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Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

OMB No 1545-0047

Open to Public

A Fo	r the 2	2013 cal		01-01-2013 , 2013, and ending 12	-31-2013			
B Che	eck if ap	plicable	C Name of organization GOLDEN SPREAD ELECTRIC COOPERA	ATIVE INC		D Employ	yer iden	tification number
☐ Add	lress cha	ange		ATTYL INC		75-19	41060	
┌ Nar	ne chan	nge	Doing Business As					
┌ Inıt	ıal retur	n	Number and street (or P.O. box if ma	all is not delivered to street address) Room/	suite	E Tolopho	no numb	or.
┌ _{Ter}	mınated	j	PO BOX 9898			E Telepho	ne numb	er
┌ Am	ended n	eturn	City or town, state or province, coun	try, and ZIP or foreign postal code		(806)	379-77	766
_		pending	AMARILLO, TX 791055898	,,		2 6		250 042 522
,		penamg	F Name and address of prin	cinal officer	1 >			258,013,522
			MARK SCHWIRTZ	cipal officer	H(a)	Is this a group subordinates?	return f	for □ Yes 🔽 No
			PO BOX 9898					
			AMARILLO,TX 791055898		H(b)	Are all subordin	nates	┌ Yes ┌ No
T Ta:	x-exem	pt status	「 501(c)(3) ▽ 501(c) (12) ◀	(insert no)	\dashv	included? If "No." attach	alıst (see instructions)
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	ebsite	- VV VV	W GSEC COOP		H(c)	Group exempti	on num	iber 🟲
		anızatıon	Corporation Trust Association	Other 🟲	L Ye	ar of formation 198	84 M 9	State of legal domicile TX
Pa	rt I	Sum	mary					
			escribe the organization's missio	n or most significant activities				
	<u>R</u>	RURALE	LECTRIFICATION					
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<u>ē</u>	_							
<u> </u>	2 C	Check th	us box দ if the organization dis	continued its operations or disposed	of more	than 25% of its	net ass	sets
5 5			,	·				
<u>~</u> خ	3 N	Number	of voting members of the governi	ng body (Part VI, line 1a)			3	32
٠ د	4 N	Number	of independent voting members o	f the governing body (Part VI, line 1	b)		4	32
乬	5 ⊺	otal nur	mber of individuals employed in c	alendar year 2013 (Part V , line 2a)			5	71
Activities & Governance	6 ⊺	otal nur	mber of volunteers (estimate if ne	ecessary)			6	C
-	7 a ⊤	otal uni	elated business revenue from Pa	rt VIII, column (C), line 12			7a	C
	b∧	let unre	lated business taxable income fr	om Form 990-T, line 34			7b	C
						Prior Year		Current Year
	ا ه	Contri				224.0		464 504
a.	8	Contin	outions and grants (Part VIII, III	e 1 h)	·	321,8	64	461,501
anue	9			e 1h)		190,980,8	28	252,650,466
Pevenue	9 10	Progra Invest	m service revenue (Part VIII, lir ment income (Part VIII, column	ne 2g)		190,980,8	78	252,650,466 4,843,225
Revenue	9 10 11	Progra Invest Other	m service revenue (Part VIII, lir ment income (Part VIII, column revenue (Part VIII, column (A), l	(A), lines 3, 4, and 7d)		190,980,8	78	461,501 252,650,466 4,843,225 29,757
Revenue	9 10	Progra Invest Other Total r	m service revenue (Part VIII, lir ment income (Part VIII, column revenue (Part VIII, column (A), l evenue—add lines 8 through 11	ne 2g)		190,980,8 12,921,9 -85,7	78	252,650,466 4,843,225 29,757
Revenue	9 10 11 12	Progra Invest Other Totalr 12).	m service revenue (Part VIII, lir ment income (Part VIII, column revenue (Part VIII, column (A), l evenue—add lines 8 through 11	ne 2g)	ne	190,980,8	78	252,650,466 4,843,225
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	9 10 11 12 13 14	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10)	m service revenue (Part VIII, line ment income (Part VIII, column revenue (Part VIII, column (A), levenue—add lines 8 through 11 and similar amounts paid (Part 1) ts paid to or for members (Part 1) as, other compensation, employed	(A), lines 3, 4, and 7d)	ne	190,980,8 12,921,9 -85,7 204,138,8	978 978 990 880 0	252,650,466 4,843,225 29,757 257,984,949 0 0
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	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi: Salarie 5-10) Profes Total fui	m service revenue (Part VIII, line ment income (Part VIII, column revenue (Part VIII, column (A), levenue—add lines 8 through 11 and similar amounts paid (Part IX paid to or for members (Part IX parts, other compensation, employe sional fundraising fees (Part IX, ondraising expenses (Part IX, column (D) expenses (Part IX, column (A), line members (Part IX, column	(A), lines 3, 4, and 7d)	ne	190,980,8 12,921,9 -85,7 204,138,8 6,932,7	228 278 290 0 0 0 66 0	252,650,466 4,843,225 29,757 257,984,949 0 0 9,832,861 0
	9 10 11 12 13 14 15 16a b 17	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes Total fu Other	m service revenue (Part VIII, line ment income (Part VIII, column revenue (Part VIII, column (A), levenue—add lines 8 through 11 and similar amounts paid (Part IX paid to or for members (Part IX parts, other compensation, employe sional fundraising fees (Part IX, andraising expenses (Part IX, column (D) expenses (Part IX, column (A), liexpenses Add lines 13–17 (musexpenses Add lines 13–17 ((A), lines 3, 4, and 7d)	ne	190,980,8 12,921,9 -85,7 204,138,8 6,932,7	228 278 290 0 0 0 666 0	252,650,466 4,843,225 29,757 257,984,949 0 0 9,832,861 0 211,867,554 221,700,415
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AMARILLO, TX 791055650

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

Firm's address ► PO BOX 15650

Preparer

Use Only

Phone no (806) 373-6661

✓ Yes ☐ No

FOIIII	990 (2013)				Page Z
Part		nent of Program Service A Schedule O contains a response		II	·
1		e the organization's mission	or note to any mic m this r are i		
- THE NEGO MEM	MISSION OF GO DTIATION AND BER SYSTEMS T	DLDEN SPREAD ELECTRIC COC SECURING OF RELIABLE POW O CONTINUE TO PROVIDE AN NCE THE QUALITY OF LIFE FO	ER SUPPLY RESOURCES FOR : ID DEVELOP DEPENDABLE, LO	ITS MEMBERS, AND TO ACT JO DW COST ELECTRIC SERVICE	DINTLY WITH ITS
2	the prior Form 9	ation undertake any significant pr 1990 or 990-EZ?		which were not listed on	┌ Yes ┌ No
		be these new services on Schedu			
3	services? .	ation cease conducting, or make	significant changes in how it cor	nducts, any program	⊤Yes ▼ No
4	expenses Sect	ganization's program service acc ion 501(c)(3) and 501(c)(4) orga ses, and revenue, if any, for each	inizations are required to report		
4a	(Code GOLDEN SPREAD COOPERATIVES) (Expenses \$ ELECTRIC COOPERATIVE, INC IS A CON	including grants of \$ SUMER-OWNED WHOLESALE ELECTRIC) (Revenue \$ POWER SUPPLIER FOR RURAL ELECTR) IC DISTRIBUTION
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
Ad	Other pregram	s comuses (Decembe in Schodule	0.)		
4d	(Expenses \$	n services (Describe in Schedule including	grants of \$) (Revenue \$)
4e	Total program	service expenses 🕨			
					Form 990 (2013)

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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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^{\square}	9		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Νo
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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		No
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	30	Yes	

аı	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
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 191		1 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
1	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		N
ı	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	טכ		
	II 163, to line 38 of 30, the the organization line Form 0000-1"	5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
	71 Yes, maleute the number of forms of 22 med daring the year.			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	.		
	contract?	7e 7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 49662	9a		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
	Section 501(c)(7) organizations. Enter	שפ		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	[
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Ν
	If "Yes " has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

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

36	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax 1a 32			
	If there are material differences in voting rights among members of the governing			
	body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are			
	ındependent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		No
U	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17				
	List the States with which a copy of this Form 990 is required to be filed▶AZ, GA, IN			

- - Own website Another's website V 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 financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JACQUELINE HUMPHREY 905 S FILLMORE STREET SUITE 300 AMARILLO, TX 79101 (806) 379-7766

Form 990	(2013)	
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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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) A verage hours per week (list any hours		tion (han d n is l	ne l both	oox, an c			(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-		(F) Estima mount of	ated fother sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganizat relat organiza	ed
											-		
											+		
											+		
											_		
											+		
											+		
											+		
1b	Sub-Total							•					
c d	Total from continuation sheet Total (add lines 1b and 1c).	s to Part VII, S	ection A	٠.	•	•	•	•	3,400,042		0		1,162,613
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	<u> </u>	an			<u> </u>
												Yes	No
3	Did the organization list any fc on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highest compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	,	No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your fiv	e highest comp											
	compensation from the organiz	(A)	mpensa	ation	TOT 1	.ne c	aienda	ігуе	ar enging with or wi	(B)	on's t	ax year	

(A) Name and business address	(B)	(C)
	Description of services	Compensation
GE INTERNATIONAL INC PO BOX 848301 DALLAS TX 75284	ORIGINAL EQUIP MANUFACTURE	10,249,548
PIC GROUP INC 3838 N SAM HOUSTON PARKWAY E HOUSTON TX 77032	O&M CONTRACTOR	7,255,404
ZACHRY INDUSTRIAL INC 5601 W INTERSTATE 40 AMARILLO TX 79106	EPC CONTRACTOR	5,337,725
TIC-THE INDUSTRIAL COMPANY 785 GREENS PARKWAY SUITE 125 HOUSTON TX 77067	EPC CONTRACTOR	3,712,975
WOOD GROUP FIELD SERVICES 3444 E PASADENA FREEWAY PASADENA TX 77503	O&M CONTRACTOR	2,780,995

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►49

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f
Program Service Revenue	2a b c d e f
venue	9 3 4 5 6a b c d 7a b
Other R	b c 9a b c 10a
	b c 11a b c d e

Form 99								Page 9
Part V	/	Statement o	of Revenue ule O contains a respon	se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
र इ	1a	Federated cam	paigns 1a					
Grants mounts	b	Membership du	ies 1b					
A G	С	Fundraising eve	ents 1c					
Giffs, iilar Au	d	Related organiz	zations 1d					
s, C imi	е	Government grant	s (contributions) 1e	461,501				
ution er S	f	All other contribution	ons, gifts, grants, and 1f ot included above					
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contributi 1a-1f \$	ons included in lines					
ğ G	h	Total. Add lines	s 1 a - 1 f	• • • •	461,501			
<u> </u>				Business Code				
Кеп	2a	WHOLESALE POWE	R	221000	250,107,647	250,107,647		
28	Ь	PATRON SOURCE I		221000	2,313,907	2,313,907		
MCA	C .	PATRONAGE INCO	ME -	221000	228,912	228,912		
Š	d e							
ran	f	All other progra	am service revenue					
Program Serwce Revenue	g	-	s 2a-2f	<u> </u>	252,650,466			
	3		come (including dividence					
	_	and other simil	aramounts)	• [4,843,225			4,843,225
	4 5	Royalties	stment of tax-exempt bond p	roceeds				
		Royalties :	(ı) Real	(II) Personal				
	6a	Gross rents	58,330	. ,				
	b	Less rental expenses	28,573					
	С	Rental income or (loss)	29,757					
	d	, ,	me or (loss)		29,757			29,757
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of						
		assets other than inventory						
	b	Less cost or other basis and						
	c	sales expenses Gaın or (loss)						
	d		[] ss)					
ė	8a		from fundraising	·				
Other Revenue		\$ of contributions See Part IV, lin	s reported on line 1c)					
<u>.</u>	ļ ,	1	a 					
ફ	b c		penses b (loss) from fundraising e	vents				
_		Gross income f	from gaming activities ne 19					
			a					
	Ь		penses b	utios				
	10a	Gross sales of	(loss) from gaming activ	ittes				
		returns and allo						
			a					
	b		oods sold .	ntory -				
	_	Miscellaneous		Business Code				
	11a							
	b							
	С							
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d	🕨				
	12	Total revenue.	See Instructions	· · · •	257,984,949	252,650,466	0	4,872,982

Part IX Statement of Functional Expenses

		/	.,,												
Section 50	01(c)(3) and 501(c)(4) organizations	must complete all	columns	All other or	ganıza	tions	mus	t com	plet	есо	lumr	า (A)	
	Check If Schedul	le O contains a res	ponse or note to ar	ny line in t	hıs Part IX										

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,303,472			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	3,599,706			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	888,988			
9	Other employee benefits	1,599,180			
10	Payroll taxes	441,515			
11	Fees for services (non-employees)				
а	Management				
ь	Legal				
С	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Schedule O)	446,506			
12	Advertising and promotion	1,609,672			
13	Office expenses	336,873			
14	Information technology	304,728			
15	Royalties				
16	Occupancy	900,713			
17	Travel	424,065			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	78,537			
20	Interest	24,446,014			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	24,564,515			
23	Insurance	2,026,632			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	FUEL EXPENSE	66,271,791			
b	TRANSMISSION EXPENSE	43,625,847			
c	PLANT OPS & MGT	16,318,885			
d	PLANT MAINTENANCE	13,592,534			
е	All other expenses	16,920,242			
25	Total functional expenses. Add lines 1 through 24e	221,700,415			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X	92,237,494 1,237,250 13,672,069
1 Cash-non-interest-bearing	92,237,494 1,237,250
2 Savings and temporary cash investments	92,237,494 1,237,250
3 Pledges and grants receivable, net	92,237,494 1,237,250
4 Accounts receivable, net	92,237,494 1,237,250
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	1,237,250
6 Loans and other receivables from other disqualified persons (as defined under	1,237,250
section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	1,237,250
7 Notes and loans receivable, net	1,237,250
7 Notes and loans receivable, net	
8 Inventories for sale or use	13,672,069
9 Prepaid expenses and deferred charges	
Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 676,661,431	
b Less accumulated depreciation 10b 130,745,311 523,247,257 10c	545,916,120
11 Investments—publicly traded securities	
12 Investments—other securities See Part IV, line 11	
13 Investments—program-related See Part IV, line 11	
14 Intangible assets	
15 Other assets See Part IV, line 11	206,808,682
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,036,948,474
17 Accounts payable and accrued expenses	38,546,365
18 Grants payable	
19 Deferred revenue	
20 Tax-exempt bond liabilities	
21 Escrow or custodial account liability Complete Part IV of Schedule D 21	
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	
persons Complete Part II of Schedule L	
23 Secured mortgages and notes payable to unrelated third parties 539,315,909 23	610,954,762
24 Unsecured notes and loans payable to unrelated third parties	
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	15,978,879
26 Total liabilities. Add lines 17 through 25	665,480,006
Organizations that follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 27 through 29, and lines 33 and 34.	
27 Unrestricted net assets	
28 Temporarily restricted net assets	
29Permanently restricted net assets	
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets	
	0
31 Paid-in or capital surplus, or land, building or equipment fund	12,289,240
30 Capital stock or trust principal, or current funds	359,179,228
33 Total net assets or fund balances	371,468,468
34 Total liabilities and net assets/fund balances	1,036,948,474

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		257,9	84,949
2	Total expenses (must equal Part IX, column (A), line 25)	2		221,7	00,415
3	Revenue less expenses Subtract line 2 from line 1	3			284,534
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			.83,934
5	Net unrealized gains (losses) on investments	5		<u> </u>	
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-7,0	000,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		371,4	168,468
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	ırate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: Software Version:

EIN: 75-1941060

Name: GOLDEN SPREAD ELECTRIC COOPERATIVE INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor,	ox, ι an o /trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-1413C)	2/1099-1413C)	related organizations
JAMES BATTON DIRECTOR	4 70	х						27,800	0	0
VICK CHRISTIAN	1 50 4 20	x						25,600	0	0
DIRECTOR STEVE LOUDER	1 50 4 00									
DIRECTOR	1 30	Х						21,000	0	0
MICHAEL VEAZEY DIRECTOR	4 10 1 40	x						4,500	0	0
DARRELL STEPHENS	5 40	х						24,800	0	0
DAVID MARRICLE	1 80 4 90	X						29,250	0	0
DIRECTOR BOBBY FUCHS	1 70 4 30							25,230		
DIRECTOR	1 50	Х						23,350	0	0
ROLAND WITT VICE CHAIRMAN OF THE BOARD	4 90 1 70	х						28,650	0	0
JEFF COPELAND	5 10	х						21,000	0	0
DIRECTOR KELLY LANKFORD	1 70 7 00	X						22.750	0	0
DIRECTOR STEVE GEE	2 30 3 60							33,750	0	0
DIRECTOR	1 20	Х						15,750	0	0
STAN MCCLENDON CHAIRMAN OF THE BOARD	5 20 1 80	x						32,250	0	0
KEVIN HUMPHREYS	3 00	х						11,300	0	0
DIRECTOR BOYD MCCAMISH	1 00 3 50							19,550	0	0
DIRECTOR JIM STEWARD	1 20 3 20	X						19,550	0	
DIRECTOR	1 00	Х						3,000	0	0
GAYLORD GROCE DIRECTOR	6 40 2 20	×						21,800	0	o
BILL HARBIN	5 70	х						22,550	0	0
SECRETARY/TREASURER OF THE BOARD EARL BROWN	1 90 5 60	X						27,000	0	0
DIRECTOR ROGER BLACKWELDER	1 80 7 80							27,000	0	
DIRECTOR	2 70	Х						24,300	0	0
GREG HENLEY DIRECTOR	4 80 1 70	x						27,050	0	o
MARK MCCLAIN	6 30	x						16,500	0	0
DAVID SELL	2 10 6 70	,,						24.550		
DIRECTOR RANDY MAHANNAH	2 30 4 20	X						31,550	0	0
DIRECTOR	1 40	х						21,050	0	0
BRENT WHEELER DIRECTOR	6 80	х						34,550	0	0
JIMMY STOKES	2 30	x						23,330	0	0
DIRECTOR	1 30									<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours	Posit more th perso and a	ion (nan o n is b	ne b oth ctor,	ox, ι an o /trus	inless fficer tee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
TOMMY JOINES	4 10	x						23,250	0	0
DIRECTOR	1 30					-		,		
DALE ANCELL	5 00	x						30,150	0	0
DIRECTOR WILLIAM WHITTEN	1 70 4 80					+				
DIRECTOR	1 70	X						22,350	0	0
STEVE WILLIAMS	3 60	,						20.050		
DIRECTOR	1 20	Х						20,050	0	0
JIMIE REED	3 70	x						21,800	0	0
DIRECTOR DARRYL SCHRIVER	1 20					-		,	-	
	3 50	x						21,750	0	0
DIRECTOR CECIL DAVIS	1 20 3 40									
DIRECTOR	1 20	X						21,000	0	0
LARRY HODGES	3 80	<u> </u>								
DIRECTOR	1 30	Х						24,000	0	0
JACK PERKINS	3 60	x						18,750	0	0
DIRECTOR	1 20					-		22,123		
MARK SCHWIRTZ	38 50			х				498,610	0	418,039
PRESIDENT & GENERAL MANAGER JACQUELINE HUMPHREY	1 50 32 00									
VICE PRESIDENT/CFO/ASST_TREASURER	8 00			х				235,471	0	82,046
GEORGE HESS	35 00			l						
VICE PRESIDENT, PRODUCTION	5 00			Х				187,525	0	57,808
MICHAEL WISE	62 00			x				221,353	0	88,273
VP, COMM OPERATIONS & TRANSMISSION	0 00					-				,
MARY HEKMAN	38 50			x				266,639	0	82,252
VP LEGAL RISK & COMPLIANCE/ASST SEC STEPHEN CROSS	1 50 40 00									
VICE PRESIDENT, ENGINEERING	0 00			Х				196,775	0	87,626
MARGARET RUPERT	50 00			,,				02.007		12.010
VICE PRESIDENT, IT & CIO	0 00			Х				92,907	0	13,818
SHANE MCMINN	43 00					×		149,851	0	69,777
MANAGER OF ENGINEERING SERVICES	0 00							,		,
STEVE WIEGAND	43 00					×		156,217	0	65,266
TREASURY & REGULATION ADMINISTRATOR WILLIAM PIPPIN	2 00				-	+				
SENIOR PRODUCTION ASSET MANAGER	10 00					×		152,601	0	56,200
MATT MOORE	50 00					İ				
MANAGER MARKET OPERATIONS	0 00					X	L	157,957	0	68,420
WILLIAM HARRELSON	45 00					х		193,116	0	73,088
ASSOC GEN COUNSEL, REGULATORY AFFAIRS	0 00					 	_	133,110		. 5,555
RANDY ALLISON	0 00						x	116,690	0	0
FORMER VP, PRODUCTION	0 00			<u> </u>	<u> </u>	1		l		

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DLN: 93493321090044

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

ema	i Revenue Service		Inspection
	me of the organization LDEN SPREAD ELECTRIC COOPERATIVE INC		Employer identification number
Da	rt I Organizations Maintaining Donor Ad	vised Eunds or Other Similar E	75-1941060
FG	organizations maintaining bollor Ad organization answered "Yes" to Form 990		unds of Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
ŀ	Aggregate value at end of year		
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		nor advised Yes No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene conferring impermissible private benefit?		
Pai	rt II Conservation Easements. Complete if	f the organization answered "Yes" t	to Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held.	n or education)	certified historic structure
	Complete lines 2a through 2d if the organization held easement on the last day of the tax year	a qualified conservation contribution in	the form of a conservation
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified hist	orıc structure ıncluded ın (a)	2c
d	Number of conservation easements included in (c) accommodate structure listed in the National Register	quired after 8/17/06, and not on a	2d
;	Number of conservation easements modified, transfer	red, released, extinguished, or terminate	ed by the organization during
	the tax year 🗠		
	Number of states where property subject to conservat	tion easement is located ►	
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of violations, and Yes No
,	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation ease	ments during the year
,	A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s during the year
	▶ \$		
3	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(ı)
)	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	ne footnote to the organization's financia	
ar	t IIII Organizations Maintaining Collection Complete if the organization answered "Y	ns of Art, Historical Treasures, Yes" to Form 990, Part IV, line 8.	or Other Similar Assets.
.a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnotes	ets held for public exhibition, education,	or research in furtherance of public
b	If the organization elected, as permitted under SFAS is works of art, historical treasures, or other similar assesservice, provide the following amounts relating to these	116 (ASC 958), to report in its revenue ets held for public exhibition, education,	statement and balance sheet
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
	If the organization received or held works of art, historical following amounts required to be reported under SFAS		or financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		► \$
b	Assets included in Form 990, Part X		<u></u>
			• т

Par	Tit Organizations Maintaining Co	<u>llections of Art, l</u>	<u>Histor</u>	<u>ical Treas</u>	ures, or Oth	<u>ier Similai</u>	<u>r Asse</u>	ts (co	<u>ntınued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	, check	any of the fo	ollowing that are	e a significan	t use of	ıts	
а	Public exhibition		d $ egin{array}{c c c c c c c c c c c c c c c c c c c $	Loan or ex	change prograr	ns			
b	Scholarly research		е Г	Other					
c	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how the	y further the	e organızatıon's	exempt purp	ose in		
5	During the year, did the organization solicit					ımılar	_		_
	assets to be sold to raise funds rather than t					W		Yes	No
Par	Part IV, line 9, or reported an an				on answered	Yes" to Fo	rm 990	,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ıan or other ıntermedı	ary for	contributions	or other asset	s not	_	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing	table					
							Amou	nt	
C	Beginning balance				10				
d	Additions during the year				10	<u> </u>			
e	Distributions during the year				16				
f	Ending balance				11	F			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21?				Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II Check here if the e	xplanat	ion has been	provided in Pa	rt XIII			Γ
Pa	rt V Endowment Funds. Complete								
		(a)Current year	(b) Prior	year b (c	Two years back (d) Three years	back (e	Four ye	ears back
1a	Beginning of year balance								
b	Contributions								
C	Net investment earnings, gains, and losses								
d	Grants or scholarships								
e	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	rent year end balance	(line 1g	ı, column (a)) held as				
а	Board designated or quasi-endowment 🕨								
ь	Permanent endowment ►								
С	Temporarily restricted endowment ►								
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%							
За	Are there endowment funds not in the posse	ssion of the organizati	on that	are held and	administered f	or the			
	organization by							Yes	No
	(i) unrelated organizations						3a(i)		
	(ii) related organizations						3a(ii)		
	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second organization or second or second organization organiza						3b		
4 Date	t VI Land, Buildings, and Equipme				sworod 'Vos' t	o Form 00() Dart	T\/ lu	20
Fell	11a. See Form 990, Part X, line		e organ	ilization an	swered res i	נט רטוווו פפנ	J, Part	17, 111	ie
	Description of property			Cost or other	(b)Cost or other	r (c) Accumu		(d) Boo	ak value
			bas	ıs (ınvestment)	basis (other)	иергеста			ok value
			bas	is (ilivestifient)	,				
	_and		bas	s (investment)	2,826,03	3			2,826,033
b i	_and		bas	is (investment)	,	3	34,982		2,826,033
b l	_and		Das	is (investment)	2,826,03	3			2,826,033
b E c l d E	Land		bas	is (invesurient)	2,826,03	125,58		51	2,826,033 3,619,868 9,470,219

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	mplete if the organization	answered 'Yes' to Form	990, Part IV, line 11b.
(a) Description of security or category	(b) Book value	(c) Method of value	
(Including name of security) (1)Financial derivatives		Cost or end-of-year ma	arket value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	*		
Part VIII Investments—Program Related. C	omplete if the organization	n answered 'Yes' to Forr	m 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valu	
(a) Description of investment	(B) Book value	Cost or end-of-year ma	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*		
Part IX Other Assets. Complete if the organization	on answered 'Yes' to Form 990), Part IV, line 11d See Fo	rm 990, Part X, line 15
(a) Desc	ription		(b) Book value
See Additional Data Table			
Total. (Column (b) must equal Form 990, Part X, col.(B) line			206,808,682
Part X Other Liabilities. Complete if the org	anization answered 'Yes' to	o Form 990, Part IV, lin	e 11e or 11f. See
Form 990, Part X, line 25. 1 (a) Description of liability	(b) Book value		
	(-)		
Federal income taxes	621.100		
ACCRUED EMPLOYEE VACATION ACCRUED LIAB-OVER ACCRUED REVENUE	621,198		
SUPPLEMENTAL PENSION LIABILITY	877,968		
ACCRUED INTEREST EXPENSE	7,929,621		
OTHER ACCRUED EXPENSES	620,369		
DEFERRED CREDITS	1,838,006		
ACCRUED PROPERTY TAX	4,065,367		
	1,250,501		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	15,978,879		

Part		evenue per Audited Financial Statements With Revenue p vered 'Yes' to Form 990, Part IV, line 12a.	oer Re	eturn Complete if
1		er support per audited financial statements	1	
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12		
а	Net unrealized gains on invest	tments		
b	Donated services and use of f	acılıtıes 2b	1	
С	Recoveries of prior year grant	s 2c	1	
d			1	
e	Add lines 2a through 2d .		2e	
3	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1		
а		uded on Form 990, Part VIII, line 7b . 4a		
b	·	4b	1	
С			4c	
5	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line 12)	5	
Part		xpenses per Audited Financial Statements With Expense	per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line 12a.		
1	Total expenses and losses pe	r audited financial statements	1	
2	A mounts included on line 1 bu	it not on Form 990, Part IX, line 25		
а	Donated services and use of fa	acılıtıes		
b	Prior year adjustments	<u>2b</u>	_	
С	Other losses	<u>2</u> c		
d	Other (Describe in Part XIII)	<u>2</u> d	_	
e	Add lines 2a through 2d		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	
4	A mounts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		_	
C			4c	
5	-	nd 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIII Supplemental Inf	ormation		
Part '		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2l, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		le any addıtıonal
	Return Reference	Explanation		
PART	X, LINE 2	GOLDEN SPREAD ELECTRIC COOPERATIVE, INC (COOPERATIVE) "UNCERTAIN TAX POSITIONS" PROVISIONS OF GAAP THE PRIMA	RY TA	X POSITIONS OF
		THE COOPERATIVE ARE ITS FILING STATUS AS A TAX EXEMPT EN AVOID EXCEEDING A CERTAIN PERCENTAGE OF ITS INCOME FRO MAINTAIN ITS TAX-EXEMPT STATUS THE COOPERATIVE DETERM LIKELY THAN NOT, THAT THEIR TAX POSITION WILL BE SUSTAINE THE IRS, OR OTHER STATE TAXING AUTHORITY AND THAT ALL TA TO BE REALIZED UPON SETTLEMENT WITH TAXING AUTHORITIES ENDED DECEMBER 31, 2013, THE COOPERATIVE PAID NO INCOME	M NON INED ⁻ D UPC X BEN FOR T	IMEMBERS TO THAT IT IS MORE N EXAMINATION BY EFITS ARE LIKELY THE THREE YEARS

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 75-1941060

Name: GOLDEN SPREAD ELECTRIC COOPERATIVE INC

Form 990, Schedule D, Part IX, - Other Assets

(a) Description	
(1) ACCRUED INTEREST RECEIVABLE	3,024,923
(2) INVESTMENTS IN ASSOCIATED COMPANIES	37,662,991
(3) OTHER MATERIALS & SUPPLIES	10,435,031
(4) SUPPLEMENTAL PENSION	877,968
(5) DEBT ISSUANCE COSTS	2,617,830
(6) INVESTMENTS-AMARILLO CLUB	1,125
(7) LAND HELD FOR FUTURE USE	885,607
(8) ESCROW FUNDS	6,700,000
(9) REGULATORY ASSETS	2,630,363
(10) COMPRESSOR - FCGS	1,885,504
(11) FUNDS HELD BY TRUSTEE	15,020,815
(12) PREPAID EQUIPMENT	116,598,262
(13) INVESTIGATION & SURVEY COSTS	8,468,263

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DLN: 93493321090044

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization GOLDEN SPREAD ELECTRIC COOPERATIVE INC **Employer identification number**

75-1941060

ъ.	0	75-1941000			
Ра	t I Questions Regarding Compensat	cion		Yes	No No
1a		provided any of the following to or for a person listed in Form III to provide any relevant information regarding these items		162	NO
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b		e organization follow a written policy regarding payment or s described above? If "No," complete Part III to explain	1b	Yes	
2		to reimbursing or allowing expenses incurred by all Executive Director, regarding the items checked in line 1a?	2	Yes	
3	organization's CEO/Executive Director Check al	rganization used to establish the compensation of the Il that apply Do not check any boxes for methods ensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee	✓ Written employment contract			
	✓ Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	A pproval by the board or compensation committee			
4	During the year, did any person listed in Form 99 or a related organization	90, Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-cont	trol payment?	4a	Yes	
b	Participate in, or receive payment from, a supplei	mental nonqualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity	y-based compensation arrangement?	4c		Νο
		d provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only	must complete lines 5-9.			
5		n A, line 1a, did the organization pay or accrue any			
а	The organization?		5a		
b	Any related organization?		5b		
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	n A, line 1a, did the organization pay or accrue any			
а	The organization?		6a		
b	Any related organization?		6b		
	If "Yes," to line 6a or 6b, describe in Part III				
7		n A, line 1a, did the organization provide any non-fixed s," describe in Part III	7		
8		II, paid or accured pursuant to a contract that was ed in Regulations section 53 4958-4(a)(3)? If "Yes," describe	8		
9	If "Yes" to line 8, did the organization also follow section 53 4958-6(c)?	the rebuttable presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) 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

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2013

Part IIII Supplemental Information

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

Return Reference Explanation									
	AIR TRAVEL IS OCCASIONALLY CHARTERED IN ORDER FOR DIRECTORS TO ATTEND BOARD MEETINGS SUCH CHARTERED FLIGHTS ARE BOOKED WHEN MONETARILY SIMILAR AND/OR ADVANTAGEOUS COMPARED TO COMMERCIAL FLIGHTS OR MILEAGE DUE TO THE SIGNIFICANT TRAVEL REQUIREMENTS OF VARIOUS MEMBER COOPERATIVES IN REMOTE PARTS OF TEXAS MULTIPLE DIRECTORS PARTICIPATE IN A SINGLE CHARTERED FLIGHT								
,	LINE 4A - RANDY ALLISON, VICE PRESIDENT OF PRODUCTION, TERMINATED HIS EMPLOYMENT ON 8/10/2012 SEVERANCE PAY DETERMINED PURSUANT TO THE EXISTING EMPLOYMENT CONTRACT IS REPORTED IN PART II, COLUMN B(III) IN THE AMOUNT OF \$116,690 LINE 4B - SEE PART II COLUMN(C) DEFERRED COMPENSATION								

Schedule J (Form 990) 2013

Software ID: **Software Version:**

EIN: 75-1941060

Name: GOLDEN SPREAD ELECTRIC COOPERATIVE INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees											
(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form			
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ			
MARK SCHWIRTZ PRESIDENT & GENERAL MANAGER	(I) (II)	493,610 0	5,000 0	0 0	387,719 0	30,320 0	916,649 0	0 0			
JACQUELINE HUMPHREY VICE PRESIDENT/CFO/ASST TREASURER	(I) (II)	232,287 0	3,184 0	o o	51,520 0	30,526 0	317,517 0	0			
GEORGE HESS VICE PRESIDENT, PRODUCTION	(I) (II)	185,179 0	2,346 0	0 0	37,278 0	20,530 0	245,333 0	0 0			
MICHAEL WISE VP, COMM OPERATIONS & TRANSMISSION	(I) (II)	217,949 0	3,404 0	0	57,094 0	31,179 0	309,626 0	0 0			
MARY HEKMAN VP LEGAL RISK & COMPLIANCE/ASST SEC	(I) (II)	263,754 0	2,885 0	o o	67,857 0	14,395 0	348,891 0	0			
STEPHEN CROSS VICE PRESIDENT, ENGINEERING	(I) (II)	194,730 0	2,045 0	0 0	62,739 0	24,887 0	284,401 0	0 0			
SHANE MCMINN MANAGER OF ENGINEERING SERVICES	(I) (II)	147,529 0	2,322 0	0	40,756 0	29,021 0	219,628 0	0			
STEVE WIEGAND TREASURY & REGULATION ADMINISTRATOR	(I)	141,595 0	14,622 0	0	37,956 0	27,310 0	221,483 0	0			
WILLIAM PIPPIN SENIOR PRODUCTION ASSET MANAGER	(I)	149,584 0	3,017 0	0	31,979 0	24,221 0	208,801	0			
MATT MOORE MANAGER MARKET OPERATIONS	(I)	156,179 0	1,778 0	0	41,398 0	27,022 0	226,377 0	0			
WILLIAM HARRELSON ASSOC GEN COUNSEL,REGULATORY AFFAIRS	(I) (II)	190,098 0	3,018 0	0 0	48,859 0	24,229 0	266,204 0	0			
RANDY ALLISON FORMER VP, PRODUCTION	(I) (II)	0	0 0	116,690 0	0	0	116,690 0	0			

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As Filed Data -

DLN: 93493321090044

OMB No 1545-0047

2013

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SCHEDULE O

(Form 990 or 990-EZ)
Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization GOLDEN SPREAD ELECTRIC COOPERATIVE INC

Employer identification number

75-1941060

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ONE CLASS OF MEMBERS EXISTS WITH EACH MEMBER COOPERATIVE HAVING EQUAL REPRESENTATION ON THE BOARD
FORM 990, PART VI, SECTION A, LINE 7A	EACH MEMBER COOPERATIVE HAS TWO BOARD POSITIONS REPRESENTING THE VOTING GOVERNING BODY (16 MEMBER COOPERATIVES EQUATES TO 32 VOTING POSITIONS ON THE BOARD) THE MANAGER OF EACH MEM BER COOPERATIVE IS ELECTED BY THE RESPECTIVE MEMBER COOPERATIVE AND FILLS ONE OF THE TWO P OSITIONS THE SECOND POSITION IS ELECTED FROM EACH EXISTING MEMBER COOPERATIVE'S BOARD BY THAT MEMBER COOPERATIVE
FORM 990, PART VI, SECTION A, LINE 7B	CERTAIN DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO THE APPROVAL OF THE MEMBER COOPERATIVES
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 FOR THIS COMPANY WAS PREPARED BY AN OUTSIDE CPA FIRM AND REVIEWED BY THE AUDIT COMMITTEE
FORM 990, PART VI, SECTION B, LINE 12C	OFFICERS AND DIRECTORS SUBMIT FEDERAL ENERGY REGULATORY COMMISSION (FERC) ANNUAL REPORT OF INTERLOCKING POSITIONS (FORM 561) FOR GOLDEN SPREAD ELECTRIC COOPERATIVE INC
FORM 990, PART VI, SECTION B, LINE 15	OUTSIDE PROFESSIONAL COMPENSATION CONSULTANTS ARE RETAINED TO PREPARE SALARY RANGES FOR EA CH POSITION A COMPENSATION COMMITTEE CONSISTING OF FIVE BOARD MEMBERS AND TWO HUMAN RESOU RCE EMPLOYEES EXISTS TO REVIEW AND APPROVE COMPENSATION ARRANGEMENTS
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY IS AVAILABLE TO THE PUBLIC UPON REQUEST THE FINANCIAL STATEMENTS ARE POSTED ON THE ORGANIZATION'S WEBSITE
FORM 990, PART XI, LINE 9	PATRONAGE CAPITAL RETIREMENT -7,000,000

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2013

OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

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

Name of the organization GOLDEN SPREAD ELECTRIC COOPERATIVE INC **Employer identification number**

75-1941060

	lete if the organization				1 (0		
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Ei	(e) nd-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	nizations Complete ıf the tax year.	the organization an		า Form 990, Pa	art IV, line 34 because it h	ad on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	(e) n Public charity s (if section 501(d	otatus (f) Direct controlling entity	Section (b) (conti	(13)
(1) MID-TEX GENERATION & TRANSMISSION ELECTRIC COOPERATIVE INC	RURAL ELECTRIFICATION	TX	501(C)(12)	_	GOLDEN SPREAD ELECTRIC	Yes Yes	No
PO BOX 9898	RORAL ELECTRIFICATION		301(€)(12)		COOPERATIVE INC	les	
AMARILLO, TX 79105 75-2157834							
	 		1				

(a) Name, address, and EIN related organization	of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predo Income unre exclud tax I sectioi	e) minant (related, lated, ed from under ns 512- 14)	(f) Share o total incor	(g) Share of ne end-of-yea assets		rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	ral or aging ner?	(k) Percentage ownership
									Yes	No		Yes	No	
Part IV Identification of Related O									swered	d "Yes'	' on Form	990,	Part I	ΣV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or fore country)		(d) Direct cor entil) ntrolling	(e) Type of (C corported c	entity 5	(f) Share of total Income	Share	(g) of end-o year issets	f- Percer owne	ntage	0	(i) ection 512 (b)(13) ontrolled entity?
(1) FORT CONCHO GAS	GAS STORAGE FACILITY	TX		GOLDEN SF	PREAD	С		7,707,141	1	17,205,0	55 100 0	nn %		'es No
STORAGE INC PO BOX 9898 AMARILLO, TX 79105 26-3430270				ELECTRIC COOPERAT				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.,,203,0		00 70		
(2) GOLDEN SPREAD PANHANDLE WIND RANCH LLC	ELECTRIC GENERATION	тх		GOLDEN SF ELECTRIC COOPERAT		С		15,601,396	11	15,482,17	79 100 0	00 %	Ye	es
PO BOX 9898 AMARILLO, TX 79105 26-3144595														

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No		
1 D	ring the tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations li	sted in Parts II-IV?						
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	Yes			
b	Gift, grant, or capital contribution to related organization(s)				1b		No		
c	Gift, grant, or capital contribution from related organization(s)				1c		No		
d	Loans or loan guarantees to or for related organization(s)				1d	Yes			
е	Loans or loan guarantees by related organization(s)				1e		No		
f	Dividends from related organization(s)				1f		No		
g	Sale of assets to related organization(s)				1g		No		
h	Purchase of assets from related organization(s)				1h		No		
i	Exchange of assets with related organization(s)				1 i		No		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No		
k	k Lease of facilities, equipment, or other assets from related organization(s)								
ı	l Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)									
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
0	Sharing of paid employees with related organization(s)				10	Yes			
р	Reimbursement paid to related organization(s) for expenses				1р		No		
q	Reimbursement paid by related organization(s) for expenses				1q		No		
r	O ther transfer of cash or property to related organization(s)				1r		No		
s	Other transfer of cash or property from related organization(s)				1s		No		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	· · · · · · · · · · · · · · · · · · ·							
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount ii	nvolved			
ee A	ditional Data Table								

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
		·					<u> </u>						

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 75-1941060

Name: GOLDEN SPREAD ELECTRIC COOPERATIVE INC

Form 990, Schedule R, Part V - Transactions With Related Organizations

1 orni 330, Schedule K, Part V - Transactions with Related Organizations			
(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved
FORT CONCHO GAS STORAGE INC	А	669,690	COST
GOLDEN SPREAD PANHANDLE WIND RANCH LLC	А	3,567,882	COST
FORT CONCHO GAS STORAGE INC	D	7,500,000	BALANCE AT 12/31/13
GOLDEN SPREAD PANHANDLE WIND RANCH LLC	D	84,737,494	BALANCE AT 12/31/13
FORT CONCHO GAS STORAGE INC	N	48,000	COST
GOLDEN SPREAD PANHANDLE WIND RANCH LLC	N	60,000	COST
FORT CONCHO GAS STORAGE INC	0	125,650	COST
GOLDEN SPREAD PANHANDLE WIND RANCH LLC	0	203,300	COST
FORT CONCHO GAS STORAGE INC	М	7,677,340	COST