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DLN: 93493288010174

Form **990**

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 By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 ca applicable	C Name of organization SOCORRO ELECTRIC COOPERATIVE INC	13 , 2013, and ending 12	-31-2013	D Employ	er iden	tification number
— Add	dress c	hange				85-00	84968	
— Na	me cha	ange	Doing Business As					
Init	ial retu	um	Number and street (or P O box if mail is not deli	vered to street address) Room/	'suite	E Telepho	ne numb	per
_	mınate		PO BOX H			(575)	835-0	560
		return	City or town, state or province, country, and ZIP SOCORRO, NM 87801	or foreign postal code		, ,		
Apı	olicatio	n pending						25,449,294
			F Name and address of principal office JOSEPH HERRERA	er		s this a group ubordinates?	return	for ┌ Yes ┌ No
			PO BOX H		3	aboramates.		
			SOCORRO,NM 87801			re all subordır ıcluded?	ates	Γ Y es Γ No
г Та	x-exer	npt statu	501(c)(3) 501(c) (12) (insert no)	☐ 4947(a)(1) or ☐ 527			a lıst (see instructions)
ı w	ebsit	e:► W	WW SOCORROELECTRIC COM		H(c) (Group exempti	on num	nber 🗠
₩ Eon	m of o	raanizatio	n		1 11(1)	of formation 194		State of legal domicile
K FOII	11 01 01	rganizatio	n p corporation) Trust Association Other P		L fear	or formation 194	NM	_
Pa	rt I	Sur	nmary					
			describe the organization's mission or most		C O E T H E O	OODEDATIV	=	
		TO PR	OVIDE QUALITY AND RELIABLE ELECTRI	C SERVICE TO MEMBER	SUFINEC	OOPERATIV		
ACTIVITIES & GOVERNANCE			this box 🔭 if the organization discontinued					
ණ ග	I		r of voting members of the governing body (P				3 4	
E E	I		r of independent voting members of the gove umber of individuals employed in calendar ye				5	50
Ş			umber of volunteers (estimate if necessary)				6	
4			nrelated business revenue from Part VIII, co				7a	
	ь	Net uni	elated business taxable income from Form 9	90-T, line 34			7b	ı
						Prior Year		Current Year
a)			ributions and grants (Part VIII, line 1h) .		•		0	(
Ravenue	9 10		Program service revenue (Part VIII, line 2g)			24,971,4 87,9	-	25,229,678 180,153
Ž	11		r revenue (Part VIII, column (A), lines 5, 6d			39,4	_	39,464
	12	Tota	revenue—add lines 8 through 11 (must equ	al Part VIII, column (A), l	ıne	•		
	12		· · · · · · · · · · · · · · · · · · ·			25,098,8	75 75	25,449,294
	13 14		ts and sımılar amounts paıd (Part IX, columr fits paıd to or for members (Part IX, column			1,770,7	-	1,974,151
	15		ries, other compensation, employee benefits					
Expenses		5-10))			2,469,5	_	2,320,897
<u>₹</u>	16a		ssional fundraising fees (Part IX, column (A		•		0	(
짚	b		fundraising expenses (Part IX, column (D), line 25)			20,723,0	1 2	20.065.793
	17 18		r expenses (Part IX, column (A), lines 11a- expenses Add lines 13-17 (must equal Pa			24,963,9	_	20,965,782 25,261,470
	19		nue less expenses Subtract line 18 from lin			134,9	_	187,824
Net Assets or Fund Balances					Begin	ning of Curren Year	t	End of Year
essel Bafa	20	Tota	assets (Part X, line 16)			70,114,2	01	72,189,934
2 E	21	Tota	liabilities (Part X, line 26)			48,430,8		49,441,488
	22		ssets or fund balances Subtract line 21 fro	m line 20		21,683,3	48	22,748,446
Jnde my k prepa	nowle arer h	alties o dge and as any	nature Block f perjury, I declare that I have examined this belief, it is true, correct, and complete Decknowledge *** nature of officer					
Her	E		EPH HERRERA GENERAL MANAGER e or print name and title					
		<u> </u>	Print/Type preparer's name Preparer's WILLIAM M MILLER	signature	Date 2014-09-16		PTIN P004394	1 59
Paid Bro		<u> </u>	Firm's name BOLINGER SEGARS GILBERT AND M	OSS LLP		Firm's EIN ► 75	-088203	7
	pare On		Firm's address ► 8215 NASHVILLE AVENUE			Phone no (806)	747-38	06
	. U II	iry I						

LUBBOCK, TX 79423

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

✓ Yes No

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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	Yes	
LO	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
l 1	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, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Yes	
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
L3	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
L4a	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
L 6	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
L 7	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
L8	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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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 IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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? <i>If "Yes," complete Schedule R, Part I</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? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	Check if Schedule O contains a response or note to any line in this Part V		Yes	
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 34			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
3	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c		
2a	gaming (gambling) winnings to prize winners?			
	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		N
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		
a	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		
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	-		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		١
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_E _		
ie	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		r
,u	organization solicit any contributions that were not tax deductible as charitable contributions?	Ja		Ľ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	1		1
,	were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	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 7d	/		
_	11 Test, indicate the number of forms of 202 med during the year 1 1 1 1	1		
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		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<u> </u>		
_	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
3	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 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
) a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b	-		
_	facilities	1		
L	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders	<u>'</u>		
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
b	319/121	1		
	and the second state of the second se	12a		\vdash
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			ſ
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
ea b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	13a		
2a b 3	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	13a		
a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	13a		
a b a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	13a		

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 of Schedule O contains a response or note to any line in this Part VI.

Se	ection A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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	4		No
_	filed?	5		No
5		6	V	110
6	Did the organization have members or stockholders?	6	Yes	
	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	
Ь	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	ıe Cod	e.)
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
l1a	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			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13			
b		12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	Yes	
c				
	rise to conflicts?	12b	Yes	
L3	rise to conflicts?	12b 12c	Yes Yes	No
L3 L4	rise to conflicts?	12b 12c 13	Yes Yes	No
13 14 15	rise to conflicts?	12b 12c 13	Yes Yes	No
13 14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes Yes Yes	No
13 14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes Yes Yes	No
13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes Yes Yes	No
13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
13 14 15 a b 16a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
13 14 15 a b 16a b	rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
13 14 15 a b	In the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Ection C. Disclosure List the States with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	12b 12c 13 14 15a 15b	Yes Yes Yes	

►JOSEPH HERRERA GM 215 E MANZANARES AVE

SOCORRO, NM 87801 (575)835-0560

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

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

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

- ♦ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key 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) Average hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) LUIS AGUILAR	6 70	×		x				7,800	0	0	
PRESIDENT	1 00							,,000			
(2) PRESCILLA MAULDIN VICE PRESIDENT	7 40 1 00	x		x				4,132	0	0	
(3) DONALD WOLBERG SECRETARY	29 30 1 00	х		х				4,091	0	0	
(4) LEO CORDOVA	21 80	х		x				5,147	0	C	
TREASURER	1 00	_ ^						5,147	U	·	
(5) ANNE DOROUGH	8 00	x						3,129	0	0	
TRUSTEE	1 00							0,225			
(6) DAVE WADE	7 90	х						9,744	0	C	
TRUSTEE (7) CHARLES WAGNER	1 00	-									
TRUSTEE	1 00	Х						3,008	0	C	
(8) JOSEPH HERRERA	59 00			х				146,353	0	40,430	
GENERAL MANAGER (9) ABRAN ROMERO	40 00			×				36,892	0	8,625	
CFO (1/2013 - 5/2013)				_^				30,072		0,023	
(10) TONY LOPEZ LINE FOREMAN	46 00					х		103,417	0	31,110	
					1	<u> </u>				Form 990 (2013	

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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					3	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)		(F) Estima mount of ompens from t	other ation he
		for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganızatı relate organıza	d
											_		
											-		
											-		
											-		
											_		
41.	Cult Tabel												
1b c	Sub-Total	 s to Part VII. S	· · · ection A	٠.			_	-					
	Total (add lines 1b and 1c) .							Þ	323,713	(80,165
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	an	•		
												Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highest compen	sated employee	3		No
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	ction B. Independent Co	ntractors											
1	Complete this table for your five	e highest comp											
	compensation from the organiz	ation Report co	ompensa	ation	for t	the c	alenda	arye	ar ending with or wi	thin the organization (B)	n's t	ax year	

Description of services	Compensation
MAPPING	219,628
ACCOUNTING CONSULTANT	160,648
METER PRODUCTS	156,340
ATTORNEY FEES	137,451
	MAPPING ACCOUNTING CONSULTANT METER PRODUCTS

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 ►4

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

VIII	Statement o		oonse or note to any lu	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
1a	Federated cam	naigns	La				512-514
b			 lb				
c	Fundraising ev		1c				
d							
	Government grant						
e	_		le				
f	similar amounts no	ons, gifts, grants, and ot included above	1f				
g	Noncash contributi 1a-1f \$	ons included in lines					
h	Total. Add line:	s 1 a - 1 f					
			Business Code				
2a	ELECTRIC SALES		221000	23,945,459	23,945,459		
b	PATRONAGE DIVID	ENDS	221000	1,074,403	1,074,403		
C	SERVICE FEES		221000	209,816	209,816		
d							
e							
f	All other progra	am service revenue					
g	Total. Add lines	s 2a – 2f		25,229,678			
3		ome (including divid ar amounts)		179,522			179,522
4		stment of tax-exempt bo					
5	Royalties .	<u> </u>	🕨				
		(ı) Real	(II) Personal 39,464				
b b	Gross rents Less rental		0				
	expenses Rental income		39,464				
1 .	or (loss)	me or (loss)	, i	39,464			39,464
d	Net rental inco	(i) Securities	(II) O ther	33,101			33,101
7a	Gross amount		(ii) o circi				
	from sales of assets other	630					
ь	than inventory Less cost or						
	other basis and sales expenses	0					
c d	Gain or (loss)	630 (SS)		630			630
8a		rom fundraising		030			030
	events (not inc						
	\$ of contributions	 s reported on line 1c)				
	See Part IV, lir	ne 18	a				
Ь	Less direct ex	penses	ь				
c		(loss) from fundraısır	ng events 🛌				
9a		rom gaming activitie	s				
	See Part IV, III	ne 19	a				
b	Less direct ex	penses	ь				
		(loss) from gaming a	ctivities				
10a	Gross sales of returns and allo						
		а					
1	_	oods sold b					
	Net income or i	(loss) from sales of i	nventory				
11a	i i i sectione ou	o	Dasiness Code				
b							
С							
d	All other reven	ue					
e	Total. Add lines	s 11a-11d					
12	Total revenue.	See Instructions .		25,449,294	25,229,678	0	219,616

	750 (2013)				Page 10
	Statement of Functional Expenses	- 		laha aaluman (A.)	
sectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				.
<u> </u>	Check if Schedule O contains a response or note to any line in this		(B)	(c)	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	640			
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	1,974,151			_
5	Compensation of current officers, directors, trustees, and key employees	269,351			
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	1,277,612			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	241,078			
9	Other employee benefits	410,471			
10	Payroll taxes	122,385			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	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)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,151,849			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,286,746			
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PURCHASED POWER	13,725,135			
b	DISTRIBUTION EXPENSE	1,274,230			
c	ADMIN & GENERAL EXP	777,924			
d	CUSTOMER SERVICE	492,210			
е	All other expenses	257,688			
25	Total functional expenses. Add lines 1 through 24e	25,261,470			
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)				

Form 990 (2013)

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in	this P	art X		_	
		,			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			3,199,994	1	2,103,642
	2	Savings and temporary cash investments				2	_
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,619,407	4	1,616,153
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	of		_		
ts	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	outing employers		5		
Assets	_					6	
AS.	7	Notes and loans receivable, net			29,953	7	26,057
_	8	Inventories for sale or use			625,029	8	704,430
	9	Prepaid expenses and deferred charges	1		4,121,993	9	6,234,185
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	78,894,238			
	b	Less accumulated depreciation	25,272,131	53,432,309	10 c	53,622,107	
	11	Investments—publicly traded securities		11			
	12	Investments—other securities See Part IV, line 11	•		12		
	13	Investments—program-related See Part IV, line 11	•	6,822,299	13	7,694,157	
	14	Intangible assets		•		14	
	15	Other assets See Part IV, line 11			263,217	15	189,203
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			70,114,201	16	72,189,934
	17	Accounts payable and accrued expenses			1,365,142	17	1,464,865
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability Complete Part IV of Sch	edule	o	210,468	21	240,452
Liabilitie	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali		ustees,			
aþ		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s.		45,342,538	23	46,228,633
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	irt X of	Schedule	1,512,705	25	4 507 520
		D			48,430,853	25	1,507,538 49,441,488
	26	Total liabilities. Add lines 17 through 25			46,430,653	26	49,441,466
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	j and	i complete			
<u>5</u>	27	Unrestricted net assets				27	
Ba	28	Temporarily restricted net assets		28			
пd	29	Permanently restricted net assets				29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere 🟲	▽ and			
9	30	Capital stock or trust principal, or current funds			0	30	0
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			0	31	0
	32	Retained earnings, endowment, accumulated income, or other	funds		21,683,348	32	22,748,446
Net	33	Total net assets or fund balances			21,683,348	33	22,748,446
~	34	Total liabilities and net assets/fund balances			70,114,201	34	72,189,934

Par	t XI Reconcilliation of Net Assets				-9
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		25,	149,294
2	Total expenses (must equal Part IX, column (A), line 25)	2		25 '	261,470
3	Revenue less expenses Subtract line 2 from line 1				201,470
_	<u> </u>	3		1	187,824
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		21,6	583,348
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	-			
		6			
7	Investment expenses	7			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)	8			
9	Ctrief Changes in het assets of fullu balances (explain in Schedule O)	9			377,274
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		22.	748,446
Par	t XII Financial Statements and Reporting				/
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
72	Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	i	No
Za	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review	wed on	Za		INO
	a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
Ь	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 sepa basis, consolidated basis, or both	rate			
	✓ 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 oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	j	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

DLN: 93493288010174

OMB No 1545-0047

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

Open to Public Inspection

ame of the organization	Employer identification number					
OCORRO ELECTRIC COOPERATIVE INC						
art I Organizations Maintaining Donor						
organization answered "Yes" to Form 9	990, Part IV, line 6. (a) Donor advised funds	(b) Funds and other accounts				
Total number at end of year	(a) Donor advised funds	(b) Fullus and other accounts				
Aggregate contributions to (during year)						
Aggregate contributions to (during year)						
Aggregate value at end of year						
Did the organization inform all donors and donor ad	visors in writing that the assets held in do	nor advised				
funds are the organization's property, subject to the	e organization's exclusive legal control?	☐ Yes ☐ No				
Did the organization inform all grantees, donors, an used only for charitable purposes and not for the be conferring impermissible private benefit?						
art II Conservation Easements. Complete	e if the organization answered "Yes"	to Form 990, Part IV, line 7.				
Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization he	cion or education) Preservation of a	n historically important land area certified historic structure				
easement on the last day of the tax year						
Tabel worshound annual services and annual services		Held at the End of the Year				
Total number of conservation easements		2a				
Total acreage restricted by conservation easement		2b				
Number of conservation easements on a certified h	` '	2c				
Number of conservation easements included in (c) historic structure listed in the National Register	acquired after 6/17/06, and not on a	2d				
Number of conservation easements modified, trans	ferred, released, extinguished, or terminal	ted by the organization during				
the tax year 🛌						
Number of states where property subject to conser	vation easement is located ►					
Does the organization have a written policy regardi enforcement of the conservation easements it hold		ndling of violations, and Yes No				
Staff and volunteer hours devoted to monitoring, in:	specting, and enforcing conservation ease	ements during the year				
A mount of expenses incurred in monitoring, inspec	ting, and enforcing conservation easemen	ts during the year				
► \$ Does each conservation easement reported on line	2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i)				
and section 170(h)(4)(B)(ii)?		☐ Yes ☐ No				
In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text o the organization's accounting for conservation ease	f the footnote to the organization's financia					
rt III Organizations Maintaining Collecti Complete if the organization answered		, or Other Similar Assets.				
If the organization elected, as permitted under SFA works of art, historical treasures, or other similar a service, provide, in Part XIII, the text of the footno	S 116 (ASC 958), not to report in its revo	, or research in furtherance of public				
If the organization elected, as permitted under SFA works of art, historical treasures, or other similar a service, provide the following amounts relating to t	S 116 (ASC 958), to report in its revenue ssets held for public exhibition, education	e 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, his following amounts required to be reported under SF		for financial gain, provide the				
Revenues included in Form 990, Part VIII, line 1	-	▶ \$				
Assets included in Form 990, Part X		▶ \$				

Part	••• Organizations Maintaining Co	llections of Art	<u>, Hist</u>	tori	<u>cal Ti</u>	<u>reası</u>	<u>ires, or O</u>	the	r Simila	r Asse	ets (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	eck	any of	the fol	lowing that a	are a	sıgnıfıcan	t use of	fıts	
а	Public exhibition		d	Γ	Loan	orexc	:hange progr	ams				
b	Scholarly research		e	Γ	Othe	r						
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın how	the	/ furthe	er the	organızatıon	's ex	empt purp	ose in		
5	During the year, did the organization solicit								ıılar	_		_
Б-	assets to be sold to raise funds rather than t										Yes	No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						n answere	a "Y	es" to Fo	rm 990	U, ——	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	diary	for c	ontrıbı	ıtıons	or other ass	ets r	not	Г	Yes	✓ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ıng t	able		_					
							-			Amo	unt	
С	Beginning balance						-	1c				
d	Additions during the year						_	1d				
е	Distributions during the year						_	1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?							I	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expla	nati	on has	been ¡	provided in F	art :	XIII			굣
Pa	t V Endowment Funds. Complete											
		(a)Current year	(b)	Prior	/ear	b (c) ⊺	wo years back	(d)	Three years	back (e	Four y	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 balanc	e (line	e 1g	colum	n (a))	held as					
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment ▶											
c	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 organiza	ation t	hat a	re hel	danda	admınıstered	d for	the			
	organization by	-									Yes	No
	(i) unrelated organizations			•		•		•		3a(i)		
	(ii) related organizations							•		3a(ii)		<u></u>
	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the					•		•		3b		<u> </u>
4 Dar	t VI Land, Buildings, and Equipme					n anc	worod 'Voc	' to	Form 990) Dart	TV lu	20
- (-)	11a. See Form 990, Part X, line		.116 01	yan	izatioi	ii aiis	wered res		101111 990	J, Fait	17, 111	ic
	Description of property				Cost or s (invest		(b) Cost or of basis (othe		(c) Accum deprecia		(d) Bo	ok value
1a	_and						86	,262		+		86,262
	Buildings							,498	5	89,151		374,347
	_easehold improvements							-		· -		,
	Equipment						77,063	,941	24.6	82,980	5	2,380,961
		·		\vdash			. , , , , , , ,		, 0	,		, ,
~	Other						780	,537				780,537

Part VIII Investments—Other Securities. Com	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)		Cost or end-of-year	market value
(1)Financial derivatives (2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		a answered Weel to Fr	auma 000 Dawk IV lina 11a
Part VIII Investments—Program Related. Cor See Form 990, Part X, line 13.	npiete if the organization	n answered 'Yes' to Fo	orm 990, Part IV, line IIC.
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
See Additional Data Table		Cost of end of year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	7,694,157		
Part IX Other Assets. Complete if the organization			Form 990, Part X, line 15
(a) Descrip	tion		(b) Book value
Tabel (Caluma (b) much and Farm 000 Part V and (D) long 15	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the organ		• • • • • • • • • • • • • • • • • • •	ine 11e or 11f. See
Form 990, Part X, line 25.		·	
1 (a) Description of liability	(b) Book value		
Federal income taxes CONSUMER DEPOSITS	102,690		
ACCRUED COMPENSATED ABSENCES	217,448		
ACCUMULATED PROVISION FOR POST RETIREMENT HEALTH BENEFITS			
ACCRUED TAXES & FRANCHISE FEES	396,958 356,920		
OTHER CURRENT & ACCRUED LIABILITIES	148,745		
DEFERRED CREDITS - UNCLAIMED PATRONAGE CAPITAL RETIREMENTS	284,777		
CALLIAE RETAREPENTS	204,///		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,507,538		

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue the organization answered 'Yes' to Form 990, Part IV, line 12a.	per Re	eturn Complete if
1	Total revenue, gains, and other support per audited financial statements	1	25,456,965
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	7,671
3	Subtract line 2e from line 1	3	25,449,294
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	25,449,294
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses of the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1	Total expenses and losses per audited financial statements	1	23,294,990
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII) 2d 7,671		
e	Add lines 2a through 2d	2e	7,671
3	Subtract line 2e from line 1	3	23,287,319
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	1,974,151
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	25,261,470

Part XIII Supplemental Information

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

Return Reference	Explanation
Part IV, Line 2b	PURSUANT TO THE ARTICLE VIII, SECTIONS 3 THROUGH 5 OF THE COOPERATIVE'S BYLAWS, THE COOPERATIVE SHALL TRANSFER RETIREMENTS OF PATRONAGE CAPITAL, WHICH HAVE REMAINED UNCLAIMED FOR A PERIOD OF TWO YEARS, TO SOCORRO ELECTRIC FOUNDATION (THE FOUNDATION), A TAX-EXEMPT CHARITABLE TRUST ANY MEMBER MAY ALSO IRREVOCABLY ASSIGN ALL OR A PORTION OF HIS/HER CAPITAL CREDITS TO THE FOUNDATION AMOUNTS TRANSFERRED TO THE FOUNDATION ARE USED FOR (1) SCHOLARSHIPS TO ENABLE SELECTED STUDENTS TO ATTEND COLLEGE, TECHNICAL SCHOOL OR OTHER POST SECONDARY EDUCATION INSTITUTION AND (2) OTHER EDUCATIONAL OPPORTUNITIES AND CHARITABLE PURPOSES AS PROVIDED FOR IN THE FOUNDATION'S TRUST AGREEMENT A PORTION OF THESE UNCLAIMED CAPITAL CREDITS PAYMENTS ARE MAINTAINED IN A DESIGNATED ACCOUNT HELD BY THE COOPERATIVE
Part X, Line 2	THE COOPERATIVE HAS ADOPTED THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA THE PRIMARY TAX POSITION OF THE COOPERATIVE IS ITS FILING STATUS AS A TAX EXEMPT ENTITY THE COOPERATIVE DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT ITS TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE, AND THAT ALL TAX BENEFITS ARE LIKELY TO BE REALIZED UPON SETTLEMENT WITH TAXING AUTHORITIES
Part XI, Line 2d - Other Adjustments	EXPENSES RECORDED IN NON-OPERATING MARGINS RECLASSIFIED TO EXPENSES 7,671
Part XII, Line 2d - Other Adjustments	EXPENSES RECORDED IN NON-OPERATING MARGINS RECLASSIFIED TO EXPENSES 7,671
Part XII, Line 4b - Other Adjustments	PATRONAGE CAPITAL ASSIGNABLE 1,974,151
Part IX	THE AMOUNT OF OTHER ASSETS ON FORM 990, PAGE 11, PART X, LINE 15 DOES NOT EQUAL OR EXCEED 5 PERCENT OF THE TOTAL ASSETS ON FORM 990, PAGE 11, PART X, LINE 16, COLUMN B CONSEQUENTLY IN ACCORDANCE WITH IRS INSTRUCTIONS SCHEDULE D, PART IX HAS BEEN LEFT BLANK
Part XII, Line 4B	FOR THE AUDITED FINANCIAL STATEMENTS, THE AMOUNT OF PATRONAGE DIVIDENDS PAID OR ALLOCATED TO THE MEMBERS IS REPORTED AS AN INCREASE IN EQUITY AND NOT AS AN EXPENSE THEREFORE, NET INCOME PER THE AUDITED FINANCIAL STATEMENTS IS REPORTED GROSS OF THE AMOUNT OF PATRONAGE DIVIDENDS THAT ARE EITHER ALLOCATED OR TO BE ALLOCATED AT THE TIME THE AUDITED FINANCIAL STATEMENTS ARE PREPARED HOWEVER, BECAUSE THE ALLOCATION OF PATRONAGE DIVIDENDS IS ONE ASPECT OF HOW THE COOPERATIVE FULFILLS ITS TAX EXEMPT PURPOSE OF OPERATING ON A COOPERATIVE BASIS, THE AMOUNT OF PATRONAGE DIVIDENDS EITHER ALLOCATED OR TO BE ALLOCATED TO THE MEMBERS IS REPORTED ON FORM 990, PART IX, LINE 4 AS "BENEFITS PAID TO MEMBERS" PATRONAGE DIVIDENDS ARE ALLOCATED ON A PATRONAGE BASIS AND DONE SO PURSUANT TO A PRE-EXISTING OBLIGATION AS PROVIDED FOR IN THE "NON-PROFIT OPERATION" ARTICLE OF THE COOPERATIVE'S BYLAWS

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

Schedule D (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 85-0084968

Name: SOCORRO ELECTRIC COOPERATIVE INC

Form 990, Schedule D, Part VIII - Investments Program Related

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) PATRONAGE CAPITAL - NRUCFC	184,581	С
(2) PATRONAGE CAPITAL - FEDERATED INSURANCE	199,992	С
(3) PATRONAGE CAPITAL - SEDC	99,297	С
(4) PATRONAGE CAPITAL - TRI-STATE	6,562,809	С
(5) PATRONAGE CAPITAL - WUESC	75,718	С
(6) PATRONAGE CAPITAL - COBANK	57,125	С
(7) CAPITAL TERM CERTIFICATES - NRUCFC	504,406	С
(8) MEMBERSHIPS - NRUCFC	1,000	С
(9) NOTES RECEIVABLE - WEATHERIZATION LOANS	6,966	С
(10) OTHER INVESTMENTS	2,263	С

DLN: 93493288010174

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Name of the organization SOCORRO ELECTRIC COOPERATIVE INC **Employer identification number**

85-0084968

Pai	t I Questions Regarding Compensation					
			Yes	No		
1a	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					
	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	If any of the boxes in 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, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					
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 committee ✓ Written employment contract					
	Form 990 of other organizations A pproval 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?	4a		Νo		
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo		
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo		
	If "Yes" to any of lines 4a-c, list the persons and 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	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					
а	The organization?	5a		<u> </u>		
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b				
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					
а	The organization?	6a				
b	Any related organization?	6b				
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7				
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III					
_		8				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9				

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

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

Note. The sum of columns (B)(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 of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation			reported as deferred in prior Form 990
	(i) (ii)	146,171 0	182 0	0 0	19,619 0	20,811 0	186,783 0	0

Schedule J (Form 990) 2013

Part III 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

The complete the parties any addition									
Return Reference	Explanation								
	INCLUDED IN THIS AMOUNT IS THE INCREASE IN ACTUARIAL VALUE OF BENEFITS PAYABLE UNDER A DEFINED BENEFIT RETIREMENT PLAN THE CONTRIBUTION RATE FOR PARTICIPANTS IN THE NRECA R&S DEFINED BENEFIT PENSION PLAN ARE THE SAME FOR ALL INDIVIDUALS IN THIS MULTI-EMPLOYER PLAN THE CHANGE IN ACTUARIAL VALUE FOR EACH PARTICIPANT, HOWEVER, VARIES WITH AGE, YEARS OF SERVICE AND THE CURRENT INTEREST RATE ENVIRONMENT IN OTHER WORDS, THE OLDER A PLAN PARTICIPANT IS, THE GREATER THE INCREASE IN THAT INDIVIDUAL'S CHANGE IN ACTUARIAL VALUE, ALL OTHER THINGS BEING EQUAL BECAUSE THIS RELATES TO A MULTI-EMPLOYER PLAN, CASH CONTRIBUTIONS TO THE PLAN IN LIEU OF THE ACTUARIAL INCREASE ARE EXPENSED IN THE FINANCIAL STATEMENTS AND REPRESENT THE TRUE COST TO THE COOPERATIVE JOSEPH HERRERA ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$9,413 401(K) EMPLOYER MATCH 10,206 TOTAL COLUMN C 19,619 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (9,413) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 25,056 TOTAL COOPERATIVE CASH CONTRIBUTION \$35,262								

Schedule J (Form 990) 2013

DLN: 93493288010174

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

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Name of the or SOCORRO ELECTR	ganization IC COOPERATIVE	INC					l I	mploy	er ident	tificatio	n numbe	r
									84968			
	ess Benefit		•		•	, , , ,	_		•	,	401	
	olete if the orga				disqualified	(c) Des					40b (d) Corr	contod?
1 (a) Name of disqualified person				n and organiz		(c) Des	Cription	ollia	iisactioi	" ⊦	Yes	No
			F							-	Tes	110
										+		
										-		
2 Enterthe a	amount of tax 11	ncurred by or	ganızatıon r	nanagers or	disqualified pe	rsons during	the yea	r unde	rsectio	n		
4958 .									F \$			
3 Enter the a	amount of tax, i	fany, on line	2, above, re	eimbursed by	the organizat	ion			F \$			
Part II Lo	ans to and	or From T	ntorosto	d Dorsons								
	mplete if the or					/ , line 38a , or	Form 9	90.Pa	art IV.	ıne 26,	orıfthe	
	i janization repo											
(a) Name of	(b)	(c)	(d) Loan	1 1		(f)Balance	1 1		(h)		(i)Written	
ınterested person	Relationship with	Purpose of loan	or from th		principal amount	due	defaul	t?	A pproved by		agreen	nent?
person	organizatio	louii	Jorganizatio						board			
									or			
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		+	То	From			Yes	No	Yes	No	Yes	No
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Total	l .	<u></u> ► \$	1		1			1			7	
Part IIII Gra	ants or Assi	stance Be	nefitting	Intereste	d Persons.				1			
Coi	mplete if the	organızatıo	n answere	d "Yes" on	Form 990, P	art IV, line :	27.					
(a) Name of ir		b) Relationsh			nt of assistanc	e (d) Typ	e of ass	istand	e (e	Purpo	se of ass	istance
perso	n ir	terested pers organiza										
		Organiza	1011									

Part IV Business Transactions					
Complete if the organization	on answered "Yes" on I	Form 990, Part IV, lin	ie 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	f zatıon':
				Yes	No
(1) TRI-STATE GENERATION AND TRANSMISSION ASSOCIATION INC	BOARD MEMBER DONALD WOLBERG SERVES ON TRI- STATE G&T'S BOARD		THE COOPERATIVE PURCHASES ITS POWER FROM TRI-STATE GENERATION AND TRANSMISSION ASSOCIATION, INC		No
			·		

Part V Supplemental Information

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

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493288010174

OMB No 1545-0047

2013

Open to Public Inspection

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.

Employer identification number Name of the organization SOCORRO ELECTRIC COOPERATIVE INC 85-0084968

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	THE COOPERATIVE WAS FORMED BY THE MEMBERS TO PROVIDE ELECTRIC SERVICE AT COST ON A COOPERATIVE BASIS

Return Reference	Explanation
	THE MEMBERS OF THE COOPERATIVE VOTE ON THE BOARD OF TRUSTEES AND DO SO ON A VOTING DISTRICT BY VOTING DISTRICT BASIS EACH MEMBER WITHIN THE VOTING DISTRICT IS ENTITLED TO ONE VOTE DURING ELECTIONS REGARDLESS OF THE VALUE OR QUANTITY OF COOPERATIVE SERVICES USED

Return Reference	Explanation
	THE FOLLOWING ACTS REQUIRE APPROVAL OF THE MEMBERS OF THE COOPERATIVE 1 DISSOLUTION/LIQUIDATION OF THE COOPERATIVE 2 MERGER OR CONSOLIDATION OF THE COOPERATIVE WITH ANOTHER ORGANIZATION 3 THE DISPOSAL OF A SUBSTANTIAL PORTION OF THE COOPERATIVE'S ASSETS 4 AMENDMENTS TO THE BY-LAWS AND ARTICLES OF INCORPORATION

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	MANAGEMENT PRESENTED A COPY OF THE FORM 990 TO THE BOARD FOR DISCUSSION, REVIEW AND APPROVAL PRIOR TO FILING. THE DISCUSSION AND REVIEW WAS PERFORMED AT THE BOARD MEETING IMMEDIATELY BEFORE FILING. THE FORM 990

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	OFFICERS ARE REQUIRED TO REVIEW AND BE FAMILIAR WITH THE POLICIES OUTLINED IN THE COOPERATIVE'S CONFLICT OF INTEREST POLICY OFFICERS ARE REQUIRED TO DISCLOSE ANY ACTION OR SITUATION THAT MIGHT VIOLATE THE POLICY TO THE FULL BOARD OF TRUSTEES AS SOON AS POSSIBLE ADDITIONALLY, THE BY-LAWS DISQUALIFY A TRUSTEE FROM SERVING ON THE BOARD, INCLUDING BUT NOT LIMITED TO, IF HE/SHE (1) IS EMPLOYED BY OR INVESTS IN A COMPETING BUSINESS, (2) IS AN ELECTED PUBLIC OFFICIAL AND (3) HAS A FAMILY RELATIONSHIP WITH ANOTHER TRUSTEE/OFFICER OR EMPLOYEE OF THE COOPERATIVE

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	WHEN DETERMINING THE COMPENSATION OF THE GENERAL MANAGER, THE BOARD OF DIRECTORS USES AN ANNUAL, INDEPENDENT COMPENSATION SURVEY SHOWING COMPARATIVE SALARIES FOR GENERAL MANAGERS FROM SIMILARLY SITUATED COOPERATIVES LOCATED IN NEW MEXICO AND THE NATION INTERNAL RESOURCES ARE ALSO USED TO OBTAIN COMPENSATION DATA FOR GENERAL MANAGERS OF OTHER ELECTRIC COOPERATIVES LOCATED IN THE COOPERATIVES GEOGRAPHIC REGION A WRITTEN EMPLOY MENT CONTRACT IS ALSO UTILIZED ADJUSTMENTS TO COMPENSATION ARE DELIBERATED AND APPROVED BY THE BOARD OF DIRECTORS THE BOARD AND THE GENERAL MANAGER USE A COMPENSATION SURVEY WHEN DETERMINING THE COMPENSATION OF THE COOPERATIVES OTHER EMPLOYEES MEETING THE DEFINITION OF OFFICER AND KEY EMPLOYEES, IF ANY THE SURVEY INCLUDES SALARIES FROM SIMILARLY SITUATED COOPERATIVES THROUGHOUT NEW MEXICO AND THE NATION

Return Reference	Explanation
Form 990, Part VI, Section C, line 19	THE COOPERATIVE POSTS THE COOPERATIVES BY-LAWS, ARTICLES OF INCORPORATION AND, A COPY OF THE MOST RECENTLY COMPLETED AUDITED FINANCIAL STATEMENTS ON THE COOPERATIVES WEBSITE. PURSUANT TO THE AMENDMENT TO ARTICLE VI, SECTION 5 AS ADOPTED BY THE MEMBERS IN APRIL 2010, THE COOPERATIVE VOLUNTARILY AGREES TO ABIDE BY THE REQUIREMENTS OF THE OPEN MEETING ACT AND THE INSPECTION OF PUBLIC RECORDS ACT

Return Reference	Explanation
Form 990, Part VI, Line 1b	THE COOPERATIVE IS A MEMBER OF AND PURCHASES ELECTRIC ENERGY FROM TRI-STATE GENERATION AND TRANSMISSION ASSOCIATION, INC (TRI-STATE), A TAXABLE COOPERATIVE AS A MEMBER OF TRI-STATE, THE COOPERATIVE APPOINTED DIRECTOR DONALD WOLBERG TO REPRESENT ITS INTERESTS ON THE BOARD OF TRI-STATE DURING 2013 BECAUSE DIRECTOR WOLBERG SERVED ON THE BOARD OF TRI-STATE, HE IS CONSIDERED TO BE "NOT INDEPENDENT" PER IRS FORM 990 INSTRUCTIONS HOWEVER, DIRECTOR WOLBERG HAD NO OWNERSHIP INTEREST IN TRI-STATE AND RECEIVED NO DIRECT OR INDIRECT BENEFIT FOR THE COOPERATIVE DOING BUSINESS WITH TRI-STATE

Return Reference	Explanation
Form 990, Part VI, Section A, Line 1	THE COOPERATIVE HAS 7 TRUSTEES, ALL 7 ARE ALLOWED TO VOTE. HOWEVER, THE BOARD PRESIDENT VOTES ONLY IN THE CASE OF A TIE.

Return Reference	Explanation
Form 990, Part VII, Column F	IN ORDER TO PROVIDE RETIREMENT BENEFITS TO ITS EMPLOYEES, THE COOPERATIVE HAS ESTABLISHED A DEFINED CONTRIBUTION PLAN UNDER SECTION 401(K) OF THE INTERNAL REVENUE CODE. AS PART OF THE PLAN DOCUMENT, THE COOPERATIVE PROVIDES A MATCHING CONTRIBUTION UP TO 7% OF A PARTICIPATING EMPLOYEE'S SALARY ADDITIONALLY, THE COOPERATIVE PARTICIPATES IN A MULTI-EMPLOYER DEFINED BENEFIT PLAN CONTRIBUTIONS TO THIS PLAN ARE BASED ON THE FULL FUNDING LIMITATION OF SUCH PLAN EMPLOYER CONTRIBUTIONS FOR BOTH PLANS ARE AVAILABLE TO PARTICIPATING EMPLOYEES, INCLUDING OFFICERS, MEETING THE ELIGIBILITY REQUIREMENTS OF SUCH PLANS THE COOPERATIVE ALSO PROVIDES HEALTH, DENTAL, VISION AND LIFE INSURANCE TO ALL EMPLOYEES, INCLUDING OFFICERS, THROUGH A QUALIFIED PLAN THE AMOUNTS REPORTED ON PART VII, COLUMN (F) FOR THE OFFICER IS COMPRISED OF THE ACTUARIAL INCREASE IN THE DEFINED BENEFIT PLAN FOR THE OFFICER, THE TOTAL AMOUNT CONTRIBUTED TO THE 401(K) PENSION PLAN AND THE INSURANCE PREMIUMS PAID FOR THE BENEFIT OF THE OFFICER IN ADDITION TO THE ABOVE PENSION PLANS, THE COOPERATIVE ALSO PROVIDES POST-RETIREMENT HEALTH INSURANCE BENEFITS THROUGH AN UNFUNDED WELFARE BENEFIT PLAN THE PER PERSON VALUE OF THESE BENEFITS HAS NOT BEEN ESTIMATED

Return Reference	Explanation
Form 990, Part VIII, Line 2	PATRONAGE DIVIDENDS RESULT FROM THE PURCHASE OF WHOLESALE POWER FROM A GENERATION & TRANSMISSION COOPERATIVE PATRONAGE DIVIDENDS ALSO RESULT FROM THE PAYMENT OF INTEREST FROM COOPERATIVE BANKS AND THE PURCHASE OF SUPPLIES AND SERVICES FROM OTHER COOPERATIVE ORGANIZATIONS THE EXPENSES ASSOCIATED WITH PURCHASES FROM AND PAYMENTS TO SUCH COOPERATIVE ORGANIZATIONS ARE A DIRECT COMPONENT OF THE COST OF THE ELECTRIC SERVICE PROVIDED BY THE COOPERATIVE TO ITS MEMBERS

Return Reference	Explanation
Form 990, Part IX	THE ACCOUNTING RECORDS OF THE COOPERATIVE ARE MAINTAINED IN ACCORDANCE WITH THE UNIFORM SYSTEM OF ACCOUNTS AS PRESCRIBED BY THE FEDERAL ENERGY REGULATORY COMMISSION FOR CLASS A AND B ELECTRIC UTILITIES MODIFIED FOR ELECTRIC BORROWERS OF THE RURAL UTILITIES SERVICE(RUS) THE UNIFORM SYSTEM OF ACCOUNTING DOES NOT RECORD EXPENSES IN THE GENERAL EXPENSE CATEGORIES PROVIDED ON PART IX LINES 1 - 23 THE COOPERATIVE WILL BREAK OUT SALARIES AND WAGES, EMPLOYEE BENEFITS AND PAYROLL TAXES THAT ARE ALLOCATED IN ACCORDANCE WITH THEIR ACCOUNTING SYSTEM, BUT OTHER EXPENSES THAT ARE DESCRIBED IN LINES 1 - 23 WILL BE REPORTED ON LINE 24 UNDER THE EXPENSE CATEGORIES REQUIRED BY THE UNIFORM SYSTEM OF ACCOUNTS

Return Reference	Explanation
Form 990, Part IX, Lines 5-7	SALARIES AND WAGES ARE ALLOCATED TO ASSET, LIABILITY, AND EXPENSE ACCOUNTS BASED ON THE ACCOUNTING SYSTEM DESCRIBED ABOVE. IN AN EFFORT TO EXPLAIN WHY THE AMOUNTS REPORTED ON LINES 5-7 DO NOT AGREE TO THE TOTAL WAGES ACCRUED AND/OR PAID THE FOLLOWING RECONCILIATION IS PROVIDED. TOTAL PER LINES 5-7 \$1,546,963 LESS DIRECTORS FEES REPORTED ON 1099-MISC (37,051) LESS OFFICERS BENEFITS REPORTED ON LINE 5 (49,055) PLUS SALARIES AND WAGES ALLOCATED TO ASSET ACCOUNTS 718,427 TOTAL WAGES ACCRUED AND/OR PAID \$2,179,284

Return Reference	Explanation
IX, Line 24	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS ADMINISTRATIVE AND GENERAL EXPENSE ON FORM 990, PART IX, LINE 24 OFFICE SUPPLIES AND EXPENSE \$ 96,228 OUTSIDE SERVICES EMPLOYED 336,851 DISTRICT MEETING EXPENSES 60,036 REGULATORY COMMISSION EXPENSE 4,345 ASSOCIATION DUES 82,853 ANNUAL MEETING EXPENSE 71,574 DIRECTOR EXPENSES 29,381 MAINTENANCE OF GENERAL PLANT 91,491 MISCELLANEOUS GENERAL EXPENSE 23,522 TOTAL ADMINISTRATIVE AND GENERAL EXPENSE PER 990 \$796,281

Return Reference	Explanation
Form 990, Part IX, Line 24e	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS OTHER EXPENSES ON FORM 990, PART IX, LINE 24E. TAXES EXPENSE \$147,502 SALES EXPENSE 17,097 OTHER DEDUCTIONS 93,089 TOTAL OTHER EXPENSES PER FORM 990 LINE 24E \$257,688

Return Reference	Explanation
Form 990, Part IX, Line 4	THE FORM 990 INSTRUCTIONS SPECIFICALLY STATE THAT THE AMOUNT OF PATRONAGE DIVIDENDS PAID TO THE MEMBERS SHOULD BE REPORTED ON PART IX, LINE 4 THE PHPRASE "PATRONAGE DIVIDENDS PAID" REPERS TO THE PROCESS, SUBSEQUENT TO YEAR PRUB, BY WHICH THE COOPERATIVE STAX EXEMPT PURPOSE IS TO PROVIDE ELECTRICITY TO ITS MEMBERS AND TO DO SO ON A COOPERATIVE BASIS TAX LAW DEFINES "OPERATING ON A COOPERATIVE BASIS" AS SUBGROINATION OF CAPITAL, DEMOCRATIC CONTROL, AND OPERATION AT COST THE COOPERATIVE OPERATES AT COST THROUGH THE ALLOCATION OF TRUE PATRONAGE DIVIDENDS (ALSO REFERRED TO AS ALLOCATIONS OF PATRONAGE CAPITAL) TO ITS MEMBERS PATRONAGE DIVIDENDED BY DEPORT OF THE COOPERATIVE OPERATES AT COST THROUGH THE ALLOCATION OF TRUE PATRONAGE DIVIDENDS (ALSO REFERRED TO AS ALLOCATIONS OF PATRONAGE CAPITAL) TO ITS MEMBERS PATRONAGE DIVIDENDS ARE CONSIDERED PAID IF THE ALLOCATION IS MADE (1) PURSUANT TO A PRE-EXISTING OBLIGATION, (2) FROM THE MARGINS PRODUCED FROM THE TRANSACTIONS DONE WITH OR FOR MEMBERS, AND (3) IN A FAIR AND EQUITABLE BASIS ON THE BASIS OF PATRONAGE (I E PURCHASES). ADDITIONALLY, THE COOPERATIVES YEAR-BND OF DECEMBER 31 EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE DIVIDEND SHOULD BE MADE WITHIN A REAS ONABLE TIME PERIOD AFTER THE CLOSE OF THE COOPERATIVES YEAR-BND OF DECEMBER 31 EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE DIVIDEND IS PROVIDED FOR IN THE NON-PROFIT OPERATION ARTICLE OF THE COOPERATIVES BY LAWS AND IS SUMMARIZED AS FOLLOWS (A) IN ORDER TO INDUCE PATRONAGE AND TO ASSUME THAT THE COOPERATIVE WILL OPERATE ON A NON-PROFIT BASIS, THE COOPERATIVE IS OBLIGATED TO ACCOUNT ON A PATRONAGE BASIS TO ALL ITS MEMBERS FOR ALL AMOUNTS RECOIVED AND RECEIVED AND RECEI

Return Reference	Explanation
Form 990, Part XI, line 9	OTHER COMPREHENSIVE INCOME - PROVISION FOR PENSION & BENEFITS 30,300 RETIREMENTS OF PATRONAGE CAPITAL -1,127,177 PATRONAGE CAPITAL ASSIGNABLE 1,974,151

Return Reference	Explanation
Form 990, Part XII, Line 2c	THE BOARD AS A WHOLE IS RESPONSIBLE FOR OVERSEEING THE FINANCIAL STATEMENT AUDIT AND SELECTING THE INDEPENDENT FINANCIAL STATEMENT AUDITOR

DLN: 93493288010174

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.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization SOCORRO ELECTRIC COOPERATIVE INC Employer identification number

85-0084968

				•			
Part I Identification of Disregarded Entities Con		answered "Yes" or	n Form 990, Pa	irt IV, line 33.			
(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Org or more related tax-exempt organizations duri	anizations Complete if ng the tax year.	the organization ar	I nswered "Yes"	on Form 990, P	art IV, line 34 because it	had on	ie
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity s (if section 501(d	status Direct controlling entity	cont	(13) rolled tity?
(1) SOCORRO ELECTRIC FOUNDATION PO BOX H SOCORRO, NM 878010278 23-7044964	PROVIDE SCHOLARSHIPS & EDUCATIONAL OPPORTUNITIES IN THE COOP'S SERVICE AREA	NM	501(c)(3)	PF	SOCORRO ELECTRIC COOPERATIVE INC	Yes Yes	No
							<u> </u>

(a) Name, address, and EIN of related organization		(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging :ner?	(k) Percentag ownersh
					314)			Yes	No	1	Yes	No	
V Identification of Related Org								were	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share e of	(g) e of end- year ssets		(h) ercentage ownership	Section (b) cont	i) on 512 (13) rolled tity?	!
					1				_		Yes		No
					_	+			_				+

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

No

Yes

1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more re	elated organızatıons lı	sted in Parts II-IV?							
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
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		No			
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)				1 g		No			
h	h Purchase of assets from related organization(s)									
i	i Exchange of assets with related organization(s)									
j	j Lease of facilities, equipment, or other assets to related organization(s)									
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)									
o	Sharing of paid employees with related organization(s)				10		No			
р	Reimbursement paid to related organization(s) for expenses				1р		No			
q	Reimbursement paid by related organization(s) for expenses				1q	Yes				
r	Other transfer of cash or property to related organization(s)				1r		No			
s	Other transfer of cash or property from related organization(s)				1s		No			
	If the answer to any of the above is "Yes," see the instructions for information on who must complete		T							
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount i	nvolved				
(1) SO	DCORRO ELECTRIC FOUNDATION - NA LESS THAN 50000	N								
(2) SC	CORRO ELECTRIC FOUNDATION - NA LESS THAN 50000	Q								
(3) SC	DCORRO ELECTRIC FOUNDATION - NA LESS THAN 50000	L								

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 regarding exclusion for certain investment partnerships													
(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>				l					<u> </u>	

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Part VII Supplemental Information

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

Return Reference Explanation

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