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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

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) Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

<u>A</u>	For the	2012 cale	endar year, or tax year beginning	January 1	, 2012, and en	ding	December		, 20 12
В	Check if	applicable	C Name of organization Rosebud E	lectric Cooperative, Inc.			D En	nployer i	dentification number
	Address	change	Doing Business As Rosebud Ele					4	6-0215360
$\overline{\Box}$	Name ch	•	Number and street (or P O box if m		ress) Room	/suite	E Tel	ephone r	
H		•						-	
님	Initial ret		P.O. Box 439	7IB code		-			<u>)5-835-9624</u>
ᆜ	Terminat	ted	City, town or post office, state, and	ZIP code					_
\sqcup	Amende		Gregory, SD 57533	<u> </u>			G Gr	oss recei	pts \$ 7609933.47
Ш	Applicati	on pending	F Name and address of principal offic	er Gary Clayton		H(a	a) is this a group	retum for a	affiliates?
			P.O. Box 439 Gregory, SD 5	7533		H(b) Are all affilia	ates inclu	ded? Ves No
1	Tax-exe	mpt status	☐ 501(c)(3)	12) ◀ (insert no) ☐ 494	7(a)(1) or 527	,	If "No," at	tach a lis	t (see instructions)
J	Website	: ► ros	ebudelectric.com			H(c) Group exen	nption nu	ımber ► N/A
\overline{K}	Form of o			ation ✓ Other ► Cooperati	ve L Year of for	mation	1945 M	State of	legal domicile SD
Р	art I	Summ	nary		-				
	1		escribe the organization's miss	sion or most significant a	ctivities: Rev	enue is c	ollected fro	m the r	nembers & other re-
			rces for the sole purpose of cov						
<u> </u>			se activities. Excess revenue ov	-					
nar				er the cost of operations	and anocations	to reserv	ve are retur	ilea to i	ilember 3 d3
ē	2	Chook th	nis box ▶☐ if the organization	discontinued its operation	ne or dienoed	d of mo	ro than 250	4 of ite	not accote
Ĝ	3		_	•	•		1	1	
⋖ŏ	i		of voting members of the gove	·	•		<u> </u>	3	9
ies	4		of independent voting membe		•	•	—	4	9
Activities & Governance	5		mber of individuals employed i	- · · · · · · · · · · · · · · · · · · ·				5	23
Act	6		mber of volunteers (estimate if	- ·			<u> </u>	6	-
	7a		related business revenue from	• •			- H	7a	
		Net unre	lated business taxable income	from Form 990-T, line 3	<u> 4</u>			7b	
Revenite VO	2						Prior Year		Current Year
0	8	Contribu	itions and grants (Part-VIII-line	THENJER					
ij.	9	Program	service revenue (Part VIII)	29E V					
eve	10	Investme	ent income (Part VIII, column (/	A), lines 3, 4, and 7d) .			3726	4.29	38715.56
Υ.	" 11	Other rev	venue (Part VIII, column (A), lin	es 5, 6d 28c 9c, 10c and	d 11e)		405070	3.26	4065644.41
۲	12	Total rev	enue-add lines 8 through 11 (must equal Part VII2 colur	mn (A), line 12)		408796		4104359.97
N	13		ınd similar amounts paid-(Part					0.00	2057.20
_	14							6.04	380645.75
			other compensation, employee		(A) lines 5-10)		166071		1627948.46
Expenses.	16a		onal fundraising fees (Part IX, o	•			100071	J. 12	1027340.40
<u>ट</u> ्र	l loa		•			-			
4	b		ndraising expenses (Part IX, co				044040		200720 50
	''		penses (Part IX, column (A), lir			-	211848		2093708.56
	18		penses. Add lines 13–17 (must		i), line 25) .		408796		4104359.97
	19	Revenue	e less expenses. Subtract line	18 from line 12	<u> </u>	4		0	0
Sor	3					Beginn	ing of Current	Year	End of Year
Net Assets or Fund Balances	20		sets (Part X, line 16)				2509987	8.34	26463408.82
ŽŽ.	21	Total liab	oilities (Part X, line 26)				1790495	3.38	19137594.97
žĒ	22		ets or fund balances. Subtract	line 21 from line 20 .			719492	4.96	7325813.85
P	art II	Signa	ture Block						
Ur	nder pena	Ities of perju	ury, I declare that I have examined this	return, including accompanying	schedules and s	tatements,	and to the be	st of my	knowledge and belief, it is
tru	ue, correc	t, and comp	olete Deelaration of preparer (other than	n officer) is based on all informa	ition of which prep	parer has a	ny knowledge		
			Jera Dillan	,		_	4	- 25	1-2013
Sig	gn	Sign	nature of officer				Date		
He	ere		LEROY LITTAU, PRESI	IDENT					
		Тур	e or print name and title		·				
_	••	Print/Ty	ype preparer's name	Preparer's signature		Date			PTIN
	aid		· · · · · · ·					neck [_] elf-emplo	
	epare	1				1			,
Us	se On			-			Firm's El		
Ma	av the 10		address ss this return with the preparer	shown above? (see instr	uctions)		Phone no		Tyes No
_						• •	· · · ·	<u>···</u>	
FOI	r Papen	vork Redi	action Act Notice, see the separa	ate instructions.	C	at No 112	82Y		Form 990 (2012)

Part I			ce Accomplishments	ın this Part III	П
1		the organization's m		in this rate in	<u> </u>
		·			
2				during the year which were not list	
		e these new service		hanne in how it conducts on	nrogram
3	services?			hanges in how it conducts, any	
	•	e these changes on		u anch of its thus lavaget musquay	m consists as massured by
4	expenses. Secti	ion 501(c)(3) and 50		or each of its three largest progranged to report the amount of grant reported.	
4a				of \$ (Revenue	
			•••••		
					•••••
4b	(Code:	\(Fynenses \$		of \$) (Revenue	·\$
45	(0000.) (Expendes 4		/ (πονοπασ	, ~ ,
			·		
	(Code:	\/Expanses \$	including grants	of \$) (Revenue	<u>, ¢</u> ,
40	(Code.) (Expenses #	including grants) (Hevenue	, Ψ)
					······································
<u></u>	Othana	andaa /Daadha	Cabadula (C)	<u> </u>	
4d	Other program (Expenses \$	services (Describe ır ıncludi	ng grants of \$) (Revenue \$	
4e		service expenses			

Part IV 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		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		√
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
4	candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		✓
	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,			<u> </u>
	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,	. 6		<u> </u>
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	10		V
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
a	complete Schedule D, Part VI	11a	✓	
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		√
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	√	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓	
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		√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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 and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a		∀
b		170	-	_
D	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		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	1.		,
. -	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	✓
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		✓
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		20b		

Part l	V Checklist of Required Schedules (continued)			
			Yes	No_
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest 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):	* 1	*	, 3.555
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	√	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
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	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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? <i>If "Yes," complete Schedule R, Part I </i>	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	√	

Part				
	Check if Schedule O contains a response to any question in this Part V	· · ·	Yes	No
_		-	res	NO
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		
	Statements, filed for the calendar year ending with or within the year covered by this return 23			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	√	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			_
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
	·	40		<u> </u>
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		
_				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		/
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		ļ
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 as charitable contributions?	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).			
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		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
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		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1/
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	 • –
g h		79 7h		 -
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	 '''		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8	-	/
9	Sponsoring organizations maintaining donor advised funds.			
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	<u> </u>	-
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	1		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		ŀ	
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		1 -
u	Note. See the instructions for additional information the organization must report on Schedule O.		† –	1 -
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
_		1		
C	Enter the amount of reserves on hand	44-	-	+,
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	├	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	1	L

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	ee ins	tructi	ons.
<u>Secti</u>	on A. Governing Body and Management		24	
4			Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
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		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6 7a	Did the organization have members or stockholders?	6	√	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7a 7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	,,,		
а	The governing body?	8a	1	
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 reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C		
40-		T40	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	√	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b	√	
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	✓	
14 15	Did the organization have a written document retention and destruction policy?	14	✓	
а	The organization's CEO, Executive Director, or top management official	15a	1	1
b	Other officers or key employees of the organization	15b		
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓
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?	401		ļ <u>-</u>
Secti	organization's exempt status with respect to such arrangements?	16b		
17	List the states with which a copy of this Form 990 is required to be filled ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sectio available for public inspection. Indicate how you made these available. Check all that apply.	n 501	c)(3)s	only
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	of inte	rest p	oolicy
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the)	

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

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

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

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

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

☐ Check this box if neither the organization nor	any related	d orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, dırector	, or trustee.
				(0	2)					
(A)	(B)	(4	_4 _L	Posi				(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
	hours per week (list any					or/trust	tee)	compensation from	compensation from related	n amount of other
	hours for	or c	Inst	Officer	چ و	Hıg	Ę	the	organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	cer	Key employee	hest	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	it al	ona		흥	မ မ		(44-2/1099-141130)		and related
	line)	ust	쿹	'	ee	l ge				organizations
) 	stee			Highest compensated employee				
					Ī	ä				
(1) LeRoy Littau	ļ									
President	2	<u> </u>	✓	_	<u> </u>		_	2114.00		
(2) William Ringstmeyer	1							1		
Vice President	2	✓	✓	L	_		ļ	2950.00		
(3) James Eastlund	ļ									
Secretary	2	✓	✓		_		<u> </u>	4540.00		
(4) Delbert Wendell										
Treasurer	2	✓	✓		_	ļ		4540.00		
(5) Boyt Young										
Director	2	✓					-	848.00		
(6) Earl Drey		,					İ			
Director	2	✓	_				-	4128.00		
(7) Robert Shaffer	ļ									
Director	2	✓		_	<u> </u>		_	3174.00		
(8) David Shipman	ļ				1					
Director	2	<u> </u>	L		<u> </u>	<u> </u>	_	2738.00		
(9) William Hartland			ł			1		1		
Director	2	✓	ļ			_	_	2950.00		
(10) Audie Larson				ŀ	ŀ		l			
Director	2	✓	<u> </u>		┡		<u> </u>	1272.00		
(11)	1									
(12)										_
(13)						_				-
(14)					-					

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (co	ntinuec	d)	
					•)							
	(A)			ot ch	Pos eck		than c	one	(D)	(E)		-	F)
	Name and title	Average hours per					is both or/trust		Reportable compensation	Reportable compensation from			nated unt of
		week (list any				r -			from	related		otl	her
		hours for related	Individual trustee or director	nstiti	Officer	Key employee	mple	Former	the organization	organizations (W-2/1099-MIS			nsation n the
		organizations	dual	tor	"	mp	e St c	_	(W-2/1099-MISC)	(11 2 1000 11110	·	organ	ızatıon
		below dotted line)	trus	nal tr		oye	omp	ļ					elated zations
			stee	Institutional trustee		ω .	Highest compensated employee					3	
				ă			ated						
(15)												-	
(16)													
110/		 									ł		
(17)													
(18)											_		
1.10/	· 	 											
(19)													
(20)	<u>.</u>							-			-		
(20)		 											
(21)													
(22)		<u> </u>						-			+		
(22)		 											
(23)													
(0.4)								<u> </u>			\perp		
(24)													
(25)													
41.	Cub Askal							L					
1b C	Sub-total	 VII Sootio	 	•	•		•		20254.00		+		
d		· · · ·		•	•	•	•		29254.00 29254.00		+		•
2	Total number of individuals (including bu							e) w) 000 c	of.	
_	reportable compensation from the organ			.000	, 110	ica	abov.	c, •·	mo received m	ore than proc	,,000 0	,	
													Yes No
3	Did the organization list any former of							emp	oloyee, or high	nest compens	sated		
	employee on line 1a? If "Yes," complete											3	✓
4	For any individual listed on line 1a, is the												
	organization and related organizations <i>individual</i>									neaule J for	sucn		
5	Did any person listed on line 1a receive of									 zation or indiv	⁄idual	4	✓
	for services rendered to the organization								-			5	1
Section	on B. Independent Contractors											<u> </u>	<u> </u>
1	Complete this table for your five highest compensation from the organization. Reyear.												
	(A)							Ţ -	(B)			(C)	-
	Name and business add	iress							Description of s	services		ompens	ation
								_					
								-					
			-					\vdash					
								\dagger					· · · · · · · · · · · · · · · · · · ·
2	Total number of independent contractor	•	_					o tl	hose listed ab	ove) who			

Part	VIII	Statement of Revenue									
		Check if Schedule O contains a response to any quest				· · · · · · · ·					
1			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514					
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) All other contributions, gifts, grants,									
Oth	_	and similar amounts not included above 11	ļ		ļ						
Sont	g h	Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f									
		Business Code									
Program Service Revenue	2a b c d										
ogra	f	All other program service revenue .									
<u>q</u>	3 3	Total. Add lines 2a–2f	38715.56			1					
	4	Income from investment of tax-exempt bond proceeds ▶	307.10.00								
	5	Royalties									
	6a	Gross rents									
	b c d	Less: rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of (i) Securities (ii) Other									
	b	assets other than inventory Less: cost or other basis and sales expenses .									
	C	Gain or (loss)		_ ~							
Other Revenue	d 8a	Gross income from fundraising events (not including \$									
er R		of contributions reported on line 1c). See Part IV, line 18									
Oth	С	Less: direct expenses b Net income or (loss) from fundraising events . ▶ Gross income from gaming activities. See Part IV, line 19 a									
	ь	Less: direct expenses b									
	С	Net income or (loss) from gaming activities ▶ Gross sales of inventory, less returns and allowances a 7368681.74									
ļ		Less: cost of goods sold b 3505573.50			J						
	c	Net income or (loss) from sales of inventory .	3863108.24								
	44	Miscellaneous Revenue Business Code			-						
		Schedule #1	94665.23		-						
		G&T Cap. Cr Other Cap. Cr.	89320.99		+						
		Sales of Resale Merchandise All other revenue	18549.95	<u> </u>							
		Total. Add lines 11a–11d	202536.17								
	12	Total revenue. See instructions ▶	4104359.97		I						

Part	IX Statement of Functional Expenses				
	n 501(c)(3) and 501(c)(4) organizations must com	nplete all columns. A	II other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon-				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
_	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	2057.20			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	380645.75 29254.00			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		-		
7	Other salaries and wages	858498.18			
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)	224503.91			
9	Other employee benefits	445314.61			
10 11	Payroll taxes	70377.76			
''a	Management				
b	Legal	11522.30			
c	Accounting	6010.20	 	_	
d	Lobbying	0010.20	- "		
е	Professional fundraising services. See Part IV, line 17	·			
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12		00400.00			
13	Advertising and promotion	20160.98 138578.10		-	
14	Information technology	138578.10			<u></u> .
15	Royalties				
16	Occupancy				<u>-</u>
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	471226.64			
21	Payments to affiliates				***
22	Depreciation, depletion, and amortization .	744316.06		<u> </u>	-
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)				
а	KWH Tax	126080.98		-	
b	Schedule #2	508114.86			
С	Dues	66517.37			
d	Engineering Fees	1181.07			
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4104359.97			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)	:			

P	art X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Par	t X		
	•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	270289.68	1	296223.01
	2	Savings and temporary cash investments	6318252.92	2	5926305.53
ıts	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	421193.48	4	417274.87
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	1	5	
	6	Loans and other 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). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use	632430.85	8	656905.56
	9	Prepaid expenses and deferred charges	59937.43	9	26314.68
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 29792361.5	.1		
	b	Less: accumulated depreciation 10b 13114805.2		10c	16677556.26
	11	Investments—publicly traded securities	14077017:70	11	10077000.20
	12	Investments—other securities. See Part IV, line 11		12	526148.88
	13	Investments—program-related. See Part IV, line 11		13	020110100
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2519956.25	15	1936680.03
	16	Total assets. Add lines 1 through 15 (must equal line 34)	25099878.34		26463408.82
	17	Accounts payable and accrued expenses	6580293.20		6644783.77
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to current and former officers, directors trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	10714415.58	 	11942668.32
	24	Unsecured notes and loans payable to unrelated third parties	10714413.30	24	11342000.32
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			EE0142 88
	26	Total liabilities. Add lines 17 through 25	17904953.38	 	550142.88 19137594.97
es		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ ar complete lines 27 through 29, and lines 33 and 34.	_		1913/394.9/
JIC.	27	Unrestricted net assets		27	
ale	28	Temporarily restricted net assets		28	
Net Assets or Fund Balances	29	Permanently restricted net assets	d	29	
S O	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .	7194924.96	32	7325813.85
ét	33	Total net assets or fund balances	7194924.96		7325813.85
_	34	Total liabilities and net assets/fund balances	25099878.34		26463408.82

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI	<u></u> .		<u>. </u>	\checkmark	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		41043	59.97	
2	Total expenses (must equal Part IX, column (A), line 25)	2				
3	Revenue less expenses. Subtract line 2 from line 1	3			0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7194924.96		
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6		_		
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O) Schedule #3	9		1308	88.89	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
Dort	33, column (B))	10		73258	13.85	
rari						
	Check if Schedule O contains a response to any question in this Part XII			Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other			res	NO	
•	If the organization changed its method of accounting from a prior year or checked "Other," ex	nlain in				
	Schedule O.	piani in				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
	If "Yes," check a box below to indicate whether the financial statements for the year were com		2a		Ť	
	reviewed on a separate basis, consolidated basis, or both:				. 1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				. 1	
b	Were the organization's financial statements audited by an independent accountant?		2b	✓		
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a				
	separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o					
	of the audit, review, or compilation of its financial statements and selection of an independent accounts		2c		✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in				
_	Schedule O.	£				
Зa	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	torth in			,	
	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		3a		✓	
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b			
	required addit of addits, explain why in senedule of and describe any steps taken to undergo such a	uuits		000	(2012)	
			Forr	1 33U	(2012)	

SCHEDULE D (Form 990)

1

2

3

4

Part II

3

6

7

tax year ▶

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Rosebud Electric Cooperative, Inc.

Total number at end of year

Aggregate contributions to (during year) .

Aggregate grants from (during year) . . .

Aggregate value at end of year

Protection of natural habitat

☐ Preservation of open space

easement on the last day of the tax year.

a Total number of conservation easements . . .

▶ 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 **Employer identification number** 46-0215360 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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

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.

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)

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 XIII, the text of the footnote to its financial statements that describes these items.

In Part XIII, 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

- 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:
- **b** Assets included in Form 990, Part X

organization's accounting for conservation easements.

Part	Organizations Maintaining	Colle	ections of A	Art, His1	orical T	reasures,	or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	acces	ssion, and oth	her recor	ds, chec	k any of the	e follov	wing that are a s	ignificant use of its
а	☐ Public exhibition			d	□ Loan	or exchang	e proa	rams	
b	☐ Scholarly research			e					
	☐ Preservation for future generations	•			0.,.0,				
4	Provide a description of the organizat		collections a	nd ovala	un how t	how further	the ere	anization's even	ent nurnose in Part
-	XIII.	.1011 5	Collections a	iliu expia	uii iiOw u	ney further	uie org	janization 5 exem	ipi puipose ili Pari
_								.,	
5	During the year, did the organization								
	assets to be sold to raise funds rather			-		_			
Part	line 9, or reported an amoun	t on	Form 990, F	Part X, li	ne 21.				
1a	Is the organization an agent, trustee, included on Form 990, Part X?								ot Ves No
b	If "Yes," explain the arrangement in Pa	art XII	II and comple	ete the fo	llowing ta	able:		Α	mount
С	Beginning balance						10	:	
d	Additions during the year						10		
e	Distributions during the year						16		
f	Ending balance						11		
	Did the organization include an amour								☐ Yes ☐ No
2a	_								
	If "Yes," explain the arrangement in Pr								
Par	Endowment Funds. Comple		Current year						k (e) Four years back
		(a)	Current year	(D) F11	or year	(c) I wo year	S Dack	(d) Three years back	(e) Four years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses					<u>.</u>			
d	Grants or scholarships			•					
е	Other expenditures for facilities and programs								
f	Administrative expenses							· · · · · · · · · · · · · · · · · · ·	
g	End of year balance					-			
2	Provide the estimated percentage of t	ho cı	irrent vear en	d balanc	o (line 1e	L column (a	// hold	Je.	
	Board designated or quasi-endowmen				e (iirie 19	, column (a	y neid	as.	
a	Permanent and aument	IL P		70					
b	Permanent endowment	······ [%]							
С	Temporarily restricted endowment ▶		%						
_	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the	e pos	session of th	ne organı	zation th	at are held	and ac	iministered for th	
	organization by:								Yes No
	(i) unrelated organizations								3a(i)
	(ii) related organizations								3a(ii)
b	If "Yes" to 3a(ii), are the related organ	ızatıo	ns listed as re	equired o	on Sched	ule R? .			3b
4	Describe in Part XIII the intended uses	of th	ne organizatio	on's endo	wment f	unds.			
Part	VI Land, Buildings, and Equip	men	t. See Form	n 990, P	art X, lin	e 10.			
	Description of property		(a) Cost or ot (investm		1 ' '	or other basis other)		Accumulated epreciation	(d) Book value
1a	Land			53632.88	1	_		a conf. Conf.	53632.88
b	Buildings			29207.94				690106.06	239101.88
c	Leasehold improvements								
d	Equipment	_	20	07208.51				1062356.49	944852.02
e	Other			02312.18				11362342.70	15439969.48
	Add lines 1a through 1e. (Column (d) n	nust e				1 (B) line 1 ()(c))		16677556.26
				, - 4, 6,	., ooiuiiii	. , 2,,	~~/-/	· · · · ·	10077330.20

Part VII Investments - Other Securities. S	See Form 990, Part X, I	ine 12.	
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	· · · · · · · · · · · · · · · · · · ·		
(2) Closely-held equity interests			
(3) Other			
(A) Rural Development Funds - Restricted Assets	238888.60	Cost	
(B) Other Special Funds	275000.00	Cost	
(C) Other Accounts Receivable	12260.28	Cost	
(D)			
(E)			
(F)			
(G) (H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments—Program Related.	526148.88 See Form 990 Part V	line 13	
(a) Description of investment type		iiile 13.	(a) Mathed of valuation
(a) Description of investment type	(b) Book value		(c) Method of valuation Cost or end-of-year market value
(1) Investments in Assoc. Organizations - Pat. Cap.	1127602.32	Cost	
(2) Investments in Capital Term Certificates - CFC	385284.00	Cost	
(3) Investment - CFC Member Capital Security	150000.00		
(4) Other Investments in Associated Organizations	75133.00		
(5) Other Investments	194167.93	Cost	
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	1932187.25		
Part IX Other Assets. See Form 990, Part			
	Description		(b) Book value
(1) Interest and Dividend Receivable			4492.78
(2)	 -		
(3)			
(3)			
(4)			
(4) (5)			
(4) (5) (6)			
(4) (5) (6) (7)			
(4) (5) (6) (7) (8) (9) (10)			
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col.			
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990, P	art X, line 25.		4492.78
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990, P 1. (a) Description of liability			
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990, P 1. (a) Description of liability (1) Federal income taxes	art X, line 25. (b) Book value		
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990, P 1. (a) Description of liability (1) Federal income taxes (2) Consumer Energy Prepayments	art X, line 25. (b) Book value 275142.88		
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990, P 1. (a) Description of liability (1) Federal income taxes (2) Consumer Energy Prepayments (3) Deferred Credits - Other Reg. Liabilities	art X, line 25. (b) Book value		
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990, P 1. (a) Description of liability (1) Federal income taxes (2) Consumer Energy Prepayments (3) Deferred Credits - Other Reg. Liabilities (4)	art X, line 25. (b) Book value 275142.88		
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990, P 1. (a) Description of liability (1) Federal income taxes (2) Consumer Energy Prepayments (3) Deferred Credits - Other Reg. Liabilities (4) (5)	art X, line 25. (b) Book value 275142.88		
(4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. Part X Other Liabilities. See Form 990, P 1. (a) Description of liability (1) Federal income taxes (2) Consumer Energy Prepayments (3) Deferred Credits - Other Reg. Liabilities (4) (5) (6)	art X, line 25. (b) Book value 275142.88		
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Page	4

Part	XI Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per	Return
1	Total revenue, gains, and other support per audited financial statements.		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	1
С	Recoveries of prior year grants	2c	1
d	Other (Describe in Part XIII.)		1
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1		5
Part			
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		•
-а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
C	Other losses		-
d	Other (Describe in Part XIII.)		-
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
			3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4.	
a	Investment expenses not included on Form 990, Part VIII, line 7b		4
b	Other (Describe in Part XIII.)	<u> </u>	
с 5	Add lines 4a and 4b		4c 5
	XIII Supplemental Information] 5
	The state of the s	0. Dort III. Imaa da amal 4. F	South N. Lingage 4 to good Obs.
	ete this part to provide the descriptions required for Part II, lines 3, 5, and		
inform	line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b	. Also complete this part to	provide any additional
Part VI	- Line 6: Members are made up of consumers who have electrical service in the	neir name and nave taken ot	it a membership.
Dani 1/1	Line 7s. Fook was when her own waterts also to Board of Directors which some	sists of wine meanbane	
Part VI	- Line 7a: Each member has one vote to elect a Board of Directors which cons	01 nine members.	
Dort VI	Line 7b. The Deard of Directors makes the desisions which are not subject to	a annearal by the members	
Pail VI	- Line 7b: The Board of Directors makes the decisions which are not subject t	o approvar by the members.	·
D 1/1	Line 11a. The Decad of Directors review the Form 000 at their constant results		
Part VI	- Line 11a: The Board of Directors review the Form 990 at their regular month	ly meeting and they approve	it at that time.
Dort \"	Line 15a. Decembed Electric managed aclemais act by the Board of Breakers	using composition data	
Part VI	- Line 15a: Rosebud Electric manager's salary is set by the Board of Directors	s using comparability data.	
Dark 1"	Line 45h. All ather relation is not bush - Dood -5 Discotors with	like alaka amal ber Men energy	-lo
Part VI	- Line 15b: All other salaries is set by the Board of Directors using comparable	iity data and by the manage	r's suggestions.
Davi 14	Line O. Difference and due to make from the control of the control		ud manhanabi
Part XI	- Line 9: Differences are due to gains from retirements to estates, general pati	ronage capital retirements a	na membersnips.

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

Department of the Treasury Internal Revenue Service Name of the organization

(9) (10) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Name o	f the organization						·	Em	ployer ide	ntificati	ion nur	nber		
Roseb	ud Electric Cooperativ	ve, Inc.								46-0	<u> 2153</u>	60	_	
Part			ns (section 501 answered "Ye							0-EZ,	Part \	V, line	40b.	
1 (a) Name of disqualified person		(b) Relationship between disqualified person and				(c) Descri	Description of transaction				(d) Corrected?			
	(a) Name of disquamed	person		organiza	tion			(0) 200011	- Company of transaction				Yes	No
(1)	-													
(2)	 -													
(3)		·				-								
(4)	-													
(5)		_												
(6)														
2	Enter the amount under section 4958		-		n manag		-	ed persons	during t	he ye 	ar ▶ \$:		
3	Enter the amount o	f tax, if any, o					izatior	ı		!	▶ \$	<u></u>		
		 												
Part	Complete if th	e organization	rested Person n answered "Ye nount on Form 9	s" on f	Form 990 art X, line	0-EZ, Part ' e 5, 6, or 2	V, line 2.	38a or Forn	n 990, Pa	art IV,	line 2	6; or i	f the	
(a) N	(a) Name of interested person (b) Relationsh with organization			1 ' '		(e) Origir principal an	1 ''		due (g) In o	default? (h) Approved by board or committee?		(i) Written agreement?		
				То	From]			Yes	No	Yes	No	Yes	No
(1)														
(2)														
(3)					<u> </u>									
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(9)					_							<u> </u>	ļ	
(10)										<u> </u>				
Total			<u> </u>				<u>. ▶</u>	\$						
Part			efiting Interest n answered "Ye			0, Part IV, I	line 27	7.						
(a)	Name of interested person		nship between inter and the organization		(c) Amount	t of assistance		d) Type of assis	stance	(e	e) Purpo	ose of a	ssistar	ice
(1)										Ì				
(2)				İ										
(3)														
(1) (2) (3) (4) (5) (6) (7) (8)														
(5)	- ····													
(6)			_											
(7)														
(8)														•

Part IV	Part IV Business Transactions Involving Interested Persons. 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) Amount of transaction	(d) Description of transaction	organiz	(e) Sharing of organization's revenues?		
					Yes	No		
(1) (2)								
(3)		-			+			
(4)								
(5)								
(6) (7)	·							
(8)								
(9)								
(10) Part V	Supplemental Information Complete this part to provide ac	dditional information for re	esponses to question	ns on Schedule L (see instruction	ns).			
Part IV - Li	ne 28a: Directors and former directo	ors purchase electrical ener	rgy from the Coopera	tive in terms identical to				
other cons	umers.							
					 -			
Part IV - Li	ne 28b: Family members of director	s and former directors pure	chase electrical energ	y from the Cooperative in				
terms iden	tical to other consumers.							
		••••						
	······································							
					 -			
						- -		

Rosebud Electric Cooperative, Inc. 46-0215360

TOTAL OTHER REVENUE

<u>Source</u>	<u>Basis</u>		<u>Amount</u>
City of Burke	Wheeling Electric Power	\$	53,619.20
Consumers	cumers Collection, Reconnect,		
	Service Charges & Back		
	Contact Fees, Etc.		
Golden West Cablevision	Pole Rentals	\$	3,577.00
Golden West Comm.	Pole Rentals	\$	581.00
Basin Electric	Substation Lease	\$	24,309.00
Gain on Disposition of Prop.		\$	3,200.00
		_	
		\$	94,665.23

Rosebud Electric Cooperative, Inc. 46-0215360

OTHER OPERATING EXPENSES

Transmission Expenses	\$ 11,751.89
Operation Expenses	\$ 33,563.88
Maintenance Expenses	\$ 245,498.24
Consumer Accounting	\$ 63,244.46
Consumer Service & Informational Expenses	\$ 31,102.70
Merchandising Expenses	\$ 22,183.99
Directors Expenses	\$ 4,193.59
Misc. General Expenses (930.2 less Payroll)	\$ 80,992.07
Maintenance of General Plant	\$ 13,194.47
Loss on Disposition of Property	\$ 2,389.57
	\$ 508,114.86

OTHER CHANGES IN NET ASSETS

Retirement of Capital Credits	\$ (286,631.28)
Memberships Issued	\$ (40.00)
Unrealized Gain or Loss on Investments	\$ 36,845.60
Retired Capital Credits - Gain	\$ 68.82
Donated Capital	\$ -
Allocation of Patronage Capital	\$ 380,645.75

\$ 130,888.89