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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.

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

Α	For the 2	2014 cale	endar year, or tax year	beginning	January 1	, 2014,	and endin	g Decem	nber 31	, 20 14	
В	Check if a	pplicable	C Name of organization D	ixie Electric	Power Associat	tion			D Employ	er identification ni	umber
	Address c	hange	Doing business as							64-0183177	
٦	Name cha	nge	Number and street (or P	O box if mail	s not delivered to s	treet address)	Room/su	ite	E Telepho	ne number	
╗	Initial retur	•	PO Box 88							601-425-2535	
\equiv	Final return		0	ovince, country	, and ZIP or foreign	postal code		··· •		****	
Ħ	Amended		Laurel, MS 39441			•		ì	G Gross re	eceints \$ 10	1,963,948
\exists			F Name and address of pri	nocinal officer	Ralph R. Smit	<u> </u>		H(a) is the 2 or		subordinates? Yes	
	Application	n penaing	1	meipai omeei	Kaipii K. Siiik	•		1		es included? Yes	
	T	-1 -1-1	Same As Above	✓ 501(c) (12) ◀ (insert no)	4947(a)(1) or	527			a list (see instruction	
<u>'-</u>	Tax-exem			50 (c) ((Insert no)	4947(a)(1) Or	321	H(c) Group		•	-,
J	Website:		w dixieepa.com Corporation Trust		n	I v	ear of formal		1 		
_				Associatio	11 Uther		ear or lormal	tion 1938	IM State	of legal domicile	MS
	art I	Summ				laant aatuutias	o. Durin F	Instrin Bowe	. ^	trivos to 1) Drov	
•		•	escribe the organization		=						
Activities & Governance			electrical system 2) Su								
Б			ironment for its emplo								dvances.
Š			nis box ▶ 🗌 if the orga				disposed (of more than		its net assets.	
ၓ	1		of voting members of	_	_				3		7
ජ ග	1		of independent voting	-	-				4		7
ţį	5	Fotal nui	mber of individuals en	nployed in d	calendar year 2	014 (Part V, Im	ne 2a) .		5		103
Ę	1		mber of volunteers (es						6		0
¥	7a 7	Total uni	related business rever	nue from Pa	rt VIII, column	(C), line 12			7a		0
	1 d	Net unre	lated business taxabl	e income fr	om Form 990-1	, line 34 .			7b		0
Revenue								Prior Ye	ar	Current Ye	ear
	8 (Contribu	itions and grants (Part	t VIII, line 1h	1)		[0		0
			service revenue (Par				[95	,660,343	10	1,721,981
		_	ent income (Part VIII, d			7d)	[· · · · · · · · · · · · · · · · · · ·	329,208	Ĭ	221,500
ď			venue (Part VIII, colun				_		-20,684	1	20,467
	1		enue-add lines 8 thro					95	,968,867		1,963,948
			and similar amounts p						19,078		18,299
			paid to or for membe		,966,626	T	5,194,199				
	1		other compensation, e						,460,580	i -	7,113,387
Expenses	16a		onal fundraising fees						0.00 ,000,	Ĭ	7,113,367
ē	loa i									 	<u>_</u>
Ä	b		ndraising[expenses](2				 		500 500		
	17	Other ex	penses (Part IX, colur	mn (A), lines	11a-110, 111-	·24e)	-		,522,583	1	9,638,063
	18	ı otal exp	perises. Add lines 13-	-RY(Qunzile	auai Part IX, co	iumn (A), iine 2	23) .	95	<u>,968,867</u> -		1,963,948
	†	Revenue	e less experises. Subt	ract line 18	mpm line 12 .	· · ·		Beginning of Cu	0		
Sor			0	271	· [<u> </u>		 	
Sset	20	Total as	sets (Part X71ine/16)	<u> </u>					,307,931	 	2,279,099
Net Assets or	21		bilitles-(Part-X, line 26)						,012,628	1	4,584,694
_			ets or fund balances.	Subtract lin	e 21 from line 2	<u> </u>	<u> </u>	84	,295,303	8	7,694,405
_	art II		ture Block								
Ur	nder penalt	ies of perj	ury, I declare that I have exa	amined this ret	urn, including acco	mpanying schedul	les and state	ements, and to the	he best of	my knowledge and	f belief, it is
	ie, correct,	and comp	plete Beclaration of prepare	(Other man o	incervis based on a		mich prepare	- I nas any knowi	euge	1000	
		1 2	CORPL	m	m_				<u>¥/</u>	11/0015	
Sig	gn	Sigi	pature of officer	<u> </u>	-11		, N	2a a Ba		•	
He	ere	\ \L	ALYH L.	SMI1	H (KNERK	<u> </u>	KND GE			
			e or print name and title								
p:	aid	Print/T	ype preparer's name	P	reparer's signature		D	ate	Check	☐ if PTIN	
_	eparer	, L							self-em		
	se Only	1	name 🕨					Firn	n's EIN ▶		
U:	e OIII)	,	address ▶						ne no		
Ma	y the IR	_	s this return with the	preparer sh	own above? (s	ee instructions	s)			🔲 Ye:	s 🗌 No
	<u> </u>		uction Act Notice, see t	 				No. 11282Y			990 (2014



Part	Checklist of Required Schedules		V	
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	Yes	No /
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		√
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		→
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		1
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		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
	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		1
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		✓
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		
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	11e	√	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		/
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		/
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	
		For	m 99 0	(2014)

Part	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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 "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		
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	<u> </u>	1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
		For	m 99 0	(2014)

Part '	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			i
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			ı İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	-10		1
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 103			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	-	·'
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	4a		 ,
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			İ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		ĪĪ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7 a	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			
a	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
Ū	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources			
-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	L	L -'
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			İ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ــــــ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		 :
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	· · · ·	1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		Ė
		For	n 990	(2014)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	iee ins	for a struct	ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u>···</u>	•	. 🗸
Secti	on A. Governing Body and Management			
		$\overline{}$	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
_	committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 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		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	•	/
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6	\	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	1	
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	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	√	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		l Na
40	Dilling and the barrier bearing bearing bearing	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		
110	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		├──
11a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	-	
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	1	├ ──┘
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	7	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14	1	
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	1	
b	Other officers or key employees of the organization	15b	1	ļ
16a				
	with a taxable entity during the year?	16a	<u> </u>	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	401		ا
Saati	on C. Disclosure	16b	L	L
17	List the states with which a copy of this Form 990 is required to be filed ► NA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	າ 501((c)(3)s	only)
	☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re Aaron Zumwalt 1863 Hwy 184E Laurel, MS 39443	cords	:▶	<u> </u>

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization	n nor any relate	d org	aniz	atio	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
				(0	> }					
(A)	(B)	,		Pos				(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (list any hours for	익절	Ins	Off	Ke	en E	Former	from the	related organizations	other compensation
	related	direc	titut	Officer	Key employee	ploy	mer	organization	(W-2/1099-MISC)	from the
	organizations below dotted	of E	iona		oldı	8 2	,	(W-2/1099-MISC)		organization and related
	line)	Individual trustee or director	a a		yee	npe		1		organizations
		8	Institutional trustee			Highest compensated employee				
						8				
(1) Mack Mauldin	3									
Director-President		✓						19,297	0	0
(2) Michael Shows	2									
Director-Vice President		1	L			<u> </u>		10,640	0	. 0
(3) Robert Smith	3.5									
Director-Secretary Treasurer		/	_				_	8,838	0	0
(4) Allen Sledge	3.5									
Director-Alt. Secretary Treasurer		/	<u> </u>					8,704	0	0
(5) Robin Robinson	1.5									
Director		/	├	<u> </u>	_			9,529	0	0
(6) H.E. Ramey	1.5	_	ł							_
Director		✓	<u> </u>	_	<u> </u>		 	17,653	0	0
(7) Albert Hutto	2.5	/						17.550		
Director (9)		- - -	-				├	17,550	0	0
(8) Ralph R. Smith	40	ł		1		İ		452.042		00.004
General Manager	39		├	╅		-	 	153,843	0	98,394
(9) Aaron Zumwalt Administration & Finance Manager		1				/		106,430	0	27,662
(10) June Doggett	-		<u> </u>	<u> </u>		Ť		100,430	<u>_</u>	27,002
Former Director		1					1	10,011	0	0
(11)				_	\vdash		Ė	10,011		
										<u> </u>
(12)										
(13)										
(14)				\vdash	\vdash					
		<u>L.</u>	<u> </u>							

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighe	st C	ompensated E	mployees (continue	d)		
					-	C)								
	(B)	Position (do not check more than o					one	(D)	(E)			(F)		
	Name and title	Average hours per			•		is both		Reportable compensation	Reportable compensation			mated ount of	
		week (list any			_		or/trust	-	from	related		0	her	
		hours for related	Individual trustee or director	Institutional trust	Officer	Key employee	Highest compensated employee	Former	the organization	organizatio (W-2/1099-M			ensatio n the	n
		organizations	dua	i or	ig.	du	st c	역	(W-2/1099-MISC)	(** 27.1000 **		organ	nization	
		below dotted line)	, 5	nal tr		oye	duo						related ization	
			stee	uste		Ü	ens		,,				-	-
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(20)					ŀ									
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(23)														
(0.4)					_	-		\vdash						
(24)														
(25)	···							†						
3			İ			į								
1b	Sub-total							>	362,495				12	26,056
С	Total from continuation sheets to Part	•						>						
	Total (add lines 1b and 1c)							<u> </u>	362,495				12	26,056
2	Total number of individuals (including but reportable compensation from the organization)		to th	ose	e list	ted	abov	e) w	ho received m	ore than \$1	00,000	of		
	reportable compensation from the organi	zation > 2											Yes	No
3	Did the organization list any former of	ficer, direc	tor, c	or tr	ust	ee,	key (emp	oloyee, or high	est compe	ensated			
	employee on line 1a? If "Yes," complete						-					3	/	
4	For any individual listed on line 1a, is the													
	organization and related organizations	-								nedule J fo	r such			
_	Individual									 •		4	✓	
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc	ividuai	5		
Section	on B. Independent Contractors	, , , , ,	.می		-		3.00		oddii paradii	<u>· · · · · </u>		, J		✓
1	Complete this table for your five highest	compensat	ed in	dep	end	ent	contr	ract	ors that receive	ed more tha	n \$100.	000 of		
•	compensation from the organization Rep													ax
	year.					_								
	(A)							1	(B)			(C)		
	Name and business add	•						 	Description of s		C	ompens		
	Construction 621 Baylis Chapel Rd. Columbia	a, MS 39429						-	ectric Line Cons					35,461
	Construction PO Box 8327 Laurel, MS 39441								ght of Way Clea					9,365
	ine Service PO Box 485 Laurel, MS 39441 son & Dewar Engineers PO Box 2808 Norcro	ss. GA 3009	1						ght of Way Clea ofessional Serv					78,280 60,147
	se Utilities Services PO Box 8000 Buffalo, N							_	ele Inspection					34,222
2	Total number of independent contractor	ors (ıncludı	-							ove) who				
	received more than \$100,000 of compen-	sation from	the o	rgai	nıza	tion			11					

Par	VIII	Statement of Reve				D4 \ ////		
		Check if Schedule C	Contains a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns	s 1a					
Gra	b	Membership dues .	<u>1b</u>					
ts, (C	Fundraising events .						
ੜੂ ਫ਼ੂ	d	Related organizations						
ns, Sim	е	Government grants (cor						
er S	f	All other contributions, g						
ë ë		and similar amounts not inc						
Contributions, Giffs, Grants and Other Similar Amounts	9	Noncash contributions include	•					
	h	Total. Add lines 1a-1	<u> </u>	Business Code				
eun	2a	Sale of Electricity		221122	97,563,011	97,563,011		
æ	b	Mambar Cook		221122	348,610	348,610	. =	
<u>e</u>	c	Patronage Capital		221122	2,499,894	2,499,894		-
ěΣ	d	Joint Pole Rental		221122	1,310,467	1,310,467		
Program Service Revenue	е					.,,		
ogra	f	All other program ser						
<u> </u>	g	Total. Add lines 2a-2			101,721,981			
	3	Investment income						
		and other similar amo	•	,	221,500	221,500		
	4	Income from investment	•	· •				
	5	Royalties	(ı) Real	▶				<u> </u>
		Cuana mamba	(i) Heal	(ii) r ersonal				
	6a b	Gross rents Less: rental expenses						
	6	Rental income or (loss)			1			
	ď	Net rental income or	(loss)	<u></u>				
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory		20,467				
	b	Less cost or other basis						
		and sales expenses		0				
	С	Gain or (loss)		L				
	d	Net gain or (loss) .		▶	20,467	20,467		
Other Revenue	8a	Gross income from fu events (not including \$ of contributions report						
Æ.		See Part IV, line 18	•					
ţ	ь	Less: direct expenses	· · · a sb					
0		Net income or (loss) f		L				
		Gross income from ga			· · ·			
			a	1				
	ь	Less: direct expenses	s b					
	С	Net income or (loss) f		ıvitıes ▶				
	10a	Gross sales of in returns and allowance	-					·
		Less: cost of goods	_	==	. 1			
	b	Net income or (loss) f						J
	─ ─	Miscellaneous F		Business Code		_		<u> </u>
	11a							<u> </u>
	b							
	c							
	d	All other revenue .					-	
	е	Total. Add lines 11a-						,
	12	Total revenue. See i	nstructions	▶	101,963,948	101,963,948		
								Form 990 (2014)

Part	X Statement of Functional Expenses			 	
Sectio	n 501(c)(3) and 501(c)(4) organizations must con			ns must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lin	e in this Part IX		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	18,299			
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	5,194,199 362,495			
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 8	Other salaries and wages	3,197,728			
	section 401(k) and 403(b) employer contributions)	1,481,046			
9	Other employee benefits	1,635,106			
10 11	Payroll taxes	437,012			
ii a	Management				
b	Legal	25,916			
c	Accounting	21,090			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	2,717,633	•		
13	Office expenses	181,542		-	
14	Information technology	244,124			
15	Royalties	39,295			
16	Occupancy	188,289			
17	Travel	41,189			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	35,633			-
20	Interest	3,761,892			
21 22	Payments to affiliates	C 121 207		-	· ·
23	Insurance	6,131,397 178,282			
24	Other expenses. Itemize expenses not covered	170,202			
	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	Cost of Purchased Power	74,083,307	<u> </u>		
b	Distribution System Maintenance	696,203		-	
C	Customer Accounts Expense	66,751			·- <u>-</u>
d e	Customer Service and Information Expense	12,744 1,100,074			
25	All other expenses Total functional expenses. Add lines 1 through 24e	101,963,948			
26	Joint costs. Complete this line only if the	101,303,340	.		
	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 (2014)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year Cash—non-interest-bearing 1 1,064,391 950.829 2 3 3 4 6,190,829 5,435,185 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Assets 7 Inventories for sale or use 8 2,629,666 2,471,058 Prepaid expenses and deferred charges . . . 9 9,265,813 7,985,523 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c 43,373,535 127,512,681 132,424,144 11 Investments—publicly traded securities 11 12 12 Investments—other securities. See Part IV, line 11 . . . 13 Investments - program-related. See Part IV, line 11 13 14 14 Other assets. See Part IV, line 11 15 15 30,644,551 33,012,360 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 177,307,931 16 182,279,099 17 Accounts payable and accrued expenses . . 17 9,215,819 7,422,185 18 18 19 19 Deferred revenue . 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 79,343,849 84,122,705 Unsecured notes and loans payable to unrelated third parties . . . <u>1,750,</u>000 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 2,702,960 3,039,804 Total liabilities. Add lines 17 through 25 93,012,628 26 94,584,694 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 28 Fund 29 29 Permanently restricted net assets . . . Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ŏ Net Assets 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 32 84,295,303 87,694,405 33 33 84,295,303 87,694,405 Total liabilities and net assets/fund balances . 34 177,307,931 182,279,099

Page IZ

Form 990 (2014)

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗸
1	Total revenue (must equal Part VIII, column (A), line 12)	1		101,9	63,948
2	Total expenses (must equal Part IX, column (A), line 25)	2		101,9	63,948
3	Revenue less expenses. Subtract line 2 from line 1	3			0
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		84,29	95,303
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		3,39	99,102
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		87,69	94,405
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			<u>, </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		-		
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piain i	n		}
_			-	 	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	/	
	If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both	Jilea C	"		
	Separate basis Consolidated basis Both consolidated and separate basis		- Ch	1	
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited.	· ·	. 2b	├	
	separate basis, consolidated basis, or both:	iu on	a		
	Separate basis, consolidated basis, or both. 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 or	ersiah	,		$\vdash \vdash \vdash$
C	of the audit, review, or compilation of its financial statements and selection of an independent account	_			
	If the organization changed either its oversight process or selection process during the tax year, ex			+	\vdash
	Schedule O.	F			
32	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n	1	
Ja	the Single Audit Act and OMB Circular A-133?				1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under			\vdash	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			For	m 990	(2014)

SCHEDULE D (Form 990)

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of	f the organization		Employer identification number
Dixie E	lectric Power Association		64-0183177
Part		dvised Funds or Other Similar Fur	ids or Accounts.
	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and don		neld in donor advised
•	funds are the organization's property, subject to	-	
6	Did the organization inform all grantees, donors		_ : _ :
U	only for charitable purposes and not for the be		
	conferring impermissible private benefit?		
Part			Tes No
rent	Complete if the organization answere	d "Yes" to Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the		
•	Preservation of land for public use (e.g., recr		f a historically important land area
	Protection of natural habitat	· —	f a certified historic structure
		Freservation C	a certified historic structure
•	Preservation of open space	hald a suplified consequation contribute	on in the form of a concentation
2	Complete lines 2a through 2d if the organization	neid a qualified conservation contributi	Held at the End of the Tax Year
	easement on the last day of the tax year.		
a			2a
b	Total acreage restricted by conservation easeme		
C	Number of conservation easements on a certifie	, ,	
d	Number of conservation easements included		I I
_	historic structure listed in the National Register		· · 2d
3	Number of conservation easements modified, tr	ansferred, released, extinguished, or ter	minated by the organization during the
	tax year ►		
4	Number of states where property subject to con-		
5	Does the organization have a written policy		
	violations, and enforcement of the conservation		
6	Staff and volunteer hours devoted to monitoring	, inspecting, and enforcing conservation	easements during the year
	>		
7	Amount of expenses incurred in monitoring, inst	pecting, and enforcing conservation eas	ements during the year
	▶ \$		
8	Does each conservation easement reported on li	ne 2(d) above satisfy the requirements o	f section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · □ Yes □ No
9	In Part XIII, describe how the organization repor		
	balance sheet, and include, if applicable, the tex		nancial statements that describes the
	organization's accounting for conservation ease		
Part			
	Complete if the organization answere		
1a	If the organization elected, as permitted under	, , , ,	
	works of art, historical treasures, or other sim	•	
	public service, provide, in Part XIII, the text of the	e footnote to its financial statements tha	at describes these items.
b	If the organization elected, as permitted under		
	works of art, historical treasures, or other sim		ducation, or research in furtherance of
	public service, provide the following amounts re	lating to these items:	
	(i) Revenue included in Form 990, Part VIII, line	1	> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of	art, historical treasures, or other simila	r assets for financial gain, provide the
	following amounts required to be reported under	r SFAS 116 (ASC 958) relating to these	items:
а	Revenue included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		
For Pa	perwork Reduction Act Notice, see the Instructions		

Schedu	ile D (Form 990) 2014	Page 2
Par	t III Organizations Maintaining Colle	ections of Art, Historical Treasures, or Other Similar Assets (continued)
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and other records, check any of the following that are a significant use of its
а	☐ Public exhibition	d
b	☐ Scholarly research	e 🔲 Other
С	☐ Preservation for future generations	***************************************
4	Provide a description of the organization's XIII.	collections and explain how they further the organization's exempt purpose in Par
5	-	t or receive donations of art, historical treasures, or other similar to be maintained as part of the organization's collection? Yes No
Par	Complete if the organization answ 990, Part X, line 21.	ments. vered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form
1a		odian or other intermediary for contributions or other assets not

b If "Yes," explain the arrangement in Part XIII and complete the following table:

						Am	ount
C	Beginning balance				1c		
d	Additions during the year			[1d		
е	Distributions during the year			i i	1e		
f	Ending balance				1f		
2a	Did the organization include an amoun				dial	account liability?	☐ Yes ☐ No
b	If "Yes," explain the arrangement in P						
_	Endowment Funds.	<u></u>	o ii tito oxpianati	on nao boon pro		2 11.7 Care 7 (11.1	· · · · <u> </u>
	Complete if the organization	answered "Yes	" to Form 990	Part IV line 10	ı		
	Complete it the organization	(a) Current year	(b) Prior year	(c) Two years ba	_	d) Three years back	(e) Four years back
1a	Beginning of year balance				t-`	· · · · · · · · · · · · · · · · · · ·	
b	Contributions				_		
c				+			
·	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities and						
	programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of t	he current year er	nd balance (line 1	g, column (a)) he	eld a	s:	
а	Board designated or quasi-endowment	-					
b	Permanent endowment ▶	%					
С	Temporarily restricted endowment ▶						
	The percentages in lines 2a, 2b, and 2		00%.				
За	Are there endowment funds not in the	•		nat are held and	adn	ninistered for the	
	organization by:	•	-				Yes No

Part VI Land, Buildings, and Equipment.

(i) unrelated organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
 Describe in Part XIII the intended uses of the organization's endowment funds

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

	Complete in the organization answered Tes to Form 330, Fart IV, line Tra. See Form 330, Fart IV, line To.								
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value				
1a	Land	724,969	0		724,969				
b	Buildings	4,785,603	0	2,656,776	2,128,827				
С	Leasehold improvements	0	0	0	0				
d	Equipment	7,664,136	0	5,012,566	2,651,570				
е	Other	162,622,971		35,704,193	126,918,778				
Total.	Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	K, column (B), line 10)c.) ▶	132,424,144				

3a(i)

3a(ii)

☐ Yes ☐ No

Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes 0 (2) Accumulated Operating Provisions and Asset (3) Retirement Obligations 2,173,000 (4) Consumer Deposits 582,375 (5) Consumer Advances for Construction 284,430 (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶ 3,039,805 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	Part VII	Investments – Other Securities.	rered "Ves" to For	m 99N	Part IV line	11h See Form 9	990 Part X line 12
2) Closely-held equity interests		(a) Description of security or category	reled res to roll			(c) Meth	od of valuation
(3) Other (A) (B) (B) (C)	(1) Financial	derivatives					
Column	, ,	· ·					
Column	(3) Other						
Ci Ci Ci Ci Ci Ci Ci Ci	(A)					<u>-</u>	. .
Discontinuity Discontinuit							
Fig.				<u> </u>			
Fig.							
(5)				<u> </u>			
Total, Column (b) must equal Form 990, Part X, col (B) line 12) ►							
Investments - Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	(H)						
Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Gost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (c) Association Organizations - Membership Deposits (a) Description (b) Book value (c) Association Organizations - Patronage Capital (d) Facility Deposits (e) Description (f) Recommendation - Patronage Capital (g) Recomm	Total. (Column	(b) must equal Form 990, Part X, col (B) line 12) ▶					
(1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	Part VIII			m 990,	Part IV, line	11c. See Form	990, Part X, line 13.
(2) (3) (4) (5) (6) (7) (8) (9) Total, (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶ Part X Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) Association Organizations - Membership Deposits (b) Book value (1) Association Organizations - Patronage Capital 31,683,402 (3) NRUCFC Capital Term Certificates 1,326,443 (4) Facility Deposits 3,363 (5) (6) (7) (8) (9) Total, (Column (b) must equal Form 990, Part X, col. (B) line 15.) . ▶ 33,012,360 Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes 0 (2) Accumulated Operating Provisions and Asset (3) Retirement Obligations 2,173,000 (4) Consumer Deposits 582,375 (5) Consumer Deposits 582,375 (6) (6) (7) (8) (9) Total, (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶ 3,033,805 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the						(c) Meti	hod of valuation
(d) (e) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g							
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31,683,402		(a	Description	··· -			`. <u> </u>
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(7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶ 3,039,805 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		mer Advances for Construction	2	84,430			
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2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the		Almost and Fam 000 Part V and Miles 051 h					
					he organization	's financial stateme	ents that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII							

Part	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, I		Return.	
1	Total revenue, gains, and other support per audited financial statements		T 1	101,963,948
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		- 	101,303,340
a	Net unrealized gains (losses) on investments	2a 0		
a b	Donated services and use of facilities	2b 0		
_	Recoveries of prior year grants			
C d	Other (Describe in Part XIII)	2d 0		
e	Add lines 2a through 2d	<u> </u>	2e	•
3	Subtract line 2e from line 1		3	101,963,948
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			101,903,940
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 0		
b	Other (Describe in Part XIII.)	4b 0	1	
c	,		4c	C
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	101,963,948
Part				
	Complete if the organization answered "Yes" to Form 990,			
1	Total expenses and losses per audited financial statements		1	96,769,749
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a 0		
b	Prior year adjustments	2b 0	1	
C	Other losses	2c 0	1	
d	Other (Describe in Part XIII.)	 	1 1	
e	Add lines 2a through 2d		2e	C
3	Subtract line 2e from line 1		3	96,769,749
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 0		
b	Other (Describe in Part XIII.)	4b 5,194,199	1	
С	Add lines 4a and 4b		4c	5,194,199
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	5	101,963,948
Part	XIII Supplemental Information.			
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an			
2, Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional in	formation	•
Part X				
Dixie !	lectric Power Association is an organization exempt from income tax under I	RS Code Section 501(c)(12)	Unrelated I	ousiness income,
of whi	ch the Association had none for the years ended December 31, 2014 and 2013	, would be subject to federal	income tax	es. Consequently,
the ac	companying financial statements do not reflect any provision for income taxe	s. The Association follows th	e provisio	n of uncertain tax
positi	ons as addressed in FASB Accounting Standards Codification 740-10-65-1. Th	e Organization files income to	x returns	n the U.S. federal
jurisd	ction. The Association is no longer subject to U.S. federal income tax examin	ations by the tax authority to	r years bei	ore 2011. The
	inting and an interest and an interest in into	rost and panalties in aparatin	a ovnonco	s. No such
ASSOC	iation recognizes interest accrued related to unrecognized tax benefits in inte	rest and penalties in operatin	g expense	s. No sucii
intoro	st and penalties at December 31, 2014 and 2013. The Association has elected	to defer the provisions of EAS	SB ASC 74	0 Accounting
mere	st and penalties at December 31, 2014 and 2013. The Association has elected	to deter the provisions of 1 A	30 A30 /4	o, Accounting
for Inc	ome Taxes, under the provisions of ASC 740. The Association records a liab	lity for uncertain tay position	s when it is	s nrohable that a
101.111	unic raxes, under the provisions of A30 740. The A330clation records a habi	my for differential tax position	3 1011011 11	, probable triat a
loss h	as been incurred and the amount can be reasonably estimated. The Associat	ion continually evaluates exp	irıng statuı	es of limitations.
10331	as been meaned and the unious can be reasonably estimated. The ressource			<u> </u>
audits	, proposed settlements, changes in tax laws, and new authoritative rulings.			
Part X	II			
\$5,19 ⁴	,199 represents the amount which was allocatd to the members' capital credit	accounts		

Schedule D (For	orm 990) 2014	Page 5
Part XIII	Supplemental Information (continued)	
	······································	
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SCHEDULE J (Form 990)

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

OMB No 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Dixie Electric Power Association

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number

64-0183177

Part	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			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
	Bissictionary speciality account.			1
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain.	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?			
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		ļ	
	✓ Independent compensation consultant ✓ Compensation survey or study		1	
	Form 990 of other organizations		·	
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		1
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		1
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations 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:			
			!	
a	The organization?	5a	-	
D	Any related organization?	<u>5b</u>	├	-
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
_	The organization?	6a		
a			-	
b	Any related organization?	6b		
_		.		
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 accrued 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		
				1
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			1
	Regulations section 53.4958-6(c)?	9		

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

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

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

(B) Breakdown of W-2 and/or 1099-MISC compensation	200	(B) Breakdown of	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C) Botromont and		Total of call	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred	benefits	(G)-(J)(B)	in column (B) reported as deferred in prior Form 990
time of the o	8	149,297	0	4,546	82,433	15,961	252,237	
Kalph K. Silliu 1 General Manager	Ξ							
Aaron Zumwalt	Ξ	102,302	0	4,129	11,700	15,961	134,092	
2 Admin & Finance Manager	(ii)							
Line Doggett	()	2,400	0	7,611	0	0	10,01	0
3 Former Director	Ξ							
	3							
4	€		* * * * * * * * * * * * * * * * * * *					
	8							
S	Ξ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
	8							
9	€	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
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7	€	6 6 6 6 6 6 6 6 6 7 7 7 7 7 7 7 7 7 7 7						
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	Ξ							
6	Ξ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7)))) 1 1 1 1 1 1 1 1					!
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	€							
11	€							
	€		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
12	<u>(ii)</u>							
	3					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
13	€							
	Ξ							
14	<u>(ii)</u>							
	3				1			
15	€							
	€							
16	Ξ							
							Sch	Schedule J (Form 990) 2014

Part II. Also complete this part									Schedule J (Form 990) 2014
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.									
r Part I, lines 1a, 1b, 3, 4a, 4b, 4									
nation, or descriptions required fo									
Provide the information, explan for any additional information.									

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Dixie Electric Power Association	64-0183177
Part VI	
Line 2 The General Manager and one board member of Dixie Electric serve on the Board of Directors o	f South Mississippi Electric Power
Association. Ralph R. Smith served as our General Manager representative and Mack Mauldin served	as our board member representative
ın 2014.	
Line 6 Dixie Electric Power Association is a member owned cooperative. Each person must apply for	nembership before receiving electricity
from the cooperative.	
Line 7a Each member has the right to vote for the Board of Directors each year at the annual meeting.	
Line 7b In order for the cooperative to dissolve or sale a majority of the current membership must vote	in favor of the proposal.
Line 11a The General Manager, Administration and Finance Manager, the Accounting Supervisor and A	Auditor will review the Form 990.
After this, the General Manager will present the Form 990 to the Board of Directors at the next schedul	ed board meeting.
Line 12c The Board of Directors and the General Manager are required to complete a questionnaire and	d fully disclose any outside
relationships that could result in a conflict of interest.	
Line 15 Intandem, LLC was hired in 2014 to conduct a wage and salary review. Recommended change	s were presented to the Board of
Directors for approval.	
Line 19 The documents are available upon request.	
Part XI	
Line 9 Other changes in net assets include: 1) \$21,165 increase in memberships 2) \$16,495 increase in	additional deposits 3) \$5,194,199
increase in patronage capital assignable for 2014 4) \$2,100,000 decrease in patronage capital refunded	l in 2014 5) \$436,341 increase from
patronage capital that was retired in 2014 but no check was written 6) \$169,100 increased ASC Topic 7	15 liability.
	
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Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization	Employer identification number
	······
	•••••••••••••••••••••••••••••••••••••••