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332001 10-29-13

Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Open to Public Inspection

Α	For th	e 2013 calendar year, or tax year beginning and	ending		
В	Check if applicab	C Name of organization	<del>-</del>	D Employer identifi	cation number
	Addre	OLD DOMINION ELECTRIC COOPERATIVE			
	Name chang	Doing Business As		] 23-7	048405
F	Initial return	Number and street (or P.0. box if mail is not delivered to street address) 4201 DOMINION BOULEVARD, SUITE 300	Room/suite	E Telephone numbe	
-	lated Amen	101			·
	return Applic tion	Uity or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ H(a) Is this a group re	866,772,887.
	pendi	F Name and address of principal officer: JACK REASOR		for subordinates	
		SAME AS C ABOVE		H(b) Are all subordinates in	
1	Tax-ex	empt status:501(c)(3)X 501(c)(12 ) ◀ (insert no.) 4947(a)(1)	or 527	If "No." attach a	list. (see instructions)
J	Websi	e: ► WWW.ODEC.COM		H(c) Group exemptio	
		organization: X Corporation	I Vear		A State of legal domicile: VA
	art I	Summary	L real	Orionnason, 1940 N	N State of legal doffficile. VII
_	1	Bnefly describe the organization's mission or most significant activities: PROV	IDE WH	OLESALE POW	ER TO
Activities & Governance		MEMBER COOPERATIVES			
Ë	2	Check this box   if the organization discontinued its operations or dispo	sed of more	than 25% of its net as	ssets.
Š		Number of voting members of the governing body (Part VI, line 1a)		3	22
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)	• •	4	22
oō ∨		Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	113
tie	1				0
≨		Total number of volunteers (estimate if necessary)		. 6	
Ac	1	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
			_	Prior Year	Current Year
ø	8	Contributions and grants (Part VIII, line 1h)		0.	0.
Ĭ	9	Program service revenue (Part VIII, line 2g)	8	42,681,157.	842,069,222.
Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)		18,940,680.	24,575,893.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		100,521.	68,075.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8	61,722,358.	866,713,190.
			— <del>-   -</del>	0.	282,498.
	ı	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	⊢	9,938,835.	9,573,120.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	·		
Expenses	1	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	ļ	14,620,966.	15,260,784.
ű	16a	Professional fundraising fees (Part IX, column (A), line 11e)	_  _	0.	0.
Š	Ь	Total fundraising expenses (Part IX, column (D), line 25)	0.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		35,385,596.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8	59,945,397.	865,887,283.
	19	Revenue less expenses. Subtract line 18 from line 12		1,776,961.	825,907.
Sec		15 NOV 8 8 Sulv.	Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		1532297435.	1524899401.
\$€	21	Total liabilities (Part X, line 26)		1171873158.	1154902003.
Net Assets o Fund Balance	22	Net assets or fund balances. Subtract line 21 from line 20	3	60,424,277.	369,997,398.
	art II	Signature Block			
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best of my	knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of wi			
		Want & Can		11/13/1	vy
Sig	n	Signature of officer		Date	<del> </del>
Her		ROBERT L. KEES, SR. VP & CFO			
		Type or print name and title			
_		Print/Type preparer's name Preparer's signature,	10	Date Check	PTIN
Paid	1	JENNIFER LYNCH	んし	111111111111111111111111111111111111111	
_	parer	Firm's name ERNST & YOUNG		1 son employe	34-6565596
				Firm's EIN ▶	34-0303330
USE	Only	Firm's address 111 MONUMENT CIRCLE, SUITE 4000		34.	7 601 7426
		INDIANAPOLIS, IN 46204		Phone no. 31	7-681-7436
May	<u>∠the li</u>	S discuss this return with the preparer shown above? (see instructions)			Yes X No

Form **990** (2013)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

	t III Statement of Program Service Accomplishments		_
_	Check if Schedule O contains a response or note to any line in this Part III		
	Briefly describe the organization's mission: PROVIDE WHOLESALE POWER TO MEMBER COOPERATIVES		
	Did the organization undertake any significant program services during the year which were not listed on		[77]
	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.		: X
	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.		X
	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other revenue, if any, for each program service reported.	• •	
	(Code) (Expenses \$	COOPERATIVE	
		<del></del>	
	(Code) (Expenses \$ including grants of \$) (Revenue	e \$	
		···	
		<del></del>	
	(Code) (Expenses \$) (Revenu	e \$	
	Other program services (Describe in Schedule O.) (Expenses \$   Including grants of \$ ) (Revenue \$	· · · · · · · · · · · · · · · · · · ·	

Form 990 (2013) OLD DOMINION
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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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	X	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	1		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	_	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			1
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			1
	Schedule D, Part III	8		X
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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.		_	_
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			İ
	Part VI	11a	X	
ь	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	X	<u> </u>
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
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	<u> X</u>	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? 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	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			7.5
46	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			7.5
••	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	
		Form	33U (	2013)

Form 990 (2013) OLD DOMINION ELECT Part IV Checklist of Required Schedules (continued)

			res	NO
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
~~	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<del> </del>
22	Did the organization report more than \$5,000 of grants or 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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
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			v
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>2</b> 3a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		
ь	disqualified person during the year? If "Yes," complete Schedule L, Part I  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
U	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	230		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
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		X
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):	I	_ [	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33	$\dashv$	
34	Part V, line 1	34	i	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	┈┤	$\frac{\mathbf{x}}{\mathbf{x}}$
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	338		<u></u>
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	x	
		Form	990 (	2013)

Form 990 (2013) OLD DOMINION ELECTRIC COOPERATIVE
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 100			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c	X	-
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 113			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	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		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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 as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	<b>6</b> b		
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		
d	If "Yes," indicate the number of Forms 8282 filed during the year		I	-
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_		
a	Did the organization make any taxable distributions under section 4966?	9a	$\dashv$	
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	$\dashv$	
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	l		
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter:			
··	Gross income from members or shareholders   11a   836271114.			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
•	amounts due or received from them.)	1	1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	
	If "Yes," enter the amount of tax-exempt interest received or accrued duning the year		1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	l		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		1	
ь	Enter the amount of reserves the organization is required to maintain by the states in which the	1		
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	<b>990</b> (	2013)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 22		1.00	
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		Ì
	officer, director, trustee, or key employee?	2		x
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		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
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		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		-	
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	-
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	_	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	Х	
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	- 1		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	Х	
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►IN, NC, AZ	_		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizat	ion: 🕨	·	
	BRYAN ROGERS - (804) 968-4035		-	
	4201 DOMINION BOULEVARD, GLEN ALLEN, VA 23060			

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

Check if Schedule O contains a response or note to any line in this Part VII

## 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.

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation from	Reportable compensation from related	Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) J. WILLIAM ANDREW, JR.	6.00									
VICE-CHAIRMAN-START 7/13	<del> </del>	X		X			_	0.	0.	0.
(2) M. DALE BRADSHAW	6.00				l					•
BOARD MEMBER	7 00	X	<u> </u>	Ш	_	<u> </u>	<u> </u>	0.	0.	0.
(3) VERNON N. BRINKLEY BOARD MEMBER-END 6/13	7.00	x						0.	0.	0.
(4) DARLENE CARPENTER	6.00		H		-		$\vdash$	•		
BOARD MEMBER	0.00	x						34,400.	0.	0.
(5) GLENN F. CHAPPELL	6.00	<del> </del>						31,1000		
BOARD MEMBER-END 5/13		x						14,100.	0.	0.
(6) EARL CURRIN	7.00		Г		_			.,		
BOARD MEMBER		х						33,200.	0.	0.
(7) E. GARRISON DRUMMOND	6.00							-		
BOARD MEMBER		X						31,400.	0.	0.
(8) JEFFREY S. EDWARDS	6.00									
BOARD MEMBER		Х						0.	0.	0.
(9) KENT D. FARMER	6.00							_	_	-
SECRETARY/TREASURER-START 7/13		X		X			_	0.	0.	0.
(10) FRED C. GARBER	6.00									_
BOARD MEMBER		X	Ш				<u> </u>	33,600.	0.	0.
(11) HUNTER R. GREENLAW, JR.	6.00							22 222	•	•
BOARD MEMBER	6.00	X	Н	Н			<u> </u>	33,200.	0.	0.
(12) BRUCE A. HENRY BOARD MEMBER	8.00	x						33,000.	0.	0
(13) DAVID J. JONES	6.00	≏	Н			$\vdash$	⊢	33,000.	0.	0.
BOARD MEMBER	0.00	x						33,400.	0.	0.
(14) MICHAEL J. KEYSER	6.00	<u> </u>	Н			┝	⊢	33,400.	•	
BOARD MEMBER	1 3.30	x						٥.	0.	0.
(15) JOHN C. LEE, JR.	6.50	ᢡ	$\vdash$	$\vdash$		-	$\vdash$		· ·	
BOARD MEMBER		x						0.	0.	0.
(16) PAUL E. OWEN	6.00	Ť				_	$\vdash$			
BOARD MEMBER		x					1	33,200.	0.	0.
(17) JAMES M. REYNOLDS	6.00									
BOARD MEMBER-END 4/13		X					L	0.	0.	0.

332007 10-29-13

Form **990** (2013)

Part VII   Section A. Officers, Director	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			(	C)			(D)	(E)		(F)	
Name and title	Average hours per week	(do not check more than one Reportable Reportable			box, unless person is both an			compensation		stimate mount other	of	
	(list any hours for related organizations below line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	f org an	npensa rom th ganızat id relat anızati	e ion ed
(18) MYRON D. RUMMEL	7.00	_							_			_
CHAIRMAN-START 7/13		X	L.	X	_		<u> </u>	0.	0.			0.
(19) KEITH L. SWISHER BOARD MEMBER	6.00	х						33,000.	0.			0.
(20) MICHAEL I. WHEATLEY	6.00											
BOARD MEMBER		X						0.	0.			0.
(21) GREGORY W. WHITE	6.00											
BOARD MEMBER		Х		X	<u> </u>	<u> </u>		0.	0.			0.
(22) CARL R. WIDDOWSON BOARD MEMBER	6.00	x						35,000.	0.			0.
(23) PAUL BROWN	6.00		H		H	H		00,000	•			
BOARD MEMBER-START 6/13		x						18,900.	0.			0.
(24) STEVE HARMON	6.00	П										
BOARD MEMBER-START 6/13		X						0.	0.			0.
(25) DODD OBENSHAIN BOARD MEMBER-START 7/13	6.00	х						0.	0.			^
(26) JACKSON E. REASOR	40.00	A	-					0.	<u></u>			0.
PRESIDENT & CEO	40.00			X				486,849.	0.	37	3,9	64.
1b Sub-total								853,249.	0.	37	3,9	64.
c Total from continuation sheets to	Part VII, Section A							1,789,806.	0.	10	968	53.
d Total (add lines 1b and 1c)							<b>•</b>	2,643,055.	0.	14	708	17.
2 Total number of individuals (including	g but not limited to th	ose	liste	d at	oove	e) wt	10 re	eceived more than \$100	,000 of reportable			
compensation from the organization	<b>•</b>											56
0.00											Yes	No
3 Did the organization list any former line 1a? If "Yes," complete Schedule		stee	e, ke	y en	nplo	yee,	orh	nignest compensated er	mpioyee on	3		x
4 For any individual listed on line 1a, is	the sum of reportab								the organization			-
and related organizations greater tha	an \$150,000? If "Yes,	" co	mple	ete S	Sche	edule	J fo	or such individual .		4	Х	
5 Did any person listed on line 1a rece	eive or accrue comper	nsati	on f	rom	any	unr	elate	ed organization or indivi	dual for services			

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
BURNS & MCDONNELL		
P.O. BOX 411883, KANSAS CITY, MO 64141-1883	ENGINEERING SERVICES	3,588,798.
A&N ELECTRIC COOPERATIVE	CONTRACTING/REPAIR	
P.O. BOX 290, TASLEY, VA 23441	SERVICES	3,463,393.
ACES POWER MARKETING	POWER MARKETING	
4140 WEST 99TH STREET, CARMEL, IN 46032	CONSULTING	1,798,387.
LECLAIR RYAN		
P.O. BOX 2499, RICHMOND, VA 21218	LEGAL SERVICES	1,579,132.
UTILITY PARTNERS OF AMERICA		
P.O. BOX 644730, PITTSBURGH, PA 15264-4730	POWER CONSULTING	1,269,735.
2 Total number of independent contractors (including but not limited to those liste \$100,000 of compensation from the organization > 21	d above) who received more than	

SEE PART VII, SECTION A CONTINUATION SHEETS

rendered to the organization? If "Yes," complete Schedule J for such person

Form **990** (2013)

OLD DOMINION ELECTRIC COOPERATIVE 23-7048405 Form 990 (2013) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1fr \$ h Total. Add lines 1a-1f Business Code OPERATING REVENUE-MEMBE 424000 810,138,719 Program Service Revenue 810,138,719 OP. REV. - NON-MEMBER 424000 31,930,503 31,930,503 f All other program service revenue 842,069,222 Total. Add lines 2a-2f Investment income (including dividends, interest, and 24,574,131 other similar amounts) 24,574,131. Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities 61,459 assets other than inventory b Less: cost or other basis 59,697 and sales expenses 1,762 c Gain or (loss) 1,762 1,762. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold .. ..

> 24,572,710. Form **990** (2013)

<3,183.>

71,244.

<3.183

68,075

866,713,190.

Business Code

900099

900099 900099

ALLOWANCES EPA

All other revenue

Total. Add lines 11a-11d

Total revenue. See instructions.

11 a

332009 10-29-13 Net income or (loss) from sales of inventory

Miscellaneous Revenue

MISC, NON-OPERATING INC

842,140,480

71,244

# Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must cor			omplete column (A).	121
	Check if Schedule O contains a respo	nse or note to any line in (A)	this Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	282,498.			_
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,	]			
	organizations, and individuals outside the	1			
	United States. See Part IV, lines 15 and 16	0 573 400			
4	Benefits paid to or for members	9,573,120.			
5	Compensation of current officers, directors,	2 245 204			
	trustees, and key employees	2,245,284.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	8,816,837.			
7	Other salanes and wages	0,010,03/.			- <u>-</u> -
8	Pension plan accruals and contributions (include	2,379,784.			
_	section 401(k) and 403(b) employer contributions)	992,486.	·		
9	Other employee benefits	826,393.	<del></del>		
10	Payroll taxes	020,333.	-		<del></del>
11	Fees for services (non-employees):				
a	Management .	1,239,172.			
0	Legal	294,000.	<del></del>		<del></del>
d	Lobbying	232,0001			<del></del>
-	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			· -	
g	Other. (If line 11g amount exceeds 10% of line 25,				
3	column (A) amount, list line 11g expenses on Sch O.)	4,371,483.			
12	Advertising and promotion	30,725.			<del></del>
13	Office expenses	1,172,636.			
14	Information technology			-	
15	Royalties				
16	Occupancy	452,342.			
17	Travel	260,835.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	423,173.			
20	Interest	53,225,455.			
21	Payments to affiliates	40 500 505			
22	Depreciation, depletion, and amortization	48,682,505.			
23	Insurance	300,793.			
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 0.) POWER COSTS	510,927,396.			
a		118,889,561.	<del></del>		<del></del>
b	PROD & MAINT - MAINTENA	43,225,519.			<del></del>
c d	PROD & MAINT - ADMIN &	17,863,254.			
e	All other expenses	39,412,032.			
25		865,887,283.		1	
<u>25</u> 26	Joint costs. Complete this line only if the organization	<del></del>			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				
		- · · · · · · · · · · · · · · · · · · ·			

<u>ra</u>	π χ	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	33,675,537.	1	27,888,683.
	2	Savings and temporary cash investments	3,650.	2	20,284,222.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	94,086,421.	4	105,700,176
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete		1	
		Part II of Schedule L		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			
S.		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ÿ	8	Inventones for sale or use	59,091,526.	8	49,246,222
	9	Prepaid expenses and deferred charges	97,823,700.	9	102,618,933
	10a	Land, buildings, and equipment: cost or other			-
		basis. Complete Part VI of Schedule D 10a 1825303245.			
	Ь	Less: accumulated depreciation 10b 859,925,896.	991,340,098.	10c	965,377,349.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	256,276,503.	12	253,783,816.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1532297435.	16	1524899401.
	17	Accounts payable and accrued expenses	121,760,991.	17	98,541,609.
	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	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Ě		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	766,128,229.	23	777,622,000.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	283,983,938.	25	278,738,394.
	26	Total liabilities. Add lines 17 through 25	1171873158.	26	1154902003.
		Organizations that follow SFAS 117 (ASC 958), check here ▶			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
Bal	28	Temporanly restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here			
P		and complete lines 30 through 34.	_		
ets	30	Capital stock or trust principal, or current funds	0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	360,424,277.	32	369,997,398.
Z	33	Total net assets or fund balances	360,424,277.	33	369,997,398.
	34	Total liabilities and net assets/fund balances .	1532297435.	34	1524899401.

Form 990 (2013)

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 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

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

Act and OMB Circular A-133?

X

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Form **990** (2013)

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

Department of the Treasury

Internal Revenue Service

**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.
 Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

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

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

Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours    Part I-B   Complete if the organization is exempt under section 501(c)(3).   Enter the amount of any excise tax incurred by the organization under section 4955   \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	<ul> <li>Section 501(c)(4), (5), or (6) organiza</li> </ul>	ations: Complete Part III.	_		
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours  1 Enter the amount of any excise tax incurred by the organization under section 501(c)(3).  1 Enter the amount of any excise tax incurred by organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did if file Form 4720 for this year? 4 Was as concenton made? 5 If "Yes," describe in Part IV.  Part I-B Complete If the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization is exempt under section 501(c), except section 501(c)(3).  2 Enter the amount of the filing organization is exempt under section 507 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. In 170-POL in 170-POL in 170-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization isted, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter 0.  VA SENATE REPUBLICANWILLIAMSBURG, VA 26-2971834 2,500. 0.  ACRE 22003 54-6134963 735. 0.  COMMONWEALTH VICTORYRICHMOND, VA 23223 54-1971319 19,250. 0.  VA SENATE DEMOCRATICE CHMOND, VA 23221 54-1198977 1,000. 0.  FRIENDS OF WALTER GLEN ALLEN, VA 23216 54-1198977 1,000. 0.  FRIENDS OF WALTER GLEN ALLEN, VA 23060 500. 0.	Name of organization			Empl	
Provide a description of the organization's direct and indirect political campaign activities in Part IV.					
Part I-B   Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization under section 4955 3 If the organization incurred a section 4955 tax, did if file Form 4720 for this year? 4a Was a correction made? 4b If Yes   Section be In Part IV.  Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount pad from the filing organization stunds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name (b) Address (c) EIN (d) Amount pad from filing organization's funds. If none, enter -0- vanishing organi	Part I-A Complete if the or	ganization is exempt unde	r section 501(c) c	or is a section 527 o	rganization.
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? b if "yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA CAUCUS 23187 26-2971834 2,500.  0.  ACRE 22203 54-6134963 735. 0.  COMMONWEALTH VICTORYRICHMOND, VA ACRE 22203 54-6134963 735. 0.  COMMONWEALTH VICTORYRICHMOND, VA 23223 54-1971319 19,250. 0.  VA SENATE DEMOCRATICP.O. BOX 842 CAUCUS RICHMOND, VA 2321 54-1198977 1,000. 0.  FRIENDS OF WALTER SLEIN ALLEN, VA 23060 54-1598360 500.  DOMINION LEADERSHIP FREDERICKSBURG,	2 Political expenditures	zation's direct and indirect political	campaign activities in	Part IV.	
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? b if "yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA CAUCUS 23187 26-2971834 2,500.  0.  ACRE 22203 54-6134963 735. 0.  COMMONWEALTH VICTORYRICHMOND, VA ACRE 22203 54-6134963 735. 0.  COMMONWEALTH VICTORYRICHMOND, VA 23223 54-1971319 19,250. 0.  VA SENATE DEMOCRATICP.O. BOX 842 CAUCUS RICHMOND, VA 2321 54-1198977 1,000. 0.  FRIENDS OF WALTER SLEIN ALLEN, VA 23060 54-1598360 500.  DOMINION LEADERSHIP FREDERICKSBURG,	Part I-R Complete if the or	ganization is exempt undo	r section 501/e)/2	<u>,                                      </u>	
2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did if file Form 4720 for this year? 4 If the organization incurred a section 4955 tax, did if file Form 4720 for this year?    Yes	<u> </u>	·	<del></del>	·	
3 If the organization incurred a section 4955 tax, did if file Form 4720 for this year?  4a Was a correction made?  Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities  2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function activities  3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political concommittee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter ·0·  If none, enter ·0·  VA SENATE REPUBLICANWILLIAMSBURG, VA  CAUCUS  ARLINGTON, VA  ACRE  22203  54-6134963  735.  0.  COMMONWEALTH VICTORYRICHMOND, VA  ACRE  22203  54-1971319  19,250.  0.  COMMONWEALTH DEMOCRATICP.O. BOX 842  CAUCUS  RICHMOND, VA 2321  54-1993360  50.  0.  FRIENDS OF WALTER  GLEN ALLEN, VA  23060  54-1598360  500.  0.  DOMINION LEADERSHIP  FREDERICKSBURG,	-				
4a Was a correction made?  b if "Yes," describe in Part IV.  Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 7, 235.  2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 7, 235.  3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization histed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter-0-  ARLINGTON, VA  CAUCUS  ARLINGTON, VA  ACRE 22203  54-6134963  735.  0.  COMMONWEALTH VICTORYRICHMOND, VA  FUND 23223  54-1971319  19,250.  0.  VA SENATE DEMOCRATICP, O. BOX 842  CAUCUS  RICHMOND, VA 2321  54-199360  500.  0.  FRIENDS OF WALTER  SLEN ALLEN, VA  2060 100 100 100 100 100 100 100 100 100				Ψ	Yes No.
Bill Yes, describe in Part IV.   Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).		511 1000 tax, ala 11 1110 1 01111 1 1 20 10	Tollo your.	••	
Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1			-		. — 100 — 110
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities  3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organizations funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0.  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA 26-2971834 2,500.  ARLINGTON, VA 23187 26-2971834 2,500.  O. ARRINGTON, VA 22203 54-6134963 735.  0. COMMONWEALTH VICTORYRICHMOND, VA 23223 54-1971319 19,250.  0. VA SENATE DEMOCRATICP.O. BOX 842 CAUCUS RICHMOND, VA 2321 54-1198977 1,000.  FRIENDS OF WALTER SLEN ALLEN, VA 23060 54-1598360 500.  DOMINION LEADERSHIP FREDERICKSBURG,		ganization is exempt unde	r section 501(c),	except section 501(	c)(3).
exempt function activities  3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  Ine 17b  5 37, 235.  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0.  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA CAUCUS  23187  26-2971834  2,500.  0.  ARLINGTON, VA 22203  54-6134963  735.  0.  COMMONWEALTH VICTORYRICHMOND, VA 23223  54-1971319  19,250.  0.  VA SENATE DEMOCRATICP.O. BOX 842  CAUCUS  RICHMOND, VA 2321  54-1198977  1,000.  0.  FRIENDS OF WALTER  SLEN ALLEN, VA 23060  500.  DOMINION LEADERSHIP  FREDERICKSBURG,	1 Enter the amount directly expende	d by the filing organization for secti	on 527 exempt function	on activities >\$	37,235.
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0.  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA CAUCUS  23187  26-2971834  2,500.  0.  ARLINGTON, VA ACRE  22203  54-6134963  735.  0.  COMMONWEALTH VICTORYRICHMOND, VA FUND  23223  54-1971319  19,250.  0.  VA SENATE DEMOCRATICP. O. BOX 842  CAUCUS  RICHMOND, VA 2321  54-1198977  1,000.  0.  FRIENDS OF WALTER  GLEN ALLEN, VA 23060  500.  DOMINION LEADERSHIP  FREDERICKSBURG,	2 Enter the amount of the filing organ	nization's funds contributed to othe	er organizations for sec	ction 527	
Inne 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0.  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization's funds. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA CAUCUS  23187  26-2971834  2,500.  0.  ARLINGTON, VA ACRE  22203  54-6134963  735.  0.  COMMONWEALTH VICTORYRICHMOND, VA FUND  23223  54-1971319  19,250.  0.  VA SENATE DEMOCRATICP.O. BOX 842  CAUCUS  RICHMOND, VA 2321  54-1198977  1,000.  0.  FRIENDS OF WALTER  GLEN ALLEN, VA STOSCH  23060  54-1598360  500.  DOMINION LEADERSHIP  FREDERICKSBURG,	exempt function activities			▶\$	
4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0.  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization in filing organization. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA CAUCUS 23187 26-2971834 2,500.  ARLINGTON, VA ACRE 22203 54-6134963 735. 0.  COMMONWEALTH VICTORYRICHMOND, VA FUND 23223 54-1971319 19,250. 0.  CAUCUS RICHMOND, VA 2321 54-1198977 1,000. 0.  FRIENDS OF WALTER GLEN ALLEN, VA STOSCH 23060 54-1598360 500. 0.  DOMINION LEADERSHIP FREDERICKSBURG,	3 Total exempt function expenditure	s. Add lines 1 and 2. Enter here and	on Form 1120-POL,		
Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filling organization made payments. For each organization listed, enter the amount paid from the filling organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filling organization's funds. If none, enter -0.  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA  CAUCUS  23187  26-2971834  2,500.  0.  ARLINGTON, VA  ACRE  22203  54-6134963  735.  0.  COMMONWEALTH VICTORYRICHMOND, VA  FUND  23223  54-1971319  19,250.  0.  VA SENATE DEMOCRATICP.O. BOX 842  CAUCUS  RICHMOND, VA 2321  54-1198977  1,000.  0.  FRIENDS OF WALTER  GLEN ALLEN, VA  STOSCH  23060  54-1598360  500.  0.  DOMINION LEADERSHIP FREDERICKSBURG,	line 17b			<b>▶</b> \$	37,235.
made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0  VA SENATE REPUBLICANWILLIAMSBURG, VA CAUCUS  23187  26-2971834  2,500.  0.  ARLINGTON, VA ACRE  22203  54-6134963  735.  0.  COMMONWEALTH VICTORYRICHMOND, VA FUND  23223  54-1971319  19,250.  0.  CAUCUS  RICHMOND, VA 2321  54-1198977  1,000.  0.  FRIENDS OF WALTER  GLEN ALLEN, VA STOSCH  23060  54-1598360  500.  0.	4 Did the filing organization file Form	1120-POL for this year?			X Yes  No
The second and promptly and directly delivered to a separate political organization. If none, enter -0.  VA SENATE REPUBLICANWILLIAMSBURG, VA CAUCUS  23187  ARLINGTON, VA ACRE  22203  COMMONWEALTH VICTORYRICHMOND, VA FUND  23223  VA SENATE DEMOCRATICP-0. BOX 842 CAUCUS  RICHMOND, VA 2321  FRIENDS OF WALTER  GLEN ALLEN, VA STOSCH  23060  FREDERICKSBURG,  filing organization. contributions received and promptly and directly delivered to a separate political organization. If none, enter -0.  0.  COMMONWEALTH VICTORYRICHMOND, VA 54-6134963  735.  0.  COMMONWEALTH VICTORYRICHMOND, VA 54-1971319  19,250.  0.  0.  CONTROLL OR  FRIENDS OF WALTER  GLEN ALLEN, VA 23060  54-1598360  500.  0.	made payments. For each organization contributions received that were page 1	ation listed, enter the amount paid fromptly and directly delivered to a s	from the filing organiza separate political organ	ition's funds. Also enter th nization, such as a separa	e amount of political
CAUCUS 23187 26-2971834 2,500. 0.  ARLINGTON, VA  ACRE 2203 54-6134963 735. 0.  COMMONWEALTH VICTORYRICHMOND, VA  FUND 23223 54-1971319 19,250. 0.  VA SENATE DEMOCRATICP.O. BOX 842  CAUCUS RICHMOND, VA 2321 54-1198977 1,000. 0.  FRIENDS OF WALTER GLEN ALLEN, VA  STOSCH 23060 54-1598360 500. 0.  DOMINION LEADERSHIP FREDERICKSBURG,	(a) Name	(b) Address	(c) EIN	filing organization's	contributions received and promptly and directly delivered to a separate political organization.
ACRE 22203 54-6134963 735. 0.  COMMONWEALTH VICTORYRICHMOND, VA FUND 23223 54-1971319 19,250. 0.  VA SENATE DEMOCRATICP.O. BOX 842 CAUCUS RICHMOND, VA 2321 54-1198977 1,000. 0.  FRIENDS OF WALTER GLEN ALLEN, VA STOSCH 23060 54-1598360 500. 0.  DOMINION LEADERSHIP FREDERICKSBURG,		23187	26-2971834	2,500.	0.
FUND 23223 54-1971319 19,250. 0.  VA SENATE DEMOCRATICP.O. BOX 842  CAUCUS RICHMOND, VA 2321 54-1198977 1,000. 0.  FRIENDS OF WALTER GLEN ALLEN, VA  STOSCH 23060 54-1598360 500. 0.  DOMINION LEADERSHIP FREDERICKSBURG,	ACRE		54-6134963	735.	0.
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CAUCUS RICHMOND, VA 2321 54-1198977 1,000. 0. FRIENDS OF WALTER GLEN ALLEN, VA STOSCH 23060 54-1598360 500. 0. DOMINION LEADERSHIP FREDERICKSBURG,		L ' .	54-1971319	19,250.	0.
FRIENDS OF WALTER GLEN ALLEN, VA STOSCH 23060 54-1598360 500. 0. DOMINION LEADERSHIP FREDERICKSBURG,					
STOSCH 23060 54-1598360 500. 0.  DOMINION LEADERSHIP FREDERICKSBURG,			54-1198977	1,000.	0.
DOMINION LEADERSHIP FREDERICKSBURG,				_ • •	
· · · · · · · · · · · · · · · · · · ·			54-1598360	500.	0.
		•	05-0524341	3,000.	0.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

LHA

SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990-EZ) 2013  Part II-A   Complete if the orgen (election under sec	anization is exe	N ELECTRIC mpt under section	COOPERATIVE on 501(c)(3) and fil	23- ed Form 5768	7048405	Page 2
A Check If the filing organization expenses, and sha	ition belongs to an aff re of excess lobbying		n Part IV each affiliated	group member's na	me, address, El	 N,
Limi	ts on Lobbying Expe	——————————————————————————————————————		(a) Filing organization's totals	(b) Affiliated totals	-
1a Total lobbying expenditures to infl b Total lobbying expenditures to infl c Total lobbying expenditures (add I d Other exempt purpose expenditure e Total exempt purpose expenditure f Lobbying nontaxable amount. Ent If the amount on line 1e, column (a) o Not over \$500,000	uence a legislative bookines 1a and 1b) es es (add lines 1c and 1c er the amount from the or (b) is:  The lob	dy (direct lobbying)	th columns.			
Over \$500,000 but not over \$1,000 Over \$1,000,000 but not over \$1,500,000 but not over \$170 Over \$17,000,000	00,000 \$175,00 ,000,000 \$225,00 \$1,000,	00 plus 15% of the exc 00 plus 10% of the exc 00 plus 5% of the exce 000.	cess over \$1,000,000.			
<ul> <li>g Grassroots nontaxable amount (er</li> <li>h Subtract line 1g from line 1a. If zer</li> <li>i Subtract line 1f from line 1c. If zer</li> <li>j If there is an amount other than ze</li> <li>reporting section 4911 tax for this</li> </ul>	o or less, enter -0- o or less, enter -0- ro on either line 1h or	ine 1, did the organiz	( ation file Form 4720		Yes [	
· · · · · · · · · · · · · · · · · · ·	ations that made a s lumns below. See th	e instructions for line	n do not have to comp es 2a through 2f on pa			
	Lobbying Exper	nditures During 4-Ye	ar Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Tota	.1
2a Lobbying nontaxable amount				<del></del>		
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount e Grassroots ceiling amount						
(150% of line 2d, column (e))						

332042 11-08-13

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2013

## Schedule C (Form 990 or 990-EZ) 2013 OLD DOMINION ELECTRIC COOPERATIVE 23-704840 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(	a)		(k	p)
of the lobbying activity.	Yes	N	o	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				<del></del>	
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of:		Ì			
a Volunteers?		l			
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?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?		L			
g Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i 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)?		<u> </u>		_	
b If "Yes," enter the amount of any tax incurred under section 4912			L		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), c	or se	ction	
<del>" - " - " - " - " - " - " - " - " - " -</del>				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		
answered "Yes."  1 Dues, assessments and similar amounts from members		[	1	<del></del>	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	al				
expenses for which the section 527(f) tax was paid).					
a Current year		[	2a		
<b>b</b> Carryover from last year			2b		
c Total			2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		. [	3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical		- 1		
expenditure next year?		. [	4		
5 Taxable amount of lobbying and political expenditures (see instructions)			5		
Part IV Supplemental Information					
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	A, Im	e 2; a	nd Part II-B	, line 1.
Also, complete this part for any additional information.  PART I-C CONTINUATION:					
HOUSE REPUBLICAN CAMPAIGN COMMITTEE					
106 CARTER ST FREDERICKSBURG, VA 22405				_	
EIN: 20-1834893 COL (D) AMOUNT: 10000. COL (E) AMO	UNT:	0.			

MASSIE FOR DELEGATE

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 OLD DOMINION ELECTRIC COOPERATIVE  Part IV   Supplemental Information (continued)	23-7048405 Page 4
P.O. BOX 29598 RICHMOND, VA 23242	
COL (D) AMOUNT: 250. COL (E) AMOUNT: 0.	100000000000000000000000000000000000000
	., .,
	·
	<del></del>

## SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

Employer identification number

Do	OLD DOMINION ELECTI		23-7048405
Pa			runds or Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line		· · · · · · · · · · · · · · · · · · ·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	<u></u>	
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year .		
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in dono	r advised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds o	can be used only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other pu	irpose conferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	anization answered "Yes" to Form	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	, , <u>L</u> , , ,,	an historically important land area
	Protection of natural habitat	· —	a certified historic structure
	Preservation of open space	- Trosorvation or	a serance motoric structure
2	Complete lines 2a through 2d if the organization held a qualifi	ed consensation contribution in the	form of a consequence accompant on the last
_	day of the tax year	led conservation contribution in the	e form of a conservation easement of the last
	day of the tax your		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic stru	icture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	, ,	
•	listed in the National Register	inter 0/17/00, and not on a matoric	2d
3	Number of conservation easements modified, transferred, rele	eased extinguished or terminated	·
•	year	eased, extinguished, or terminated	by the organization during the tax
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the pen		and of
•	violations, and enforcement of the conservation easements it	<del>-</del> •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	•	
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	-	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and ex	•• • • • • • • • • • • • • • • • • • • •
•	include, if applicable, the text of the footnote to the organization		
	conservation easements.	on a mancial statements that desc	cribes the organization's accounting for
Pai	t III Organizations Maintaining Collections of	Art. Historical Treasures.	or Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9		7,000.0
	If the organization elected, as permitted under SFAS 116 (AS		statement and balance sheet works of art
	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that describ		national to or public contribut, provided, and care valid,
h	If the organization elected, as permitted under SFAS 116 (ASI		ament and halance sheet works of ort. historical
•	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	deation, or research in full lefance	of public service, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		<b>L</b> ¢
	(iii) Assets included in Form 990, Part V		
2	If the organization received or held works of art, historical trea		paperal dain provide
_	the following amounts required to be reported under SFAS 11	•	5
а	Revenues included in Form 990, Part VIII, line 1	, ,	▶ ¢
h	Assets included in Form 990, Part Y		
	Assets included in Form 550, Part X		. • • • • • • • • • • • • • • • • • • •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013

1	Part VIII	Investments -	Other Securities.

Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	11b. See Form 990, Part X, line 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) CAPITAL TERM CERTIFICATES	141,933.	COST
(B) DECOMMISSIONING FUND	134,454,226.	END-OF-YEAR MARKET VALUE
(C) HOMESTEAD FUND - DEFERRED		
(D) COMP PLAN	172,550.	END-OF-YEAR MARKET VALUE
(E) CLOVER UNIT 1 LEASE		
(F) DEPOSIT - EQUITY	95,182,201.	COST
(G) TREASURY STRIPS - LEASE 1		
(H) & 2 DRAG	1,451,924.	COST
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	253,783,816.	
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	to Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

## Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	 
(4)	
(5)	 
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

## Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	"
(2) OTHER DEFERRED CREDITS	185,848.
(3) UNAMORT GAIN REACQUISITION -	93A
(4) 2023	584,090.
(5) DEF CR - GAIN CLOVER U1 LEAS	E 4,333,205.
(6) CLOVER LEASE OBLIGATIONS	79,226,852.
(7) OTHER REGULATORY LIABILITY -	FAS
(8) 143	39,581,200.
(9) ASSET RETIREMENT OBLIGATION	80,859,586.
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 278,738,394.

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013

Part XIII | Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12		<del></del>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
COBANK STOCK	3,205.	COST
INVESTMENT ACES - BOOKED AT COST	1,178,937.	COST
INVESTMENT NRCO	64,738.	COST
TEMPORARY INVESTMENTS-HELD TO MATURITY	20,174,149.	COST
INVESTMENT IN RHI - COMMON STOCK	954,953.	COST
INVESTMENT IN RELIABLE POWER STOCK	5,000.	COST
	*	
·		
332421 05-01-13	1	Schedule D (Form 990)

Schedule D (Form 990) OLD DOMINION :
Part XIII Supplemental Information (continued)

Part	X Other Liabilities. See Form 990, Part X, line 25.	
	(a) Description of liability	(b) Amount
DEF	ERRED ENERGY	37,192,879.
REG	LIAB - NORFOLK SOUTHERN	5,135,965.
REG	LIAB - DECOMMISSION MTM	31,219,379.
REG	LIAB - DERIVATIVES	37,192,879. 5,135,965. 31,219,379. 419,390.
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

% X Schedule I (Form 990) (2013) RECEPTION AND DEMOCRATIC Employer identification number EVENT SPONSOR AND ANNUAL 23-7048405 5 YEAR (h) Purpose of grant ANNUAL LEGISLATIVE or assistance ANNUAL DONATION ANNUAL DONATION IST PAYMENT ON Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any RETREAT CAUCUS PLEDGE Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance valuation (book, FMV, appraisal, other) (f) Method of . 。 。 。 ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of 19,250. 10,000. 20,000. 50,000. 14,000. cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table OLD DOMINION ELECTRIC COOPERATIVE (c) IRC section if applicable 501(c)(3) 501(c)(3) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table 54-1866278 -54-1866278 54-0129860 54-1971319 General Information on Grants and Assistance 20-1834893 (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization 1710 EAST FRANKLIN ST., 2ND FLOOR HALIFAX EDUCATIONAL FOUNDATION HALIFAX EDUCATIONAL FOUNDATION COMMITTEE - 106 CARTER ST. HOUSE REPUBLICAN CAMPAIGN COMMONWEALTH VICTORY FUND FREDERICKSBURG, VA 22405 or government SOUTH BOSTON, VA 24592 SOUTH BOSTON, VA 24592 420 WEST MAIN STREET Name of the organization AVERETT UNIVERSITY DANVILLE, VA 24541 RICHMOND, VA 23223 820 BRUCE STREET 320 BRUCE STREET Part Part II

23-7048405 Schedule I (Form 990) (2013) OLD DOMINION ELECTRIC COOPERATIVE

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Page 2

(a) Type of grant or assistance	(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
					·
Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	ured in Part I, lin	e 2, Part III, column	(b), and any other a	ddtional information.	

Schedule I (Form 990) (2013)

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

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

Open to Public Inspection

> Yes No

OMB No 1545-0047

Name of the organization

Department of the Treasury

Internal Revenue Service

OLD DOMINION ELECTRIC COOPERATIVE

Employer identification number 23-7048405

**Questions Regarding Compensation** Part I ta Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors. trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

> Compensation survey or study

X Approval by the board or compensation committee

4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing
	organization or a related organization:
а	Receive a severance payment or change-of-control payment?

- **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

## Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

- For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- The organization?
- Any related organization? If "Yes" to line 5a or 5b, describe in Part III.

X Compensation committee

Independent compensation consultant

Form 990 of other organizations

- 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a The organization?
- b Any related organization?
  - 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 organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III
- 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the ınıtıal contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III
- 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

8

4a

4c

5b

6a 6b X

 $\overline{\mathbf{x}}$ 

23-7048405

Page 2

OLD DOMINION ELECTRIC COOPERATIVE

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2013

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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	aldi	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	reported as deferred in prior Form 990
(1) JACKSON E, REASOR	€ :	476,87		9,975.	358,783.	15,181.	860,813.	0
(2) ROBERT L. KEES	3 8	268,174.	0	4,553.	201,969.	14,185.	488.881.	0
SR VP & CPO	<u> </u>			٠l	·I	٠.	٠l	0
(3) LISA D. JOHNSON	Ξ	195,80	0	1,181.	120,953.	8,899.	326,838.	0
VP & COO-ENI	▣	4		0.		0.	0	0
(4) ELISSA M. ECKER VP HUMAN RESOURCES	≘ ≘	183,661.	0	916.	104,024.	30,878	319,479.	0
(5) DALE R. BEAM	]ε	219,33	0	1,693.	133,012.	20,895.	374,938.	0
SR. VP POWER SUPPLY-START 11/13	<u> </u>		0	0	0	٠ı	• 1	0
(6) KENNETH F. ALEXANDER	ε	212,13	0	378.	0	0	212,514.	0
VP ENGINEERING SVCS	≘			0		0		0
(7) BRYAN S. ROGERS	(1)	178,025.	0	576.	98,877.	20,443.	297,921.	0
VP & CONTROLLER	⊞			0	1			0
(8) EDWARD D. TATUM	Ξ	172,87		1,558.	115,428.	21,257.	311,117.	0
VP RTO & REGULATORY AFFAIRS	▣			0.		0	0	0
(9) TODD T. BRICKHOUSE	Ξ	171,88	1,500.	512.	79,289.	1,440.	254,629.	0.
VP & TREASURER	▣		0	0.		0		0
(10) LYNN A. MALONEY	Ξ	173,90		1,136.	125,230.	74.	300,342.	0
VP FINANCIAL REPTG & INVESTOR REL	≘	0.	0	0	0	0.	0	0
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332112 09-13-13

Schedule J (Form 990) 2013

23-7048405

Page 3

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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 II. Also complete this part for any additional information.

4A-B: LINES PART I, EXPLANATION: KENNETH ALEXANDER RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT

OF \$180,000

IN CONNECTION WITH THE EXECUTION OF THE EMPLOYMENT AGREEMENT WITH IN 2006,

QF. MR. REASOR, WE ADOPTED THE DEFERRED COMPENSATION PLAN FOR THE PURPOSE

IN AN AMOUNT PROVIDING SUPPLEMENTAL DEFERRED COMPENSATION TO MR. REASOR

THE WITHIN THE STATUTORY MAXIMUMS PERMITTED UNDER IRC SECTION 457.

DEFERRED COMPENSATION PLAN IS RESTRICTED TO THOSE EXECUTIVE EMPLOYEES

DESIGNATED BY OUR BOARD OF DIRECTORS WHO ARE GENERALLY RESPONSIBLE FOR

ONGOING OPERATIONS, RESPONSIBLE FOR AND HAVE GENERAL SUPERVISION OVER THE

OVERALL FINANCIAL CONDITION, RESPONSIBLE FOR SETTING AND EXECUTING OVERALL

CORPORATE POLICIES AND PRACTICES, AND RESPONSIBLE FOR SUPERVISING LARGE

EMPLOYEES AND WHO ELECT TO PARTICIPATE IN THE DEFERRED NUMBERS OF

COMPENSATION PLAN BY AGREEING TO A DEFERRAL OF A PORTION OF THEIR CURRENT

MR. REASOR IS THE ONLY PARTICIPANT IN THE DEFERRED COMPENSATION. CURRENTLY,

THE PLAN IN 2013. ဥ \$15,000 CONTRIBUTION WAS MADE Ø COMPENSATION PLAN.

Schedule J (Form 990) 2013

### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.us.gov/form990 Inspection

Open to Public

OMB No 1545-0047

Name of the organization

OLD DOMINION ELECTRIC COOPERATIVE

**Employer identification number** 23-7048405

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: OLD DOMINION ELECTRIC COOPERATIVE IS A COOPERATIVE OWNED BY 11

MEMBERS. NO MEMBER OWNS MORE THAN 50%.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: A FINAL DRAFT OF THE 990 IS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW. THE 990 IS REVIEWED BY AN OFFICER OF THE ORGANIZATION BEFORE FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: THE CONFLICT OF INTEREST POLICY IS INCLUDED IN THE COMPANY'S

CODE OF ETHICS, WHICH IS SIGNED BY ALL EMPLOYEES AND BOARD MEMBERS.

GENERAL COUNSEL SERVES AS THE COMPLIANCE OFFICER TO ADMINISTER THE CODE OF

ETHICS. WHEN CONTACTED, THE COMPLIANCE OFFICER IS OBLIGATED TO RECORD ANY

REPORT ALLEGING A VIOLATION OF THE CODE AND TO TAKE EFFECTIVE STEPS TO

PERIODICALLY, AS DETERMINED AND REQUESTED BY THE INVESTIGATE SUCH REPORT.

PRESIDENT/CEO, THE COMPLIANCE OFFICER WILL SUBMIT A MEMORANDUM OUTLINING

THE COMPLAINTS HE HAS RECEIVED FOR THAT PERIOD, THE RESULTS OF ALL

INVESTIGATIONS, AND RECOMMENDATIONS FOR REMEDIAL ACTION.

FORM 990, PART VI, SECTION B, LINE 15:

**EXPLANATION: GENERAL PHILOSOPHY** 

OUR COMPENSATION PHILOSOPHY HAS FOUR OBJECTIVES:

ATTRACT AND RETAIN A QUALIFIED, DIVERSE WORKFORCE THROUGH A

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization **Employer identification number** OLD DOMINION ELECTRIC COOPERATIVE 23-7048405 COMPETITIVE COMPENSATION PROGRAM; PROVIDE EQUITABLE AND FAIR COMPENSATION; SUPPORT OUR BUSINESS STRATEGY; AND ENSURE COMPLIANCE WITH APPLICABLE LAWS AND REGULATIONS. TOTAL COMPENSATION PACKAGE WE COMPENSATE OUR CEO THROUGH THE USE OF A TOTAL COMPENSATION PACKAGE WHICH INCLUDES BASE SALARY, COMPETITIVE BENEFITS, AND THE POTENTIAL OF A BONUS. OUR CEO'S BASE SALARY IS DERIVED FROM THIRD PARTY MARKET DATA BASED UPON NATIONAL COMPENSATION SURVEYS. THE NATIONAL COMPENSATION SURVEY DATA INCLUDES DATA FROM THE LABOR MARKET FOR POSITIONS OF SIMILAR RESPONSIBILITIES. THE COMPENSATION OF OUR CEO IS REVIEWED BY THE EXECUTIVE COMMITTEE OF OUR BOARD OF DIRECTORS AND THEY PROVIDE A RECOMMENDATION TO OUR ENTIRE BOARD OF DIRECTORS. THE ENTIRE BOARD OF DIRECTORS APPROVES OUR CEO'S COMPENSATION. WE COMPENSATE OUR OTHER SENIOR MANAGEMENT THROUGH THE USE OF A TOTAL COMPENSATION PACKAGE WHICH INCLUDES BASE SALARY, COMPETITIVE BENEFITS, AND THE POTENTIAL OF A BONUS. THEIR ANNUAL SALARY IS ALSO DERIVED FROM THIRD PARTY MARKET DATA BASED UPON NATIONAL COMPENSATION SURVEYS AND INCLUDES DATA FROM THE LABOR MARKET FOR POSITIONS OF SIMILAR RESPONSIBILITIES. TARGETED OVERALL COMPENSATION OUR COMPENSATION PROGRAM UTILIZES ACCURATE, DETAILED JOB DESCRIPTIONS FOR

ALL OF OUR EMPLOYEES, INCLUDING SENIOR MANAGEMENT WITH THE EXCEPTION OF THE CEO, AS AN INSTRUMENT TO ESTABLISH BENCHMARKED POSITIONS. THE MARKET 332212 09-04-13 Schedule O (Form 990 or 990-EZ) (2013)

**Employer identification number** 23-7048405

COMPENSATION INFORMATION FOR EACH POSITION IS DERIVED FROM SALARY DATA PROVIDED BY THIRD PARTIES THROUGH NATIONAL SURVEYS AND INCLUDES SALARY DATA FOR POSITIONS WITHIN THE DETERMINED COMPETITIVE LABOR MARKET. DESCRIPTIONS ARE REVIEWED ANNUALLY AND INCLUDE ESSENTIAL AND NON-ESSENTIAL RESPONSIBILITIES, REQUIRED KNOWLEDGE, SKILLS AND ABILITIES, FORMAL EDUCATION AND EXPERIENCE NECESSARY TO ACCOMPLISH THE REQUIREMENTS OF THE POSITION WHICH IN TURN HELPS US ACHIEVE OPERATIONAL GOALS. UTILIZING THIS INFORMATION, OUR HUMAN RESOURCES DEPARTMENT DETERMINES A MARKET-BASED SALARY FOR EACH POSITION BASED UPON SALARY SURVEY DATA PROVIDED BY THIRD A THIRD-PARTY CONSULTANT REVIEWS THE MARKET-BASED SALARY DATA WE PARTIES. COMPILED FOR REASONABLENESS AND FAIRNESS ANNUALLY. OUR BOARD OF DIRECTORS HAS DEFINED MARKET-BASED SALARY AS APPROXIMATELY 95% TO 100% OF THE 50TH PERCENTILE OF THE MARKET, EXCLUDING NEW HIRES THAT MAY BE HIRED AT 90% OF THE 50TH PERCENTILE OF MARKET UNTIL A LEARNING PERIOD IS COMPLETE.

## **PROCESS**

OUR BOARD OF DIRECTORS HAS DELEGATED TO OUR CEO THE AUTHORITY TO ESTABLISH AND ADJUST COMPENSATION FOR ALL EMPLOYEES OTHER THAN HIMSELF. WE HAVE A SUB-COMMITTEE OF OUR BOARD OF DIRECTORS, THE EXECUTIVE COMMITTEE, WHICH RECOMMENDS COMPENSATION FOR OUR CEO TO THE ENTIRE BOARD OF DIRECTORS AND THE ENTIRE BOARD OF DIRECTORS APPROVES THE COMPENSATION. THE COMPENSATION FOR ALL OTHER EMPLOYEES, INCLUDING MEMBERS OF SENIOR MANAGEMENT OTHER THAN THE CEO, IS APPROVED BY OUR CEO BASED UPON MARKET-BASED SALARY DATA. ON AN ANNUAL BASIS OUR BOARD OF DIRECTORS REVIEWS THE PERFORMANCE AND COMPENSATION OF OUR CEO AND OUR CEO REVIEWS THE PERFORMANCE AND COMPENSATION OF THE REMAINING SENIOR MANAGEMENT.

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization OLD DOMINION ELECTRIC COOPERATIVE	Employer identification number 23-7048405
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMEN	TS, CONFLICT OF
INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON R	EQUEST.
	<u>,,</u>
FORM 990, PART IX, LINE 4:	
EXPLANATION: LINE 4 CONTAINS CAPITAL CREDITS ALLOCATED TO	OUR MEMBERS.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CLOVER BOOK DEPRECIATION FOR FULL YEAR	-5,037,306.
LEASE EXPENSE CLOVER UNIT 1	16,924,291.
BOOK GAIN RECOGNIZED ON CLOVER UNIT 1	1,083,301.
INTEREST INCOME ON PAYMENT UNDERTAKING	-14,134,664.
FEDERAL INCOME TAX 1120-POL	-12,997.
BOOK/TAX DIFFERENCES FROM PARTNERSHIP	10,850.
TAX AMORTIZATION OF REA PREPAYMENT	340,619.
PATRONAGE DIVIDENDS REPORTED AS BENEFITS TO MEMBERS EXPEN	SE 9,573,120.
TOTAL TO FORM 990, PART XI, LINE 9	8,747,214.
FORM 990, PART I, LINE 3 AND PART VI, LINE 1A:	
EXPLANATION: ODEC IS GOVERNED BY A BOARD OF 22 DIRECTORS,	CONSISTING OF
TWO REPRESENTATIVES FROM EACH OF OUR MEMBER DISTRIBUTION	COOPERATIVES
AND ONE REPRESENTATIVE FROM TEC TRADING INC, ITS CLASS B	MEMBER. THE
CHAIRMAN OF THE BOARD CASTS 2 VOTES, ONE FOR HIS COOPERAT	IVE AND ONE
FOR TEC.	

Form 990 OLD DOM									23-704	8405
Part VII Section A. Officers, Directors, T.	rustees, Key E	mpl	oyee	es, a	ınd l	High	est	Compensated Employ	rees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	1		Reportable	Reportable	Estimated
	hours	(c	heck	k all	that	арр	ity)	compensation	compensation	amount of
	per							from	from related	other
	week	١.				oyee		the	organizations	compensation
	(list any	recto			1	E E		organization	(W-2/1099-MISC)	from the
	hours for related	5	8			ated		(W-2/1099-MISC)		organization
	organizations	uste	T I		<b>8</b>	ĕ	i			and related organizations
	below	를	trona		를 6	25	_			Organizations
	line)	ğ	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ROBERT L. KEES	40.00	⊢	F	<del>ا</del>	Ĥ	┝	⊢			_
SR VP & CFO	10.00	ł		x			ł	272,727.	0.	216,154
(28) LISA D. JOHNSON	40.00	┢	┢		┢	┢	-	2,2,,2,0		210,131
SR VP & COO-END 7/13		1		x				196,986.	0.	129,852
(29) ELISSA M. ECKER	40.00		$\vdash$	<del> </del>	$\vdash$	┢	╁	230,3000		127,002
VP HUMAN RESOURCES		ı		x				184,577.	0.	134,902
(30) DALE R. BEAM	40.00	┢	H	<del></del>		$\vdash$	$\vdash$			202,700
SR. VP POWER SUPPLY-START 11/13		i		х	l			221,031.	0.	153,907
(31) KENNETH F. ALEXANDER	40.00			-	<del> </del>	$\vdash$				200,700.
VP ENGINEERING SVCS		ĺ				х		212,514.	0.	0
(32) BRYAN S. ROGERS	40.00	$\vdash$		$\vdash$						<del>-</del>
VP & CONTROLLER		İ		ĺ		X		178,601.	0.	119,320
(33) EDWARD D. TATUM	40.00						Г			
VP RTO & REGULATORY AFFAIRS		1				X	1	174,432.	0.	136,685
(34) TODD T. BRICKHOUSE	40.00				Г					
VP & TREASURER		1				X		173,900.	0.	80,729
(35) LYNN A. MALONEY	40.00					$\vdash$			-	
VP FINANCIAL REPTG & INVESTOR REL		ì		ļ		X		175,038.	0.	125,304
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otal to Part VII, Section A, line 1c	• •							1,789,806.	1	<u>,096,853</u>