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# Form 990

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

OMB No 1545-0047 20**11** 

Open to Public Inspection

Form 990 (2011)

Cat No 11282Y

Department of the Treasury Internal Revenue Service

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. For the 2011 calendar year, or tax year beginning 2011, and ending 20 D Employer identification number C Name of organization Lane Electric Cooperative, Inc. Check if applicable: 93-0209125 Doing Business As Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 541 484-1151 Initial return City or town, state or country, and ZIP + 4 П Terminated Eugene, OR 97402 G Gross receipts \$ 21,916,525 Amended return F Name and address of principal officer: H(a) is this a group return for affiliates? The Yes IV No. Application pending Frederick M. Crinklaw 787 Bailey Hill Rd Eugene, OR H(b) Are all affiliates included? Yes No If "No," attach a list, (see instructions) √ 501(c) ( 12 ) 
√ (Insert no ) 
√ 4947(a)(1) or 
√ 527 501(c)(3) Tax-exempt status www.laneelectric.com H(c) Group exemption number ▶ Website: ▶ Form of organization Corporation Trust Association ☐ Other ► L Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: Provide electricity to approximately 10,000 cooperative members Activities & Governance Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . . 7 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 48 0 Total number of volunteers (estimate if necessary) . . . . . . 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** Contributions and grants (Part VIII, line 1h) . . . 8 Program service revenue (Part VIII, Line 29)
Investment income (Part VIII, column (A lines 3, 4) and 7d) 20,008,489 21,690,500 9 90.516 95.166 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9p, 10c, and 11e) . . 352,516 130,859 11 Total revenue—add lines 8 through 11 (must equal Parter II, column (A), line 12) 12 20,451,521 21,916,525 Grants and similar amounts paid (Part IX, column (A) lines 1-3) . . . 13 10.272 6,496 Benefits paid to or for members (Part IX, column (A), line 4) . . . . 505,364 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 480.658 509.199 15 Professional fundraising fees (Part IX, column (A), line 1 e) . 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 19,521,085 20,671,016 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <del>20,0</del>12,015 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 21,692,075 18 Revenue less expenses. Subtract line 18 from line 12 . . 439,506 224,450 19 **Beginning of Current Year** End of Year 52,172,593 52,764,317 20 Total assets (Part X, line 16) 30,902,451 30,991,155 21 Total liabilities (Part X, line 26) . 21,270,142 21,773,162 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this feturn, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Frederick M. Crinklaw, General Manager Type or print name and title Print/Type preparer's name Preparer's signature Date Check I If Paid self-employed **Preparer** Firm's EIN ▶ Firm's name **Use Only** Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990	0 (2011)	Page 2
Part I		
	Check if Schedule O contains a response to any question in this Part III	<u>. Ц</u>
1	Briefly describe the organization's mission:	
	Provide electricity to approximately 10,000 cooperative members.	
	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No [
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	No [
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured accomplishments for each of its three largest program services, as measured accomplishments for each of its three largest program services.	ed by
	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amo	unt o
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
	(Onder ) (Function & including grants of & ) (Payonus &	
4a	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ Provided electric service to approximately 10,000 cooperative members through wholesale purchase of power, maintenance of	,
	transmission and distribution facilities as well as overall operation activities.	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	)
	•••••••••••••••••••••••••••••••••••••••	
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$	)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
40	Total program captica evanege	

Part l	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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	1	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	,	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	<del>-</del>		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5		✓
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		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<b>✓</b>
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		<b>✓</b>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	10		•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
þ	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		
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>,</u>
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	<u> </u>
	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		
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		<b>▼</b>
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		Ė

Part I	Checklist of Required Schedules (Continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<b>✓</b>	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		<b>✓</b>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		<b>√</b>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):		₹ • <u>`</u>	र स्वाप्त <sup>™</sup> ०
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>✓</b>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>✓</b>
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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		<b>✓</b>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		<b>√</b>
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		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
			000	

Form **990** (2011)

Part				
	Check if Schedule O contains a response to any question in this Part V	<u> </u>		
4-	5 to the control of t		Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
·	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		•	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 48			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	<b>✓</b>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4.		1
	account)?	4a		<b>  •</b>
b	If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Ī
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	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		<del>                                     </del>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		ļ
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	711	<del> </del>	<b> </b>
0	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	İ	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	1		
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter:	1	İ	
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			ļ
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	L	<u> </u>
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-	├	<del> </del>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
ь	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>√</b>
ь	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change:				
	Check if Schedule O contains a response to any question in this Part VI	<u>.</u>			<b>V</b>
Section	on A. Governing Body and Management				
		1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 7			
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business				
	any other officer, director, trustee, or key employee?		_2_		<b>✓</b>
3	Did the organization delegate control over management duties customarily performed by or				_
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		<b>✓</b>
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4	✓	
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		✓
6	Did the organization have members or stockholders?		6	✓	
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	<b>✓</b>	
b	Are any governance decisions of the organization reserved to (or subject to approva			1	
	stockholders, or persons other than the governing body?		7b		
8	Did the organization contemporaneously document the meetings held or written actions ur	dertaken during			
	the year by the following:				- 1
а	The governing body?		8a	✓	
b	Each committee with authority to act on behalf of the governing body?		8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be seen any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be seen as a second section of the section and the second section of the section and the second section of the section of th				_
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9	ببيا	✓_
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue C		
			<del></del>	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		<b>✓</b>
b	If "Yes," did the organization have written policies and procedures governing the activities of				
	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b	_	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	<b>✓</b>	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			_	
12a	Did the organization that a tritter of the organization property of the organization o		12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12b	<b>✓</b>	
С	Did the organization regularly and consistently monitor and enforce compliance with the	policy? If "Yes,"			
	describe in Schedule O how this was done		12c	✓	
13	Did the organization have a written whistleblower policy?		13	✓	<u> </u>
14	Did the organization have a written document retention and destruction policy?		14	ļ	✓
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			_	
а	The organization's CEO, Executive Director, or top management official		15a	✓	<u> </u>
b	Other officers or key employees of the organization		15b	✓	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim	ilar arrangement			
	with a taxable entity during the year?		16a		<b>✓</b>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps				
	organization's exempt status with respect to such arrangements?		16b		<u> </u>
	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed none			- 1/61	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	ana 990-1 (Section	1 501	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.				
	Own website Another's website  Upon request			_	4.
19	Describe in Schedule O whether (and if so, how), the organization made its governing doc	uments, conflict o	inte	rest p	olicy,
	and financial statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the b	ooks and records	of the	•	
	organization: ► Cynthia Scoble 787 Bailey Hill Rd Eugene, OR 97402 541-484-1151				

_			-
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Part VII	Compensation of Officers, Dire	ctors, Trustees, Key Employees	s, Highest Compensated Employees, and
	Independent Contractors		

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

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

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

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

Charles this have if weith an the experiention now any related experiention componented any ourself officer director, or trustee

Check this box if neither the organization	on nor any related	d orga	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	r, or trustee.
				(0	C)					
(A)	(B)	(B) Position (do not check more						(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (describe	우声	ŝul	Q	₹	a F	Former	from the	related organizations	other compensation
	hours for	al	<u></u>	Officer	y eq	p bes	∄	organization	(W-2/1099-MISC)	from the
	related organizations	Individual trustee or director	l ion	ľ	Key employee	88		(W-2/1099-MISC)		organization and related
	in Schedule	trus	5		8	퓛				organizations
	O)	8	Institutional trustee			Highest compensated employee				
			°			<u> </u>				
(4) Canaldina I Naloon										
(1) Geraldine I. Nelson President	12	1		/				13,675		
(2) Loy M Sparks	- '-	┝┷	-	١ <del>٠</del>				10,070		
Vice President	18	1	ļ	1				11,425		
(3) Patricia Dymock		- <u>`</u>				<u> </u>	┢			
Secretary	10	1		✓				12,600	1	
(4) Charles J. Leighter										
Treasurer	7	1		✓				9,700		
(5) James W. Hill					Г					
Director	5	1		1				8,800		
(6) Charles E. Bangle										
Director	8	1	L	✓				10,575	İ	
(7) Christopher B. Seubert			1				ļ			
Director	10	✓		✓				14,275		
(8) Frederick M. Crinklaw								ļ		
General Manager	46		✓	✓	<u> </u>	<u> </u>	<u> </u>	189,616		74,604
(9) Debora D. Wilson			i				l			
Manager, Office & Staff Services	48		✓	L	<u> </u>	<u> </u>	_	105,887		36,348
(10) Douglas Stockdale				1		l .	}			
Manager, Engineering	54			<u> </u>	<u> </u>	<b>✓</b>	_	116,091		45,528
(11) Anthony Toncray		1	l	l						
Manager, Operations	42					<b>✓</b>	╙	118,348		27,755
(12) Brian Mattie			1	1						
Line Foreman	45	ļ	<u> </u>	L	1_	✓		117,758		44,057
(13) James Linebaugh						Ι.				
Serviceman	47	ļ		$oxed{oxed}$	L.	<b>/</b>	$oxed{oxed}$	123,104		39,608
(14) Gary Waggener					1	١.				
Serviceman	49	<u> </u>			L	✓	<u> </u>	129,144	L	38,756

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (	continue	d)		
					((	<b>C)</b>					1			
	(A)	(B) Position				(D)	(E)			(F)				
	` Name and title	(do not check more than o						Reportable	Reportab	le		mated		
	1	hours per					าร boแ or/trust		compensation	compensation			ount of	
		week			_	_		· ·	from	related			ther	
		(describe hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	<u>a</u> gḡ	Former	the organization	organizatio (W-2/1099-N			ensatic m the	n
		related	중	둖	9	핅	og est	₫	(W-2/1099-MISC)	(**-2/1099-10	"30,		nization	1
		organizations	9 #	nal		ğ	P Sq	1	,			and	related	
		in Schedule	Į Š	2		8	ğ					organ	ization	S
		O)	#	stee			Highest compensated employee							
						L	8.	╙						
(15)														
(16)														
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(17)										ĺ				
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(23)														
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(24)			_					П						
		1						1						
(25)										1				
3		1												
1b	Sub-total		<del></del>		·			▶	980,997	<u> </u>			30	6,656
c	Total from continuation sheets to Part	VII. Sectio	n A	Ī	Ī			•				-		
ď	Total (add lines 1b and 1c)	-		•	•	•	•	•	980,997				30	6,656
2	Total number of individuals (including but							مر رہ		ore than \$1	00 000 4			-,
_	reportable compensation from the organi			1036	7 1131	lou	above	0) W	nio received ili	Ole than pr	00,000 (	,		
	reportable compensation from the organi	Zution	•										Yes	No
9	Did the exemization list any former of	ficer direc	tor c		- 10t	^^	kov i	r	alovoo or bigh	oct compo	neated		162	NO
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	hoyee, or mgi	iest compe	iisaieu			,
	• •							•				3		<b>✓</b>
4	For any individual listed on line 1a, is the													
	organization and related organizations	greater th	an \$	150,	טטנ	)7 [	r "Ye	s, "	complete Scr	neaule J to	r sucn		_	
	individual			•	•	•	•	•	· · · · ·			4	✓	
5	Did any person listed on line 1a receive of									zation or inc	dividual			ļ
	for services rendered to the organization	? If "Yes," (	comp	ete	Scl	nedi	ule J i	tor s	such person	<u></u>		5		✓
Section	on B. Independent Contractors													
1	Complete this table for your five highest	compensat	ed in	dep	end	ent	contr	act	ors that receive	ed more tha	ın \$100,0	000 of	•	
	compensation from the organization. Rep	port compe	ensatio	on f	or tl	ne c	alenc	iar y	year ending wit	h or within	the orga	nizatio	on's t	ax
	year.													
	(A)							T	(B)			(C)		
	Name and business add	tress							Description of s	ervices	C	ompens	ation	
lenso	n's Tree Service - PO Roy 500 - Clandala OF	2 97442						PC	OW Maintenance					6,014
									6,811					
C-2 Utility - PO Box 930482 - Atlanta, GA 31193 Trenching									•					
Westates Flagman Escort, Inc - 10 W. Q St, Ste F - Springfield, OR 97								Fla						6,829
Profes	ssional Underground - PO Box 2641 - Eugen	e, UK 97402						$\vdash$			·		16	8,244
	Total number of independent contracts	Sum dim a la call		.4 -		lie- '	had i	<u> </u>	non lists of the	aa\t				_
• •	TOTAL PROPERTY OF INCIDENCIANT CONTRACTO	as anchida	uri Di	n n	of ST		1/	, Tr	" KE DEIDU SD	WHI WOO I				

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

Part	VIII	Statement of Reve	enue					
•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ध ध	'1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .						
S, E	C	Fundraising events .	1c					
第三	d	Related organizations	[1d]					
S,E	е	Government grants (con						
tion S	f	All other contributions, gi						
草		and similar amounts not inc	cluded above 1f					
E S	g	Noncash contributions include						
	h	Total. Add lines 1a-1	<u>f</u>					
Program Service Revenue				Business Code				
Se	<b>2</b> a	Operating Revenue		221000	21,593,965	21,593,965		<del></del>
ě	b	Pole Rental Income		221000	96,535			96,535
ું કે	C							
8	d							
E	е	A 11 . A 1.			24 522 522	24 502 005		00.505
o g	f	All other program sen		<b>&gt;</b>	21,690,500	21,593,965		96,535
_	<u>g</u> 3	Total. Add lines 2a-2 Investment income					· · · · · · · · · · · · · · · · · · ·	
	3	and other similar amo	,		96,233			96,233
	4	Income from investmen	•		30,233			
	5	Royalties	•	· ·				<del></del>
		noyamos i i i i	(i) Real	(ii) Personal				<del></del>
	6a	Gross rents	500		l			
	b	Less: rental expenses	0					
	С	Rental income or (loss)	500					
	d	Net rental income or	(loss)	▶	500		Ī	500
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		5,409				
	b	Less: cost or other basis						
		and sales expenses .		6,476				
	С	Gain or (loss)		(1,067)				
	d	Net gain or (loss) .		▶	(1,067)			(1,067)
venue	8a	Gross income from fu	undraising					
		events (not including \$						
Other Re		of contributions reporte See Part IV, line 18 .						
Ţ.	_		_					
δ		Less: direct expenses Net income or (loss) f		events . ►			1	
		Gross income from ga		events . P				<del></del>
	"	See Part IV, line 19 .						
	ь	Less: direct expenses						
	c	Net income or (loss) f		vities ►	·			
		Gross sales of in						
		returns and allowance	es a					
	b	Less: cost of goods s	sold <b>b</b>					
	C	Net income or (loss) t	from sales of inve	entory ▶				
		Miscellaneous F	Revenue	Business Code				
	11a	Salt Creek Tunnel Rev	/enue	221000	2,596	2,596		
	ь	Patronage Dividends		221000	117,602	117,602		
	С	•••••						<del>_</del>
	d	All other revenue .		L	10,161	10,161		<del></del>
	e	Total. Add lines 11a-			130,359	<b>64 me :</b> :	_	
	12	Total revenue. See is	nstructions	<u> ▶</u>	21,916,525	21,724,324	0	192,201

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.	All other organizations must complete column (A) but are no
required to complete columns (B), (C), and (D).	

	Check if Schedule O contains a respon	se to any question	in this Part IY		🗍
<u> </u>	t'include amounts reported on lines 6b, 7b,	(A)	(B)	(c)	(D)
	, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	o			
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	6,496			
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
	,	0	<del></del> -		
4	Benefits paid to or for members	505,364			
5	Compensation of current officers, directors,				
	trustees, and key employees	487,505			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			i	
7	Other salaries and wages			<u> </u>	·
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9					<del></del>
	Other employee benefits	21,694	<u>-</u>		
10	Payroll taxes	21,694			
11	Fees for services (non-employees):				
а	Management				
Ь	Legal				
C	Accounting				
d	Lobbying				
6	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other				
12	Advertising and promotion				· · · · · · · · · · · · · · · · · · ·
13	Office expenses	-			
14	Information technology				
15			<del></del>		<del></del>
16	Royalties	_	<u> </u>		
	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		<del></del>		
19	Conferences, conventions, and meetings .				
20	Interest	1,258,784			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	1,879,745			
23	Insurance		_		
24	Other expenses, Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column			[	}
	(A) amount, list line 24e expenses on Schedule O.)			1	
8	Purchased Power Expense	8,743,854		<del>                                     </del>	<del></del>
Ь	Transmission & Distribution Expense	4,816,962			
_	Customer & Member Expense	1,604,862		<del>                                     </del>	
C				· · · · · · · · · · · · · · · · · · ·	
d	General & Administrative Expense	1,717,602			<del></del>
05	All other expenses Tax Expense	649,207	<del>_</del>	<del> </del>	
<u>25</u> _	Total functional expenses. Add lines 1 through 24e	21,692,075		<del></del> -	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and			1	
	fundraising solicitation. Check here >   if				
	following SOP 98-2 (ASC 958-720)				

Part X	Balance Sheet	(A)	Т	(D)
		(A) Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	705,294	1	780,947
2`	Savings and temporary cash investments	215,715	2	121,768
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	3,550,044	4	3,273,975
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of Schedule L		5	-
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instructions)	İ	6	
Assets	Notes and loans receivable, net		7	
Y   7	Inventories for sale or use	959,323	8	968.841
`		422,580	9	434,546
9 10a	Prepaid expenses and deferred charges	422,360	-	434,340
100	other basis. Complete Part VI of Schedule D 10a 62,394,367			
_	Less: accumulated depreciation 10b (18,389,172)	42,930,676	100	44,005,195
11 b	•	42,930,676	11	44,000,195
12	Investments—publicly traded securities	2,988,661	12	2,814,229
13	Investments—program-related. See Part IV, line 11	2,300,001	13	2,014,223
14	Intangible assets		14	<del></del>
15	Other assets. See Part IV, line 11	400,300	15	364,816
16	Total assets. Add lines 1 through 15 (must equal line 34)	52,172,593	$\overline{}$	52,764,317
17	Accounts payable and accrued expenses	4,017,596	17	4,193,670
18	Grants payable	4,017,000	18	4,100,010
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
1 -	Payables to current and former officers, directors, trustees, key		<del></del> +	
Liabilities 33	employees, highest compensated employees, and disqualified persons.  Complete Part II of Schedule L	-	22	-
<u>-</u> 5   23	Secured mortgages and notes payable to unrelated third parties	25,039,135	23	24,156,681
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X	1,845,720		2,640,804
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	30,902,451	26	30,991,155
	Organizations that follow SFAS 117, check here ▶ ☐ and complete			
ĕ	lines 27 through 29, and lines 33 and 34.		.	
ਲ   27	Unrestricted net assets		27	
쪖 28	Temporarily restricted net assets		28	
귤 29	Permanently restricted net assets		29	
Net Assets or Fund Balances 25 25 26 27 28 27 28 28 27 29 29 29 29 29 29 29 29 29 29 29 29 29	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
္ကို 30	Capital stock or trust principal, or current funds	4,344,131	30	4,576,654
<b>8</b> 31	Paid-in or capital surplus, or land, building, or equipment fund	.,	31	.,,
¥ 32	Retained earnings, endowment, accumulated income, or other funds.	16,926,011	32	17,196,508
₹ 33	Total net assets or fund balances	21,270,142	33	21,773,162
2 34	Total liabilities and net assets/fund balances	52,172,593	34	52,764,317
		,,240		Form <b>990</b> (2011)

Page 12	Page	12
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1 Accounting method used to prepare the Form 990:   If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	Part	XI Reconciliation of Net Assets					-
Total expenses (must equal Part IX, column (A), line 25)		Check if Schedule O contains a response to any question in this Part XI	<u>.</u>		<u> </u>	<u></u>	
Total expenses (must equal Part IX, column (A), line 25)							
Revenue less expenses. Subtract line 2 from line 1	1	Total revenue (must equal Part VIII, column (A), line 12)	1			21,91	6,525
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2	Total expenses (must equal Part IX, column (A), line 25)	2			21,69	2,075
The changes in net assets or fund balances (explain in Schedule O)	3	Revenue less expenses. Subtract line 2 from line 1	3			22	4,450
Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			21,27	0,142
Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other☐ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	5		5			27	8,570
Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990:  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	6						
Check if Schedule O contains a response to any question in this Part XII		column (B))	6			21,77	3,162
1 Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	Part	ullet					
Accounting method used to prepare the Form 990:		Check if Schedule O contains a response to any question in this Part XII					V
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?				_		Yes	No
Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1			_			
<ul> <li>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</li></ul>			olain ir	า			
b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		Schedule O.		l	l	ŀ	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. L	2a		✓
of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	b				2b	<b>✓</b>	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	C		_		į	1	
Schedule O.  d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		•			2c	<b>✓</b>	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:  ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			plain ir	า	- 1	1	
issued on a separate basis, consolidated basis, or both:  ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					1		
✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	d	•	ar were	∍			
3a       As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		·					
the Single Audit Act and OMB Circular A-133?				İ			
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  3b	3a						
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  3b					3a		✓
	b						
Form <b>990</b> (20		required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits				
					Form	1 <b>990</b>	(2011)

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

# **Political Campaign and Lobbying Activities**

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.

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- 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.
- 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.

	, , , ,	that have NOT filed Form 5768 (election	• • •	•	•
	,,,,	" to Form 990, Part IV, line 5 (Proxy 1			•
	ection 501(c)(4), (5), or (6) orga		ax, or round aso-	L, rait v, iiilo ooc (rioxy re	A), dien
Name	of organization	anzadona. Complete i art in.		Employer iden	tification number
Lane	Electric Cooperative, Inc				93-0209125
Part	<u> </u>	e organization is exempt unde	er section 501(c	c) or is a section 527 of	organization.
1		the organization's direct and indire			
2					4005
3					
Part	Complete if the	e organization is exempt und	er section 501(c	c)(3).	
1		excise tax incurred by the organiza			
2	Enter the amount of any	excise tax incurred by organization	n managers under	section 4955 ▶ \$	
3		ed a section 4955 tax, did it file For			Yes No
4a	<del>-</del>				Yes No
b	If "Yes," describe in Part				
Part	I-C Complete if the	e organization is exempt und	er section 501(	c), except section 501	(c)(3).
1	Enter the amount direct	ly expended by the filing organiz	ation for section	527 exempt function	
					0
2		filing organization's funds contrib			
		vities			4005
3	•	expenditures. Add lines 1 and 2			
					4005
4	Did the filing organization	n file Form 1120-POL for this year	?		🗸 Yes 🔲 No
5		ses and employer identification nur			
		ents. For each organization listed,			
		ontributions received that were pro			
	as a separate segregated	fund or a political action committee	e (PAC). If additio	nai space is needed, prov	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds if none, enter -0-	contributions received and promptly and directly
				Tanas ir rione, enter -o-	delivered to a separate
					political organization. If none, enter -0-
		17501 ibartu Street Cf	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
(1) O	R Action Committee for	1750 Liberty Street, SE	47-0861601	4,000	
	ural Electrificaton	Salem, OR 97302			
(2) W	estern Electricity	155 North 400 West, Suite 200	87-6133162	5	
	oordinating Council	Salt Lake City, UT 84103-1114			
(3)					
(4)				}	
(5)					<u> </u>
(6)					

Pa	_	۵	2

	rt II-A	Complete if the organization section 501(h)).	-			·	
A	Check ▶	if the filing organization be name, address, EIN, expe					up member's
R (	Chèck ▶	if the filing organization ch	-			•	
	<u> </u>		oying Expendit			(a) Filing	(b) Affiliated
		(The term "expenditures" m			)	organization's totals	group totals
1:	a Total k	obbying expenditures to influence	public opinion	(grass roots lobby	ring)		· ·
1	b Total le	obbying expenditures to influence	a legislative b	ody (direct lobbyin	g)		
(	c Total le	obbying expenditures (add lines 1	a and 1b) .				
(	d Other	exempt purpose expenditures .					
(	e Total e	exempt purpose expenditures (ad	d lines 1c and 1	ld)			
1	•	ing nontaxable amount. Enter	the amount f	rom the following	g table in both		
	colum	ns					
		mount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:		·
		r \$500,000		mount on line 1e.			
		00,000 but not over \$1,000,000		s 15% of the excess			
		,000,000 but not over \$1,500,000		s 10% of the excess			
		,500,000 but not over \$17,000,000		s 5% of the excess of	ver \$1,500,000.		
		7,000,000	\$1,000,000.				
	-	oots nontaxable amount (enter 2	•				· · · · · · · · · · · · · · · · · · ·
		ect line 1g from line 1a. If zero or l					
į		ct line 1f from line 1c. If zero or le e is an amount other than zero				file Form 4720	
		ing section 4911 tax for this year					Yes No
		(Some organizations that m columns below.	ade a section s See the instru	ctions for lines 2	not have to com a through 2f on p	•	
		Lobbyin	g Expenditures	During 4-Year A	veraging Period	т т	· · · · · · · · · · · · · · · · · ·
	Cale	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	( <b>c)</b> 2010	(d) 2011	(e) Total
2	a Lobby	ing nontaxable amount					
		ing ceiling amount of line 2a, column (e))					
	c Total l	obbying expenditures					
	d Grassi	roots nontaxable amount					
		roots ceiling amount of line 2d, column (e))					
	f Grassi	roots lobbying expenditures					

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	iled I	Form	5768		<del> </del>
For e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a	a)		(b)	
	lobbying activity.	Yes	No	Aı	moun	t
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?	$\blacksquare$				
į	Other activities?					
J	Total. Add 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 d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					•
Part		(5), (	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		ĺ
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OF answered "Yes."  Dues, assessments and similar amounts from members				ine 3	3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	<u>·</u>	5			
Par	Supplemental Information  lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; F	Dart II	_Δ. οι	nd Part	II_R	line
1. Als	o, complete this part for any additional information.					
Part I	A Line 1: Cash contribution to the Action Committee for Rural Electrification (ACRE) and Western Electric	ity Co	ordin	aung C	ounci	II, 
that s	upport congressional candidates who share public policy goals consistent with the mission of member ov	vned	electri	с соор	erativ	es.

Schedule C (Form	m 990 or 990-EZ) 2011	Page <b>4</b>
Part IV	m 990 or 990-EZ) 2011  Supplemental Information (continued)	
		***************************************
		·

# SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

OMB No 1545-0047

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

Open to Public Inspection

Name of the organization Employer identification number Lane Electric Cooperative, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990. Part IV. line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . 1 Aggregate contributions to (during year) . 2 Aggregate grants from (during year) . . Aggregate value at end of year . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements . . . 2a **b** Total acreage restricted by conservation easements . . . . . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIV. describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 . . . . . . . . . . Assets included in Form 990, Part X

Р	an	A	2

Part	III Organizations Maintaining									
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	rds, chec	k any of the	e follov	wing that are a si	gnifican	t use	of its
а	☐ Public exhibition				or exchang					
b	☐ Scholarly research		е	Other	r					
Ç	☐ Preservation for future generations									
4	Provide a description of the organizat XIV.	tion's collections	and expla	ain how t	hey further	the org	ganization's exem	ipt purp	ose in	Part
5	During the year, did the organization assets to be sold to raise funds rather								es 🗀	No
Part	IV Escrow and Custodial Arra	angements. Co	mplete i	f the org	anization a	answe	red "Yes" to Fo	rm 990	, Part	ĪV,
	line 9, or reported an amour	nt on Form 990,	Part X, li	ne 21.						•
1a	Is the organization an agent, trustee included on Form 990, Part X?								es 🗆	No
b	If "Yes," explain the arrangement in P	art XIV and comp	lete the fo	ollowing t	able:		T Ar	nount		
С	Beginning balance					10				
ď	Additions during the year					10				
e	Distributions during the year					16		<del></del>		
f	Ending balance					11		<del> </del>		
2a	Did the organization include an amou							□ Y	es 🗍	No
	If "Yes," explain the arrangement in P	•	<b>-</b>							
Par			zation ar	swered	"Yes" to F	orm 9	90, Part IV, line	10.		_
		(a) Current year	<b>(b)</b> Pn	or year	(c) Two year	s back	(d) Three years back	(e) Four	years t	back
1a	Beginning of year balance				·					
b	Contributions						······································			
С	Net investment earnings, gains, and losses									
d	Grants or scholarships		<b>†</b>							
e	Other expenditures for facilities and		<b>†</b>							
	programs							ļ		
f	Administrative expenses		<u> </u>							
9	End of year balance			- (1) 4 -		\\				
2	Provide the estimated percentage of	tne current year e	no balano	e (line 1g	, column (a	)) neia	as:			
a	Board designated or quasi-endowme		· <sup>%</sup> 0							
b	Permanent endowment ►  Temporarily restricted endowment ►	<sup>%</sup>								
С	The percentages in lines 2a, 2b, and 2		000/s							
39	Are there endowment funds not in th			zation th	at are held	and ad	lministered for th	Δ.		
	organization by:	o possossion on .			at are more	aa a.c			Yes	No
	(i) unrelated organizations							3a(i)	100	110
	(ii) related organizations							3a(ii)	$\vdash$	
b	If "Yes" to 3a(ii), are the related organ							3b	$\Box$	
4	Describe in Part XIV the intended use									
Part							<del></del>	-		
	Description of property	(a) Cost or o	other basis	(b) Cost	or other basis other)		Accumulated epreciation	(d) Boo	ok value	)
1a	Land	.								
b	Buildings			Ī			-	<del></del>		
Ç	Leasehold improvements							·		
d	Equipment									
е	Other <u>.</u>				62,394,367		18,389,172			
Total.	Add lines 1a through 1e. (Column (d) I	nust equal Form 9	990, Part .	X, columi	n (B), line 10	)(c).)	<b>&gt;</b>		44,005	5,195

Part VII Investments - Other Securities	See Form 990, Part X, I	ine 12.	
(a) Description of security or category (Including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financial derivatives	<u> </u>		
(2) Closely-held equity interests			
(3) Other			
(A) Investments in Associated Organizations	2,814,229	Cost	
(B)			
(C)			
(D)			··
(E)			
(F)			
(G)			
(H)	<u> </u>		
(1)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12 ) ▶	L Con Form 000 Don't V	line 10	
Part VIII Investments - Program Related			
(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u> (8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Pa	art X, line 15.		
	a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			- · · · · · · · · · · · · · · · · · · ·
(5)	<del></del>		
(6)			
_(7)			
	<del></del>		
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, c	ol (R) line 15 )		
Part X Other Liabilities. See Form 990		<u> </u>	
1. (a) Description of liability	(b) Book value	1	
(1) Federal income taxes	(5) 2001 1200	†	
(2) Deferred Power Credits	1,094,272	1	
(3) Post-Retirement Health Liability	315,296		
(4) Deferred Compensation Plan Liability	299,401		
(5) Unamortized Gain of RUS Buyout	171,319	-1	
(6) Other Deferred Credits	760,516	-1	
(7)		]	
(8)		1	
(9)			
(10)		]	
(11)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	2,640,804		<u> </u>
2. FIN 48 (ASC 740) Footnote. In Part XIV, provide		the organization's financial state	ments that reports the
organization's liability for uncertain tax positions u	ınder FIN 48 (ASC 740).		

	e D (Form 990) 2011		Page 4
Part			04.040.505
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	21,916,525
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	21,692,075
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	224,450
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	500.000
8	Other (Describe in Part XIV.)	9	506,939
9	Total adjustments (net). Add lines 4 through 8	10	506,939
10			731,389
Part	Total revenue, gains, and other support per audited financial statements	1	21,916,525
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	<del>                                     </del>	21,910,323
2	Net unrealized gains on investments		
a	Donated services and use of facilities	1	
b	Recoveries of prior year grants	1	
C	Other (Describe in Part XIV.)		
đ	Add lines 2a through 2d	2e	0
е 3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	⊢∸	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)	†	
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	21,916,525
Part			
1	Total expenses and losses per audited financial statements	1	21,185,135
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	$\vdash$	
_			
а	Donated services and use of facilities		
_	Donated services and use of facilities		
a b	Donated services and use of facilities     2a       Prior year adjustments     2b       Other losses     2c		
a b c	Donated services and use of facilities         2a           Prior year adjustments         2b           Other losses         2c           Other (Describe in Part XIV.)         2d           12,701	2e	12,701
a b c d	Donated services and use of facilities     2a       Prior year adjustments     2b       Other losses     2c	<del>1</del> _	12,701 21,172,434
a b c d	Donated services and use of facilities         2a           Prior year adjustments         2b           Other losses         2c           Other (Describe in Part XIV.)         2d         12,701           Add lines 2a through 2d	2e	<del></del>
a b c d e	Donated services and use of facilities         2a           Prior year adjustments         2b           Other losses         2c           Other (Describe in Part XIV.)         2d         12,701           Add lines 2a through 2d             Subtract line 2e from line 1	2e	<del></del>
a b c d e 3 4	Donated services and use of facilities	2e 3	<del></del>
a b c d e 3 4 a b	Donated services and use of facilities	2e 3	<del></del>
a b c d e 3 4 a b	Donated services and use of facilities         2a           Prior year adjustments         2b           Other losses         2c           Other (Describe in Part XIV.)         2d         12,701           Add lines 2a through 2d             Subtract line 2e from line 1             Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         4a           Other (Describe in Part XIV.)         4b         519,641	2e 3	21,172,434
a b c d e 3 4 a b c 5	Donated services and use of facilities         2a           Prior year adjustments         2b           Other losses         2c           Other (Describe in Part XIV.)         2d         12,701           Add lines 2a through 2d             Subtract line 2e from line 1             Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         4a           Other (Describe in Part XIV.)         4b         519,641           Add lines 4a and 4b	2e 3 4c	21,172,434 519,641
a b c d e 3 4 a b c 5	Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV.)  Other (Describe in Part XIV.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	2e 3 4c 5	21,172,434 519,641 21,692,075
a b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	2e 3 4c 5	21,172,434 519,641 21,692,075 s 1b and 2b;
a b c d e 3 4 a b c 5 Part Comp	Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIV Supplemental Information  Set to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Fart III, lines 1a and 4; Fart III, lines 3, 5, and 9; Part III, lines 1a and 4; Fart III, lines 1a and 4; Fart III, lines 3, 5, and 9; Part III, lines 1a and 4; Fart III, lines 1a and	2e 3 4c 5	21,172,434 519,641 21,692,075 s 1b and 2b;
a b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	2e 3 4c 5	21,172,434 519,641 21,692,075 s 1b and 2b;
a b c d e 3 4 a b c 5 Part Comp	Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIV Supplemental Information  lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Fd, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comdiditional information.	2e 3 4c 5	21,172,434 519,641 21,692,075 s 1b and 2b;
a b c d e 3 4 a b c 5 Part Comp Part V any ac	Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIV Supplemental Information  lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Fd, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comdiditional information.	2e 3 4c 5 Part IV, line plete this p	21,172,434 519,641 21,692,075 s 1b and 2b; part to provide
a b c d e 3 4 a b c 5 Part V	Donated services and use of facilities 2a Prior year adjustments 2b Other losses	2e 3 4c 5 Part IV, line plete this p	21,172,434 519,641 21,692,075 s 1b and 2b; part to provide
a b c d e 3 4 a b c 5 Part Comport V	Donated services and use of facilities 2a Prior year adjustments 2b Other losses	2e 3 4c 5 Part IV, line plete this p	21,172,434 519,641 21,692,075 s 1b and 2b; part to provide
a b c d e 3 4 a b c 5 Part Comp Part V any ac Part X	Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIV Supplemental Information  Sete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Figure 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comditional information.  (#8: Tax depreciation less than book (\$12,701), Amortization of RUS Gain \$14,277 and Patronage Allocates.)	2e 3 4c 5 Part IV, line plete this p	21,172,434 519,641 21,692,075 s 1b and 2b; part to provide
a b c d e 3 4 a b c 5 Part V any ac Part X Mem	Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIV.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV.)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  XIV Supplemental Information  Sete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Fig. (line 4; Part X, line 2; Part XI, line 8; Part XIII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com diditional information.  (#2: The Cooperative does not have any uncertain tax positions.	2e 3 4c 5 Part IV, line plete this p	21,172,434 519,641 21,692,075 s 1b and 2b; part to provide

Schedule D (Fo	rm 990) 2011	Page 5
Part XIV	m 990) 2011 <b>Supplemental Information</b> <i>(continued)</i>	
	•	
•	•	

# **SCHEDULE 1** (Form 990)

Department of the Treasury Internal Revenue Service

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

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Schedule I (Form 990) (2011) **ջ** □ (h) Purpose of grant or assistance **Employer Identification flumber** to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. ✓ Yes 93-0209125 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . (g) Description of non-cash assistance . . . . (e) Amount of non-cash assistance (book, FMV, appraisa), other) . Cat No 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table Part II can be duplicated if additional space is needed (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the instructions for Form 990. General Information on Grants and Assistance (b) EIN 1 (a) Name and address of organization Lane Electric Cooperative, Inc or government Name of the organization Part I Part II 9 티 8 ව € 9 9 5  $\widehat{\Xi}$ <u></u>

Schedule I (Form 990) (2011)  Part III Grants and Other Assistance to Individuals  Dart III can be diminated if additional space is	Assistance to Ind		Inited States. Com	plete if the organiza	ation answered "Yes" to	in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
(a) Type of grant or assistance	Istance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Educational Grant (Lane Community College)	nunity College)	4	0009			
2 Youth Benefit Conference		1	496			
Educational Grants are budgeted annually and awarded through an	nnually and awarded	through an interview	w process by the Board	of Directors and men	Grants are budgeted annually and awarded through an interview process by the Board of Directors and members of management. Recipients are eligible for th	interview process by the Board of Directors and members of management. Recipients are eligible for the awarded
cooperative and may or may not be re-awarded at the board's discretion.	e re-awarded at the bo	oard's discretion.			cooperative and may or may not be re-awarded at the board's discretion.	
			1			
						Schedule I (Form 990) (2011)

### **SCHEDULE J** (Form 990)

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Inspection Employer identification number

Name of the organization Lane Electric Cooperative, Inc

Part I Questions Regarding Compensation

Department of the Treasury Internal Revenue Service

93-0209125

OMB No 1545-0047

2011 Open to Public

				Yes	No
1a					
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information	* *			
		or residence for personal use			
		ess use of personal residence			
	<del></del>	dues or initiation fees		ł	
	☐ Discretionary spending account ☐ Personal services (e.	.g., maid, chauffeur, chef)	1	- 1	
			- 1		1
þ					
	or reimbursement or provision of all of the expenses described above	e? If "No," complete Part III to	- 1	l	
	explain		b		
2	Did the organization require substantiation prior to reimbursing or allowing				
	directors, trustees, and the CEO/Executive Director, regarding the items che	ecked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish				
	organization's CEO/Executive Director. Check all that apply. Do not check a				
	related organization to establish compensation of the CEO/Executive Direct	•			
	☐ Compensation committee ☐ Written employment				
	☐ Independent compensation consultant ☐ Compensation surve	• •			
	☐ Form 990 of other organizations	rd or compensation committee			
	During the vesse did any manage listed in Forms CCC Port VIII. Continue A. line 4	a wish was a star film.			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1 organization or a related organization:	a, with respect to the filing			
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	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amo	bunts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization				
•	compensation contingent on the revenues of:	ion pay or accide any			
а		ء ا	sa I	ł	
b			b b		
	If "Yes" to line 5a or 5b, describe in Part III.	· · · · · · · · · · · · · · · · · · ·			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organizat	ion pay or accrue any			
~	compensation contingent on the net earnings of:	יייי ביייי פיייי פייייי פייייי			
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_	If "Yes" to line 6a or 6b, describe in Part III.		+		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the org	ganization provide any non-fixed		ľ	
	payments not described in lines 5 and 6? If "Yes," describe in Part III		7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant		$\dashv$		
	to the initial contract exception described in Regulations section 53.				
	in Part III		8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presi	umption procedure described in	$\dashv$		
	Regulations section 53.4958-6(c)?		9		

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

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

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

Note: The sufficient of countries (b)()-(iii) for each listed interest of the sufficient of the suffin	5	(B) Breakdown o	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	and/or 1099-MISC compensation (C) Retrement and	C Nortecable	Total of columns	
<b>(A)</b> Name		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(j)(g)	(F) Compensation reported as deferred in prior Form 990
Frederick Crinklaw	(1)	173,526		16,090	56,796	17,808	264,220	
1	€						:	
Douglas Stockdale	ε	104,600		11,491	28,720	16,808	161,619	
2	(E)							
Brian Mattie	€	117,286		472	27,289	16,768	161,815	
3	(E)							
James Linebaugh	(0)	122,506		869	26,964	12,644	162,712	
4	(ii)							
Gary Waddener	(i)	128,804		340	27,121	11,635	167,900	
5	冟							
	(i)							
9	€							
	ε							
7	€							
	€							
8	(E)							
	(i)					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
9	<b>E</b>							
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Schedule J (Form 990) 2011

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(Form 990) 2011	Supplemental
Schedule J	Part III

		Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part	
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NISO COMPINED WITH DO ANY ACCURATION OF THE COORDINATION OF SET AND AND A SET AND AND A SET OF THE COOPERATIVE'S General Manager is set annually by the Board of Directors. This is discretionary based on performance to the extent it falls within the established	ange. This range is developed and reviewed every 3 (three) years based on averages and compiled from both industry surveys and information obtained from comparable utilities.	#4b: Frederick M. Crinklaw deferred compensation in the amount of \$16,000 as a participant in a Section 457 Non-qualified Deferred Compensation Plan. Earnings on that plan for 2011	were \$3.487											
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### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** Lane Electric Cooperative, Inc 93-0209125 Form 990 Part VI Section A #6 and #7a: As a cooperative, Lane Electric is owned by our member/owners who exercise their control by electing a total of 7 board members by residential district. The 7 board members are elected from four Board Districts to each serve a three-year term. Form 990 Part VI Section B #11A: The completed Form 990 is presented to the Cooperative's Board of Directors for review during the monthly board meeting prior to being filed. All disclosures and significant changes from the prior year are highlighted and discussed. Form 990 Part VI Section B #12c: Any potential conflicts of interest including its nature and effects that may exist shall be declared in advance by the individual in order individual, the President of the Board, and the Board as a whole. Monitoring and enforcement of compliance with policies as they relate to employees is the responsibility of the Cooperative's General Manager. Annually the Cooperative provides questionnaires to its members of the board, officers, key, and highly compensated employees. This provides a means to disclose and obtain detailed information regarding the individual relationships reportable personnel may have with the cooperative's affiliates giving rise to a potential conflict of interest Form 990 Part VI Section B #15b: Compensation for the Cooperative's General Manager is set annually by the Board of Directors. This is discretionary based on performance to the extent it falls within the established range. This range is developed and reviewed every 3 (three) years based on averages and compiled from both industry surveys and information obtained from comparable utilities. Each such review is consistent in its inclusion of the relevant data. Compensation for managers and key employees is conducted in the same fashion, however, the decision is made by the cooperative's General Manager. Form 990 Part 1, Line 14 (Prior Year) Amounts reported in the prior year column are presented as the 2010 Form 990 was filed. The 2010

Form 990 was prepared in accordance with the 2010 instructions.

Schedule O (Form 990 or 990-EZ) (2011)		Page 2
Name of the organization		Employer identification number
Lane Electric Cooperative, Inc		93-0209125
Form 990 Part VI Section C #19:		
The cooperative makes governing documents no	olicies, and annual financial statements available to mem	thers of the cooperative upon
The cooperative makes governing accounterts, pe		
request.		
Form 990 Part XI #5:		
Other Changes to Net Assets:		
Outer Orlanges to Net Assets.		
Tax Depreciation Less Than Book	\$ (12,701)	
		,
Amortization of RUS Buyout	14,277	
Change in Memberships	( 96)	
Patronage Retired	(228,274)	
T bill or lage the first of	(220)277	
Patronage Allocated, Benefits paid to Members	505,364	
		· <del></del>
Total Other Changes to Net Assets	\$ 278,570	
Form 990 Part VI #4:		
101111 330 1 41 74.		
The by-laws of the Cooperative may be altered, as	mended or repealed by vote of the members. The propos	sed changes are provided to the
members who vote by mail using a sealed ballot.	The Ballot Counting Committee oversees the counting of	of the votes, authenticates the
ballots, tallies the votes and presents the outcom	e at the Annual Meeting.	•••••
Form 990 Part IX #4, Benefits paid to or for Memb	ers:	
The amounts reported on Line 4 represent 2011 A	Allocation of Patronage. Members are notified in writing	of their allocation. Retirements
		a Abada washina di Dasharawa ana ini
are made at the discretion of the Board of Directo	ors. Members are notified in writing of their right to claim	Their retired Patronage in
accordance with the Cooperative's policies and b	vlaws.	
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