. Complete	(a)Current Year		Prior '		c)Two Years Back			(e) Four Y	ears Back
1a	Beginning of year balance	, ,	-							
b	Contributions									
c	Investment earnings or losses									
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		•			•		
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
С	Term endowment ▶									
За	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	are held a	ınd admınıstere	ed for	the		
	organization by								Yes	No
	(i) unrelated organizations			•				3a(i)		<u> </u>
	(ii) related organizations						•	3a(ii)	<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the second organization organization or the second organization of the second organization or the second organization	•						3b		<u> </u>
	t VI Land, Buildings, and Equipme									
FCI	Land, Buildings, and Equipme	int. See roini 93	о, га					(-) (
	Description of property				Cost or oth			(c) Accumulated depreciation	(d) Bo	ok value
1a	and				113,1	184 2,11	.5,231			2,228,415
b I	Buildings		•		261,2	201 13,45	1,642	1,763,556	1	1,949,287
c l	easehold improvements					0	0	0		0
d I	Equipment					0 176,15	55,011	60,288,953	11	5,866,058
	Other	<u> </u>					35,730	0		1,235,730
Tota	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colui	nn (B)), line	10(c).)				13	31,279,490
oca	. Add iiies 1a-1e (Column (a) Snoula equal FC	onn 990, Part X, COIUI	ии (В,	i, iine	10(0).)		•	Schedule D		

Part VII Investments—Other Securities. See	Form 990, Part X, line 1.	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	. ,	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13.
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
Other Liabilities	4,142,586	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	4,142,586	
2 Fin 48 (ASC 740) Footpote In Part VIV provide the toy		nization's financial statements that reports the

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	59,628,733
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	55,530,873
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,097,860
4	Net unrealized gains (losses) on investments	4	0
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	4,097,860
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	59,638,616
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 10,519		
e	Add lines 2a through 2d	2e	10,519
3	Subtract line 2e from line 1	3	59,628,097
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 0		
b	Other (Describe in Part XIV) 4b 636		
C	Add lines 4a and 4b	4c	636
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	59,628,733
<u>Par</u>	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	53,808,049
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	- +	
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	10,519
3	Subtract line 2e from line 1	3	53,797,530
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 0		
b	Other (Describe in Part XIV)]	
c	Add lines 4a and 4b	4c	1,733,343
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	55,530,873
Pa	rt XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
SchD_P12_S00_L02d		Reclass Amortization of Gain on prepayment of REA debt and expenses related to common ditch income
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Reclass Misc Non-Operating Expenses and Depreciation
SchD_P13_S00_L02d	, ,	Reclass Amortization of Gain on prepayment of REA debt and expenses related to common ditch income
SchD_P13_S00_L04b		Reclass Patronage Capital Paid to Members and Misc Non- Operating Expenses and Depreciation

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

Schedule I (Form 990)

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

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

Attach to Form 990

OMB No 1545-0047

DLN: 93493153007202

Department of the Treasury Internal Revenue Service

Name of the organization INLAND POWER & LIGHT CO **Employer identification number**

91-0267315

	mation on Grants						
 Does the organization ma the selection criteria use Describe in Part IV the o 	d to award the grants o	orassistance?		·			▽ Yes
Part II Grants and Otl Form 990, Part I	ner Assistance to V, line 21 for any r	Governments and ecipient that received o) if additional space	Organizations in dimore than \$5,000.	the United States Check this box if n	o one recipient rece	ived more than \$5,0	00. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Spokane Neighborhood Action Program2116 E First Ave Spokane, WA 99202	91-1311127	501(c)(3)	10,000	0			To assist Spokane Neighborhood Action Program in providing monetary energy assistance to households in need and continue serving the Spokane area with their programs
2 Enter total number of sec							1
3 Enter total number of other	er organizations listed	in the line 1 table				<u> ▶</u>	0

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) College Scholarships for Legal Dependents of Inland Power & Light Members	18	18,000	0		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Inland Power & Light maintains records of all donations made, whom the request was made by, and the purpose of each
		request
SchI_P02_S00_L01	Schedule I, Part II, Line 1	See statement

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DLN: 93493153007202

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ► See separate instructions.

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Name	of	the	or	ga	niz	ation	
NLAND	PO	WER	&	ŪС	ΉT	CO	

Employer identification number

91-0267315

Pa	rt I Questions Regarding Compensatio	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement orprovision of all the expenses desc			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all t					
	Compensation committee		Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		No
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pr	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of					
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	, lıne 1a,	did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

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

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

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

(A) Name	,	(B) Breakdown of	f W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) Krıs Mıkkelsen	(ı) (ıı)	184,182 0	0	0	103,802	16,253 0	304,237	
(2) Sandra McKee	(ı) (ıı)	119,525 0	9,000, 9	0	46,639	17,482 0	192,646	
(3) Thomas Duncan	(ı) (ıı)	145,727 0	0	0	33,521	15,954 0	195,202	
(4) Fred Rettenmund	(ı) (ıı)	121,644 0	6,000	0	59,147 0 0		187,233	
(5) George Brown	(ı) (ıı)	117,322 0	8,500 0	0	0 41,978 0 0	17,538 0	185,338 0 0	
(6) Kevin Shaw	(ı) (ıı)	144,543 0	0	,	15,620	20,450 0	180,613	
(7) John Francisco	(ı) (ıı)	115,556 0	3,500 0	0	27,514	20,699 0	9 167,269 0 0	
	'		<u>-</u>			-		<u></u>
							!	
	'							
	'	<u> </u>	 '	<u> </u>		 	<u>'</u>	
		 		-		<u></u>	'	
		+		 	+		<u> </u>	

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

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Transactions with Interested Persons

Schedule L (Form 990 or 990-EZ)

► 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.

2011

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Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

	of the organization POWER & LIGHT CO							E	mployer i	dent if ica	tion numb	er
									1-02673			
Part I	Excess Benefit Trar Complete if the organizat										ine 40h	
1	(a) Name of disqu			103 0111011		(b) Desc				r are v , r		(c) rected?
											Yes	No
					<u> </u>							
	ter the amount of tax impose	ed on t	he orgar			disqualified perso		_	year unde	r • ¢		
	iter the amount of tax, if any	on line	• • • • 2 . abo							· s		
Part I	Loans to and/or F Complete if the organiz) Dowt IV I.m. 26	a	~ 000	EZ Dawt V	lina 20		
	Complete if the organiz			d res on r	01111 990	, Part IV, line 26	, 01 -011	11 990-	(f)			
(a) Nar	me of interested person and		oan to om the	(c)0 rig	unal		(e) 1		Approv	/ed	(g)Writ	
(u) itai	purpose	1	zation?			(d)Balance due	defau	lt?	by boar commit		agreeme	ent?
		То	From	1			Yes	No	Yes	No	Yes	No
									+	+		1
								-				
Total .		'	'		▶ \$	<u> </u>		1				1
Part II									ı			
	Complete If the orga	nızatıd						27.				
	(a) Name of interested pers	on	(1	-		een interested per ganization	rson	(c) Ar	nount of g	rant or t	ype of assı	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 answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.							
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?			
				Yes	No		
(1) Gale Rettkowskı	Current Trustee	, ,	Gale Rettkowski is a trustee for Inland Power & Light as well as for Federated Rural Electric Insurance Exchange The amount of the transaction represents the total amount paid to Federated for Insurance policies and services during 2011 All checks were written to Federated, none were written directly to Mr Rettkowski		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
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Schedule L (Form 990 or 990-EZ) 2011

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

Open to Public Inspection

Name of the organization INLAND POWER & LIGHT CO

Employer identification number

91-0267315

ldentifier	Return Reference	Explanation
F990_P06_S0A_L06	Form 990, Part VI, Section A, Line 6	Inland Power & Light is a rural electric cooperative owned by its members. There are approximately 30,700 members and we serve 39,989 meters. There is only one class of members which have the right to elect trustees, vote on changes to the Articles of Incorporation & Bylaws, mergers, and disposal of property/assets in excess of 10% of total assets of the cooperative.
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	All active members are eligible to vote for trustees Trustees are elected for a three year term with three trustee positions open to election each year
F990_P06_S0A_L07b	Form 990, Part VI, Section A, Line 7b	Decisions of the trustees that are subject to approval by the members are changes to the Artlicles of Incorporation, Bylaws, mergers and disposals of property/assets in excess of 10% of the total assets of the cooperative
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	The Form 990 and related schedules are prepared by the General Ledger Accountant and then reviewed in detail by the CFO. The Form 990 and schedules are then sent on to the CEO for review. A copy of the final version was provided to and reviewed with the Board of Trustees before it was filed.
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	Inland Power & Light has a written Conflict of Interest policy that is distributed to all employees and trustees on an annual basis. The form distributed requests documentation for any potential conflicts of interest. The Human Resources department ensures all forms are returned. The CEO reviews all employee forms each year and the corporate attorney reviews the forms from the trustees. The appropriate people are notified of any procedural changes due to conflicts.
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	Compensation for the CEO is determined by the Board of Trustees Each year they obtain comparability data from the Human Resources department that lists the compensation level of the CEO in other electric cooperatives of similar size. This data comes from independent regional and national salary surveys. The salary level is set consistent with the surveys. The decision is documented and given to the Human Resources Manager. 15b - The CFO's compensation is set by the CEO. The CEO reviews comparability data from independent regional and national salary surveys and the salary is set consistent with the surveys.
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	Articles of Incorporation and the Conflict of Interest policy are made available to members upon request. Summary financial statements and the Bylaw's are made available to the public on Inland Pow er's wiebsite.
F990_P11_S00_L05	Form 990, Part XI, Line 5	Increase in Membership Equity of \$13,855, Increase in Other Margins and Equities through Acquired Patronage Capital, Forefeited Estate Patronage Capital, etc. of \$499,877. The change in Patronage Capital by General Retirement, Bad Debt Recoveries, Estate Payments, etc. w.as (\$1,732,707) and recorded on Part IX (Statement of Functional Expenses) Line 4(a) "Benefits Paid to or for Members"