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Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2014

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.

Open to Public

		Information about 1 only 300 and its manuactions is at with				
<u>A</u>	For the	2014 calendar year, or tax year beginning 1/1 , 2014, and e	nding	12/3		, 20 14
В	Check if a	pplicable: C Name of organization Jefferson Davis Electric Cooperative, Inc.		P	Employer is	dentification number
	Address	hange Doing business as			7	2-0362325
	Name cha	nge Number and street (or P.O. box if mail is not delivered to street address) Roo	m/suite	E	Telephone r	number
	Initial retu	m 906 N. Lake Arthur Ave.			(33	17) 824-4330
	Final return	Aterminated City or town, state or province, country, and ZIP or foreign postal code				-
	Amended	return Jennings, LA 70546		G	Gross recei	pts \$ 24,614,00
\Box		n pending F Name and address of principal officer Michael J. Heinen	His			rdinates? ☐ Yes ☑ No
		21014 Dama Landry Rd, Jennings, LA 70546				cluded? Yes No
	Tax-exen			• •		t. (see instructions)
	Website:			(c) Group ex		
K		ganization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of fo				
_	art I	Summary	ormation	1941	M State of I	egal domicile: LA
			517a		••	
40	1	Briefly describe the organization's mission or most significant activities: Uti	ility servic	ce alstribl	rung elect	ricity to rurai
Ž		consumers				
د⊌اط vernai		N				
Į Š		Check this box ▶ ☐ if the organization discontinued its operations or dispos	sed of mo	ore than 2	1 1	net assets.
ာ ဋ					3	
⊲ ≪ຽ	1	Number of independent voting members of the governing body (Part VI, line	•		4	
2 2		Total number of individuals employed in calendar year 2014 (Part V, line 2a)			5	
ಆರ್ಲೇ ೩ ೮ ೬೮।ರ Activities & Governance	6	Fotal number of volunteers (estimate if necessary)			6	
ູ້≼ັ	7a	Fotal unrelated business revenue from Part VIII, column (C), line 12			7a	
ر الا	b	Net unrelated business taxable income from Form 990-T, line 34			7b	
SCALLER				Prior Year		Current Year
3	8	Contributions and grants (Part VIII, line 1h)				
3 2	9	Program service revenue (Part VIII, line 2g)			····	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
SCA Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			28561	2832
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		93	348065	952860
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12			376626	955693
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			7.0020	
		Benefits paid to or for members (Part IX, column (A), line 4)		·		
so.	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10			373843	37402
Expenses	1	Professional fundraising fees (Part IX, column (A), line, Lie)	' 	· · · · · · · · · · · · · · · · · · ·	770010	37402
pe	1	Fotal fundraising expenses (Part IX, column (ID), Ind 25	·			***
ធ		Other expenses (Part IX, column (Amines 11a-11d, 11f-24e)	├		25000	000504
			•		335066	828595
	19	Total expenses. Add lines 13–17 (must equal Part IX, column (A) line 25)	•	•	708909	865997
		Revenue less expenses. Subtract line 18 from line 12	Posion	ning of Curre	667717	89695 End of Year
ots or	~		Degila			
Net Asse	20	Fotal assets (Part X, line 16) OGDEN, .UT	• —		557962	4333570
i et	21	Total liabilities (Part X, line 26)	• —		787234	2663977
		Net assets or fund balances. Subtract line 21 from line 20	<u>· </u>	158	370728	1669593
_	art II	Signature Block				
Ųı	nder penal	es of perjury, I declare that I have examined this return, including accompanying schedules and	statements,	, and to the	best of my l	knowledge and belief, it
	ie, conect	and complete Declaration of preparer (other than officer) is based on all information of which pre	eparer nas a	any knowled	ge 	
		millary Hering				
Sig	-	Signature of officer		Date		
Here		Michael J. Heinen General Manager		5-	-12-15	
		Type or print name and title				
Pa	iid	Pnnt/Type preparer's name Preparer's signature	Date		Check	PTIN
	epare:	,			self-employ	
	se Only			Firm's	EIN ▶	
J:	,	Firm's address ▶		Phone		
Ma	y the IR	discuss this return with the preparer shown above? (see instructions) .				. Yes No
			Cat. No. 112	282Y		Form 990 (201

Total program service expenses ▶

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Part I	V Checklist of Required Schedules			
			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		✓
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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.			
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	1	
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		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		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	<u> </u>
	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	1	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		1
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		1
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			
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		1
20 a	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		*

Part	V Checklist of Required Schedules (continued)			
04	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
21	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		√
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		1
	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 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28b 28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√ √
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>/</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 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,			
38	Part VI	37		-
		1 20		<u> </u>

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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			
	Onder in Conduction Conference of the Conference	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 71			1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 55			
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		✓
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		ļ
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			١,
	account)?	4a		/
b	If "Yes," enter the name of the foreign country: ▶			}
	See instructions for filing requirements for FinCEN Form 114, Repórt of Foreign Bank and Financial Accounts			
_	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		✓
6a	· · · · · · · · · · · · · · · · · · ·	6-		,
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		-
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u>* </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			1
	required to file Form 8282?	7c		✓
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		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7 f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			L
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	<u>9a</u>		ļ
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		ļ
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			l
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
b	Gross income from members or shareholders			1
_	against amounts due or received from them.)			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		<u> </u>	†
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			1
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.			1
b	Enter the amount of reserves the organization is required to maintain by the states in which			1
	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		I
h-	If "Voc " has it filed a Form 700 to report these payments? If "Ma " provide an evalenation in School Is O	446		

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	truct	ions.
	Check if Schedule O contains a response or note to any line in this Part VI			. 🗸
Section	on A. Governing Body and Management			
_		<u></u>	Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year	·		
	If there are material differences in voting rights among members of the governing body, or			
	If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	İ		
ь 2	Enter the number of voting members included in line 1a, above, who are independent . [1b] g 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?			
3	Did the organization delegate control over management duties customarily performed by or under the direct	2_		✓
J	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		1
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	 -	_ -	\vdash
	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	1	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	<u>.</u>	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
Ь	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?	المدا		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Tia		 • • • • • • • • • •
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		1
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			\vdash
	describe in Schedule O how this was done	12c		
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	\	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			}
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓
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		
Secti	on C. Disclosure	16b		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ► Louisiana			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	5010	c)(3)s	only)
_	available for public inspection. Indicate how you made these available. Check all that apply.		-,,,-,-	
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	: ▶	
	Jefferson Davis Electric Cooperative, Inc.			

Form 990 (2	2014)
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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 no	r any relate	d org	aniz	atio	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
					C)					
(A)	(B)	(do n	ot ch		ition	e than o	ากค	(D)	(E)	(F)
Name and Title	Average	box,	unles	s pe	rson	is both	an	Reportable	Reportable	Estimated
	hours per week (list any					or/trus		compensation from	compensation from related	amount of other
	hours for	일	Inst	Officer	₹	퇇	Former	the	organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	ĕ	Key employee	est o	9	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	일	<u>a</u>		ğ	ĕ				and related
	111107	stee	l st		ŏ	en.		l		organizations
			8			Highest compensated employee				
(1) John Berken	3									
Director		/					ĺ	24367.04		
(2) Claude Breaux	6	 	 -					24367.04		
Director	- 	1		ļ			j	24461.40		
(3) Richard Byler	4	 `	├		-	 	-	24401.40		
Director	·†	1						24761.40		
(4) E Garner Nunez	10		\vdash					21701.10		
Director	<u> </u>	1	}				ļ	24158.16	ļ	
(5) Herman T Precht III	5					Ì				
Director	<u> </u>	1						23867.04		
(6) Denny Primeaux	5									
Director		✓		<u> </u>				24367.04		
(7) Joseph Tupper	3									
Director	<u> </u>	✓				<u> </u>		23867.04		
(8) Reggie Murphy	5						l	1		
Director		✓	<u> </u>			ļ	_	8355.68		
(9) Kirk Weldon	10					İ				
Director	<u> </u>	/	<u> </u>	_	L	ļ	$oxed{oxed}$	25767.04		
(10) Michael J. Heinen	40	[1			
General Manager	ļ		ļ	1	L.		L	124470.98		52476.16
(11) Edwin Henry	0	1					١,			
Former		<u> </u>	<u> </u>	L	_		✓	23862.99		
(12) Robert Sarver	0	ł		1	1		١,			
Former		 	├	├	 	ļ	✓	10858.08		
(13) Louis Trahan	0	1					,			
Former (144)	 		\vdash	├-	⊢	 	✓	10858.08		
(14)		1					ł			
	ı	1		1	4	ř	1	1	1	

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (continue	d)		
					•	C)								
	· (A)	(B)	(do n	ot ch		ition more	than o	one	ne (D)			(1	F)	
	Name and title	Average	box, unless person is both						Reportable	Reportable			nated	
	•	hours per week (list any						<u> </u>	compensation	compensation related			unt of her	
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee		Former	the	organizatio	ons	compe	nsation	1
		related organizations	중호	릁	ĕ	93	l og se	를	organization (W-2/1099-MISC)	(W-2/1099-N	AISC)		n the zation	
		below dotted	이 학	na		ջ	9 5		(,				elated	
		line)	l ste	trage (8	ğ	1			1	organi	zations	į.
			8	ntee			Highest compensated employee							
/4 C)			_					├	 		-+			
(15)		ļ	ł		ļ									
(16)		-		-	-	-	 	├	<u> </u>		$\overline{}$			
1.10/			1			ŀ				•	ļ			
(17)			· · · · · ·		 	\vdash	-	1		 				
Y::!/		†	1				ĺ							
(18)	· · · · · · · · · · · · · · · · · · ·		 					\vdash						
3		†	1							İ				
(19)														
		*	1			1					- 1			
(20)			}											
(21)		ļ	1								1			
	W-2-1	ļ	ļ			┕	ļ	<u> </u>						
(22)		ļ				ł								
			ļ	L	ļ	<u> </u>	ļ	<u> </u>						
(23)		ļ	-	}	1]								
(0.4)		 		 	 	 	ļ	├						
(24)			-	1										
(05)		<u> </u>	 		\vdash		<u> </u>	⊢						
(25)		 	┨			Ì								
1b	Sub-total	L	<u> </u>	Ц.	I	<u>. </u>	<u> </u>	<u> </u>	374021.97		-+		E24	76.16
c	Total from continuation sheets to Part		n A	•	•		•	•	374021.37				324	70.10
d	Total (add lines 1b and 1c)				•			•	374021.97		_		524	76.16
2	Total number of individuals (including but							e) w		ore than \$1	00 000 4	nf	024	70.10
_	reportable compensation from the organ			.000			45011	٠, ٠٠		Olo Blair Wi	00,000	,		
													Yes	No
3	Did the organization list any former of									est compe	nsated			
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	ınd	ivid	ual					3	1	
4	For any individual listed on line 1a, is the												ĺ	
	organization and related organizations	greater th	an \$	150,	,000)? /	f "Ye	s, "	complete Sch	nedule J fo	r such			
	individual			•	•		•	•	• • • • •			4	✓	····
5	Did any person listed on line 1a receive of													
	for services rendered to the organization	! IT "Yes," C	comp	ere	Sci	neal	JIO J	ror s	sucn person	· · · ·	· ·	5		<u>√</u>
	on B. Independent Contractors								11 1		0100			
1	Complete this table for your five highest compensation from the organization. Rep												-l- 4-	
	year.	port compe	nsau	OH I	OF L	ile c	alenc	iai j	year ending wi	in or within	trie orga	ırıızatıo	n s ta	IX.
	~ *							т.	(B)			(0)		
	(A) Name and business add	tress							(B) Description of s	ervices	C	(C) ompensa	ation	
BHA, I	nc		-					Fn	gineering				1355	09.05
	Engineering	·							gineering					53.12
	send Chemical Division							$\overline{}$	ontractor, spray	na				06.62
-,								T -						
2	Total number of independent contractor							o th	nose listed ab	ove) who				
	received more than \$100,000 of compen	sation from	the o	rga	niza	ıtion	▶		3		1			

	90 (201	<u> </u>						Page 9
Part	VIII	Statement of Reve				D-43/09		-
		Check if Schedule C) contains a res	ponse or note to	o any line in this (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts st	1a	Federated campaigns	s 1a			10001140		012 014
ons, Gifts, Grants Similar Amounts	ь	Membership dues .						
s, G	С	Fundraising events .	1c					
Gift lar,	d	Related organizations						
Si ji	е	Government grants (cor						
er S	f	All other contributions, g						
현환		and similar amounts not inc		L				
Contributions, and Other Sim	9	Noncash contributions include						
	h	Total. Add lines 1a-1	1	Business Code				
Program Service Revenue	2a							
Re	ь							
<u>.</u>	С				h			
Sez	d							
Ë	е							
go	f	All other program ser						
<u>~</u>	g	Total. Add lines 2a-2					_	
	3	Investment income and other similar amo						
			•		28325			28325
	5	Income from investmen Royalties	it of tax-exempt b	ona proceeas	<u> </u>			
	3	noyailles	(i) Real	(ii) Personal				
	6a	Gross rents		(,				
	b	Less: rental expenses			1			
	С	Rental income or (loss)						
	d	Net rental income or	(loss)	▶				
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses .						
	C	Gain or (loss)	L					
	d	Net gain or (loss) .		•				
ne ne	8a	Gross income from fo	undraising					
ē		events (not including \$						
Other Revenue	ļ	of contributions report	ed on line 1c).					
e		See Part IV, line 18 .	a	1	[
돭	b	Less: direct expense	s b]			
		Net income or (loss) to		events . >				
	9a	Gross income from ga						
		See Part IV, line 19 .			 			
		Less: direct expense						
		Net income or (loss) to Gross sales of in		ivities				
	IVa	returns and allowance		24402604				
	h	Less: cost of goods	_		1 i			
		Net income or (loss)			9346526	9346526		
		Miscellaneous F		Business Code	3370320	3570320		
	11a	other capital credits		<u> </u>	182079			
	b							
	С							
	d	All other revenue .			ļļ			
	12	Total. Add lines 11a-		🟲	182079			
		INTEL POVODILO NOO I	CONTRACTOR OF THE STATE OF THE	-	. 0000000	0246526		20225

	Statement of Functional Expenses	anlote all columns. Al	Il other ergenization	no must complete col	lumn (A)			
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line 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			general expenses	oxportaces.			
2	Grants and other assistance to domestic individuals. See Part IV, line 22				Particular (1997)			
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	374022						
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							
9	Other employee benefits		-					
10	Payroll taxes							
11	Fees for services (non-employees):							
a	Management							
b	Legal		 					
C	Accounting		····	 	 			
d	Lobbying							
e f	Professional fundraising services. See Part IV, line 17 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							
21	Payments to affiliates							
22 23	Depreciation, depletion, and amortization .				· · · · · · · · · · · · · · · · · · ·			
23 24	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	See schedule 2	8285956	<u></u>					
b								
C				<u> </u>				
d		<u> </u>		ļ. —				
9	All other expenses							
25	Total functional expenses. Add lines 1 through 24e	8659978		 	· · · · · · · · · · · · · · · · · · ·			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)							

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		
		•	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	812178	1	82556
	2	Savings and temporary cash investments	93224	2	93280
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	2491383	4	2229281
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
1	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
23		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
ď	8	Inventories for sale or use	675865	8	1048752
	9	Prepaid expenses and deferred charges	3311706	9	2404473
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 47282413		.	
	b	Less: accumulated depreciation 10b 11485880	33705154	10c	35796533
	11	Investments—publicly traded securities		11	
'	12	Investments—other securities. See Part IV, line 11	1561264	12	1673640
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	7188	15	7189
	16	Total assets. Add lines 1 through 15 (must equal line 34)	42657962	16	43335704
	17	Accounts payable and accrued expenses	182773	17	1790816
	18	Grants payable		18	
	19	Deferred revenue	4769891	19	4919653
	20	Tax-exempt bond liabilities		20	·
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
S	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
abi		disqualified persons. Complete Part II of Schedule L		22	
Ï	23	Secured mortgages and notes payable to unrelated third parties	16022161	23	15199709
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	4167449	25	4729595
	26	Total liabilities. Add lines 17 through 25	26787234	26	26639773
S		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
9		complete lines 27 through 29, and lines 33 and 34.			
Ē	27	Unrestricted net assets		27	
or Fund Balances	28	Temporarily restricted net assets		28	
2	29	Permanently restricted net assets		29	
Z		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
9		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥	32	Retained earnings, endowment, accumulated income, or other funds .	15870728		16695931
ž	33	Total net assets or fund balances	15870728		16695931
	34	Total liabilities and net assets/fund balances	42657962	34	43335704

Form 90	00 (2014)			Б-	40
	XI Reconciliation of Net Assets	····		Pa	ige 12
r ar t					_
1	Check if Schedule O contains a response or note to any line in this Part XI	1	• •		
2	Total expenses (must equal Part IX, column (A), line 12)				56930
		2			59978
3	Revenue less expenses. Subtract line 2 from line 1	3			96952
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		158	70728
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			<u>71749</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	40			
Dowl	33, column (B))	10		1669	<u>9593</u> 1
rant					_
	Check if Schedule O contains a response or note to any line in this Part XII	:			
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other			Yes	No
•	If the organization changed its method of accounting from a prior year or checked "Other," exp	lain in			
	Schedule O.	Jiain III			
0-					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . If "Yes," check a box below to indicate whether the financial statements for the year were comp		2a	✓	
	reviewed on a separate basis, consolidated basis, or both:	nied of			
_	Separate basis Consolidated basis Both consolidated and separate basis				
D	Were the organization's financial statements audited by an independent accountant?		2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	d on a		İ	
				İ	
	Separate basis Consolidated basis Both consolidated and separate basis		<u> </u>		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over the guidit review or compilation of the financial extrements and colorium of an independent assume.				
	of the audit, review, or compilation of its financial statements and selection of an independent accour		2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	plain in			

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.

3a

Form **990** (2014)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

	on Davis Electric Cooperative, Inc.	vised Funds or Other Similar Fran	72-0362325
Par	Organizations Maintaining Donor Ad Complete if the organization answered		ids or accounts.
	Complete if the organization answered	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Donor devises renes	(b) I and and other accounts
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 dono	r advisors in writing that the assets h	leld in donor advised
•	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors,		—
•	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		
Part	Conservation Easements.		
	Complete if the organization answered	"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., recrea		f a historically important land area
	☐ Protection of natural habitat		f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year.	·	Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easemen	nts	2b
С	Number of conservation easements on a certified		
d	Number of conservation easements included in	(c) acquired after 8/17/06, and not	on a
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, tran	nsferred, released, extinguished, or terr	minated by the organization during the
	tax year ▶	_	-
4	Number of states where property subject to conse		
5	Does the organization have a written policy re-		
	violations, and enforcement of the conservation e	asements it holds?	· · · · · · · · · · · · · · · · · · ·
6	Staff and volunteer hours devoted to monitoring, i	inspecting, and enforcing conservation	easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspe	ecting, and enforcing conservation ease	ements during the year
	▶ \$		
8	Does each conservation easement reported on line		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text		nancial statements that describes the
D 1	organization's accounting for conservation easem		
Part			Other Similar Assets.
_	Complete if the organization answered		
та	If the organization elected, as permitted under SI		
	works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under sworks of art, historical treasures, or other similar		
	public service, provide the following amounts rela		ducation, or research in furtherance of
			► ↑
	(i) Revenue included in Form 990, Part VIII, line 1		• •
2	(ii) Assets included in Form 990, Part X	t historical traceuros or other armiles	r accets for financial asia provide the
~	following amounts required to be reported under		
а	Revenue included in Form 990 Part VIII line 1		. > \$

Schedule	D /E	000	0044

Part	We Organizations Maintaining	Collections of Art,	, HIST	oncal I	reasures,	or Ot	ner Similar A	ssets (c	ontinued)
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and other	recor	ds, chec	k any of the	e follov	ving that are a	significar	nt use of its
а	☐ Public exhibition		d [] Loan	or exchang	e prog	rams		
b	☐ Scholarly research		е [☐ Other					
С	☐ Preservation for future generations								
4	Provide a description of the organizati XIII.	on's collections and	expla	in how t	hey further	the org	ganization's exe	mpt purp	ose in Part
5	During the year, did the organization s								
	assets to be sold to raise funds rather	than to be maintained	d as p	art of the	organizati	on's co	llection?	Y	es 🗌 No
Part		_							
	Complete if the organization 990, Part X, line 21.						•		n Form
	Is the organization an agent, trustee, included on Form 990, Part X?							_	'es □ No
þ	If "Yes," explain the arrangement in Pa	rt XIII and complete t	the fol	lowing ta	able:				
	5							Amount	
C	Beginning balance					10			
d	Additions during the year					10			
e	Distributions during the year					16			
f 2a	Ending balance							w2 □ ¥	/oo 🗀 No
	If "Yes," explain the arrangement in Pa							-	
	V Endowment Funds.	TO AIII. OTTOCK TICTO II I	LITE CX	piariatio	Thas been	provide	su in Part XIII	• • •	<u> </u>
	Complete if the organization	answered "Yes" to	Forn	1990. P	art IV. line	10			
	- J		(b) Pno		(c) Two year		(d) Three years ba	ck (e) Fou	ır years back
1a	Beginning of year balance			-				-	
b	Contributions							1	
C	Net investment earnings, gains, and								• • • •
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and						· ·	<u> </u>	
	programs								
f	Administrative expenses								······
g	End of year balance								
2	Provide the estimated percentage of the	ne current year end b	alance	e (line 1g	, column (a)) held	as:		
а	Board designated or quasi-endowmen	t ▶ %							
b	Permanent endowment ▶	%							
C	Temporarily restricted endowment ▶	 %							
	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the	possession of the o	rganiz	ation th	at are held	and ac	lministered for	the	
	organization by:								Yes No
	(i) unrelated organizations							. 3a(i)	
	(ii) related organizations							. 3a(ii)
b	If "Yes" to 3a(ii), are the related organized							. 3b	
4	Describe in Part XIII the intended uses		endo	wment f	unds.				
Part			_			_		_	
	Complete if the organization	····						, Part X,	line 10.
	Description of property	(a) Cost or other to (investment)	oasis		or other basis ther)		Accumulated epreciation	(d) Bo	ok value
1a	Land	16	60678						160678
b	Buildings								
C	Leasehold improvements								
d	Equipment	277	71085				1945262		825823
e	Other		50650				9540618		34810032
Total.	Add lines 1a through 1e. (Column (d) m	ust equal Form 990,	Part X	(, columi	n (B), line 10)c.) .	>	_	35796533

Part VII	Investments—Other Securities. Complete if the organization answ	vered "Yes" to For	m 990	. Part IV. line	11b. See Form	990. Part X. line 12.
	(a) Description of security or category (including name of security)			Book value	(c) Met	hod of valuation -of-year market value
(1) Financial	derivatives					·
(2) Closely-h	neld equity interests					
(A)		4-4				
(B)						
(C)						
(D)						
(E)						
(F) (G)						
(H)						
	b) must equal Form 990, Part X, col. (B) line 12.) ▶					
Part VIII	Investments — Program Related Complete if the organization answ		m 990	Part IV line	11c Soc Form	000 Port V line 12
	(a) Description of investment	vered les toloi		Book value		thod of valuation:
	(a) Description of investment		(5)	DOOK VALUE		of-year market value
(1)						
(2)						
(3)						
(4)						 -
(5)						
(6)						
(7)					·	
(8)						
(9)						
	b) must equal Form 990, Part X, col. (B) line 13.) ▶	·				· ··
Part IX	Other Assets.	104 5 -				
	Complete if the organization answ		m 990	, Part IV, line	11d. See Form	
	8)) Description				(b) Book value
(1)		· · · · · · · · · · · · · · · · · · ·				
(2)						
(3)					· · · · · · · · · · · · · · · · · · ·	
(5)					·	
(6)						· · · · · · · · · · · · · · · · · · ·
(7)						
(8)						
(9)			•			
Total. (Colu	ımn (b) must equal Form 990, Part X, co	ol. (B) line 15.)				
Part X	Other Liabilities. Complete if the organization ansuline 25.	wered "Yes" to For	m 990), Part IV, line	11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability	(b) Book value		·		
(1) Federal II	ncome taxes	:				
(2) Post Re	tirement Benefit Obligation	47	29595			
(3)						
(4)						
(5)		·				
(6)						
(7)						
(8)						
(9)	7)					
	(b) must equal Form 990, Part X, col. (B) line 25.) ▶		29595			
	r uncertain tax positions. In Part XIII, provi 's liability for uncertain tax positions under					

					· ugc •
Par				Return.	
1	Complete if the organization answered "Yes" to Form 990, I Total revenue, gains, and other support per audited financial statements		, line 12a.	1 1	0550000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				9556930
а	Net unrealized gains (losses) on investments	2a		1	
b	Donated services and use of facilities			1	
C	Recoveries of prior year grants			1	
d	Other (Describe in Part XIII.)			1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	9556930
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.)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	9556930
Part	Reconciliation of Expenses per Audited Financial Stater Complete if the organization answered "Yes" to Form 990, I			er Return.	
1	Total expenses and losses per audited financial statements			1	0050070
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			' -	8659978
- а	Donated services and use of facilities	2a		1 1	
b	Prior year adjustments	2b		1	
C	Other losses	2c		1	
d	Other (Describe in Part XIII.)	2d		1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	8659978
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		<u> </u>	
b	Other (Describe in Part XIII.)	4b]	
C				4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin XIII Supplemental Information.	ne 18.)	<u> </u>	5	8659978
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				e 4; Part X, line
		<u>-</u>			
					·•••
				•••••	
				•••••	
			•••••		

Schedule D (For	m 990) 2014	Page 5
Part XIII	Supplemental Information (continued)	
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		-

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service **Compensation Information**

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

Compensated Employees

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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Jefferson Davis Electric Cooperative, Inc. 72-0362325 Part | Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No." complete Part III to 1b 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 2 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 ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations Approval by the board or compensation committee 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: 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c 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: 5a **b** Anv related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. 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: 6a Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 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 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

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)(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.

Note: The sum of columns (b)()-(iii) to	ממכ	I IIsted Interviolati IIIC	זו פקעמו וווס וטומו מווו			m) while his area area area	/_/ /_/	
(B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(f) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable	other deferred compensation	benefits	(a)-(i)(a)	in column (B) reported as deferred in prior Form 990
	8	124470.98		52476.16			176947.14	
1 Michael J. Heinen	(1)							
	Ξ	23862.99					23862.99	
2 Edwin Henry	€	P T T T T T T T T T T T T T T T T T T T						
	8	10858.08					10858.08	
3 Robert Sarver	€							
		10858.08					10858.08	
4 Louis Trahan	(E)							
	(1)							
5	€							
	(1)							
9	€							
	8							
_	€		111111111111111111111111111111111111111					
	€							
89	<u>(E)</u>							
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6	8						1	
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10	€							
	(8)							
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	(1)							
12	(E)							
	8							
13	€							
	8							
14	E							
	8							
15	E							
	<u> </u>							
16	E							

Schedule J (Form 990) 2014

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 or any additional information.	rovide the information or any addition
Part III Supplemental Information	Part III Su

SCHEDULE 0 (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

Open to Public

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization

Inspection Employer identification number

Jefferson Davis Electric Cooperative, Inc	72-0362325						
Jefferson Davis Electric Cooperative makes its governing documents and financial statements availab	le to the public upon request.						
The Form 990 is provided to the organization's auditor for review before mailing.							
Compensation for Key Officers is determined on a yearly basis by the Board of Directors of Jefferson Davis Electric.							
Members of the Cooperative have voting rights to elect the Board of Directors.							
Part XI Line 9:							
Board of Directors determines amount of capital credits to retire to heirs of deceased members on a year	early basis.						
······································							
							
······································							
	······						

NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORPORATION FINANCIAL AND STATISTICAL REPORT

BORROWER NAME Jefferson Davis Electric Cooperative In
BORROWER DESIGNATION L.A019
ENDING DATE 12/31/2014

Submit one electronic copy and one signed hard copy to CFC Round all numbers to the nearest dollar

CERTIFICATION

BALANCE CHECK RESULTS

We hereby certify that the entries in this report are in accordance with the accounts and other records of the system and reflect the status of the system to the best of our knowledge and belief

AUTHORIZATION CHOICES

Anya Kulling Sumature of Office Manager of Accountant

31615

Needs Attention

A. NRECA uses rural electric system data for legislative, regulatory and other purposes. May we arraide this report from your system to NRECA?



B. Will you authorize CFC to share your data with other cooperatives?



Signature of Office Manager or Accountant

Signature of Manager

3-16-15 Date

Matches

RT A. STATEMENT OF OPERATIONS

PART A. STATEMENT OF OPERATIONS		YEAR-TO-DATE					
ITEM	LAST YEAR	THIS YEAR	BUDGET	THIS MONTH			
	(a)	(b)	(c)	(d)			
l Operating Revenue and Patronage Capital	23,963,055	24,403,604	23,963,054	1,695,830			
2 Power Production Expense	0	0	0	C			
3 Cost of Purchased Power	14,681,126	15,057,078	14,681,125	1,212,011			
4 Transmission Expense	4,929	3,597	4,929				
5 Regional Market Operations Expense	0	0	0	(
6 Distribution Expense - Operation	1,715,110	1,632,154	1,715,109	153,155			
7 Distribution Expense - Maintenance	1,850,294	1,902,178	1,580,293	151,594			
8 Consumer Accounts Expense	652,439	737,869	652,439	67,409			
9 Customer Service and Informational Expense	13,641	13,459	13,641	0			
10 Sales Expense	5,875	6,833	5,785	474			
11 Administrative and General Expense	1,783,512	1,794,283	1,783,512	133,544			
12. Total Operation & Maintenance Expense (2 thru 11)	20,706,926	21,147,451	20,436,833	1,718,187			
13 Depreciation & Amortization Expense	1,662,895	1,652,780	1,662,895	148,288			
14 Tax Expense - Property & Gross Receipts	207,286	220,282	207,286	23,745			
15 Tax Expense - Other	71,040	37,877	71,040	66			
16 Interest on Long-Term Debt	683,367	610,498	683,366	48,500			
17 Interest Charged to Construction (Credit)	0	0	0	0			
18 Interest Expense - Other	46,492	13,234	46,492	518			
19 Other Deductions	12,029	34,934	12,028	2,757			
20. Total Cost of Electric Service (12 thru 19)	23,390,035	23,717,056	23,119,940	1,942,061			
21. Patronage Capital & Operating Margins (1 minus 20)	573,020	686,548	843,114	(246,231			
22 Non Operating Margins - Interest	28,561	28,325	28,561	2,402			
23 Allowance for Funds Used During Construction	0	0 (0	0			
24 Income (Loss) from Equity Investments	0	0	0	0			
25 Non Operating Margins - Other	0	o	0	0			
26 Generation & Transmission Capital Credits	. 0	o	0	0			
27 Other Capital Credits & Patronage Dividends	66,137	182,079	66,137	111,665			
28 Extraordinary Items	0	0	0	0			
29. Patronage Capital or Margins (21 thru 28)	667,718	896,952	937,812	(132,164)			

PART B. DATA ON TRANSMISSION AND DISTRIBUTION PLANT

	YEAR-T	O-DATE		YEAR-TO-DATE	
ITEM	LAST YEAR	THIS YEAR	ITEM	LAST YEAR	THIS YEAR
	(a)	(b)		(a)	(b)
New Services Connected	581	587	5 Miles Transmission	105	105
2 Services Retired	468	430	6 Miles Distribution Overhead	1,359	1,373
3 Total Services In Place	9,632	9,810	7 Miles Distribution Underground	26	28
4 Idle Services (Exclude Seasonal)	1,969	1,762	8. Total Miles Energized (5+6+7)	1,490	1,506



NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORPORATION FINANCIAL AND STATISTICAL DEPORT

BORROWER NAME

BORROWER DESIGNATION

LA019

ENDING DATE

12/31/2014

COOPERATIVE FINANCE CORPORA	ATION	BORROWER DESIGNATION	LA019
FINANCIAL AND STATISTICAL RE	PORT	ENDING DATE	12/31/2014
PART C. BALANCE SHEET		,	1
ASSETS AND OTHER DEBITS		LIABILITIES AND OTHER CREDITS	
Total Utility Plant in Service		29 Memberships	34,460
2 Construction Work in Progress		30 Patronage Capital	18,517,219
3. Total Utility Plant (1+2)		31 Operating Margins - Prior Years	(2,757,50)
4 Accum Provision for Depreciation and Amort		32 Operating Margins - Current Year	686,548
5. Net Utility Plant (3-4)		33 Non-Operating Margins	210,404
6 Nonutility Property - Net		34 Other Margins & Equities	4,808
7 Investment in Subsidiary Companies	···	35. Total Margins & Equities (29 thru 34)	16,695,931
8. Invest in Assoc Org - Patronage Capital		36 Long-Term Debt CFC (Net)	13,792,030
9 Invest in Assoc Org - Other - General Funds		37. Long-Term Debt - Other (Net)	13,7,2,
10 Invest in Assoc Org - Other - Nongeneral Funds		38. Total Long-Term Debt (36 + 37)	13,792,036
11 Investments in Economic Development Projects		39 Obligations Under Capital Leases - Non current	13,752,030
12. Other Investments		40 Accumulated Operating Provisions - Asset Retirement Obligations	4,729,595
13 Special Funds		41. Total Other Noncurrent Liabilities (39+40)	4,729,595
14. Total Other Property & Investments (6 thru 13)		42 Notes Payable	400,000
15 Cash-General Funds		43 Accounts Payable	1,512,889
16 Cash-Construction Funds-Trustee		44 Consumers Deposits	
17 Special Deposits		45 Current Maturities Long-Term Debt	172,049
18 Temporary Investments		46 Current Maturities Long-Term Debt-Economic Dev	1,007,679
19 Notes Receivable - Net			0
	1	47. Current Maturities Capital Leases	105.070
20 Accounts Receivable - Net Sales of Energy	 	48 Other Current & Accrued Liabilities	105,878
21 Accounts Receivable - Net Other		49. Total Current & Accrued Liabilities (42 thru 48)	3,198,495
22 Renewable Energy Credits		50 Deferred Credits	4,919,653
23 Materials & Supplies - Electric and Other 24 Prepayments	- 	51. Total Liabilities & Other Credits (35+38+41+49+50)	43,335,704
25 Other Current & Accrued Assets	11,262	ESTIMATED CONTRIBUTION-IN-AID-OF-CONSTRUCTION	
	1		T
26. Total Current & Accrued Assets (15 thru 25) 27 Deferred Debits		Balance Beginning of Year	527.500
27 Deferred Debits	2,393,211	Amounts Received This Year (Net)	537,500
28. Total Assets & Other Debits (5+14+26+27)	43,335,704	TOTAL Contributions-In-Aid-Of-Construction	537,500
PART D: THE SPACE BELOW IS PROVIDED FOR IMPO	RTANT NOTES REGA	ARDING THE FINANCIAL STATEMENT CONTAINED IN THIS	REPORT.
Ca	sh received from Patror	nage Capital refunds \$79,647 00	
		· · · · · · · · · · · · · · · · · · ·	
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L		NATIONAL R	NATIONAL RURAL UTILITIES	ES			BORROWER NAME	ME		Jefferson Davis
	8	COOPERATIVE FII	VE FINANCE CORPORATION	RATION			BORROWER DESIGNATION	SIGNATION		LA019
			AND STATISTICAL REPORT	EPORT			ENDING DATE			12/31/2014
Ž	PART L. KWH PURCHASED AND TOTAL COST	ĺ,	, J	ď,	,			- 4		
								INCLU	INCLUDED IN TOTAL COST	оѕт
			RENEWABLE	•	-				WHEELING &	
		CFC USE ONLY	ENERGY	RENEWARIE	KWH		AVERAGE COST PER	FUEL COST	OTHER CHARGES (or	
	NAME OF SUPPLIER	CODE	NAME	FUEL TYPE	PURCHASED	TOTAL COST	KWH (cents)	ADJUSTMENT	Credits)	COMMENTS
	(a)	(e)	(c)	(g)	(e)	Œ	(g)	(h)	(i)	Э
Ŀ	Louisiana Generating			0 None	273,946,023	14,726,081	5 38	7,491,258	2,895,270	Comments
2	Southwestern Power Administration			0 None	7,663,092	330,997	4 32	0	0	0 Comments
1-				0 None	0	0	00.0	0	0	 Comments
4				0 None	0	0	000	0	0	0 Comments
~				0 None	0	0	000	0	0	0 Comments
ي ا				0 None	0	0	000	0	0	O Comments
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2				0 None	0	0	000	0	0	0 Comments
=				0 None	0	0	000	0	0	Comments
12				0 None	0	0	000	0	0	Comments
13				0 None	0	0	000	0	0	O Comments
4				0 None	0	0	00'0	0	0	Comments
5				0 None	0	0	000	0	0	Comments
16				0 None	0	0	000	0	0	O Comments
12				0 None	0	0	000	0	0	Comments
28				0 None	0	0	0.00	0	0	O Comments
19				0 None	0	0	000	0	0	0 Comments
8				0 None	0	0	00'0	0	0	Comments
77	TOTALS				281,609,115	15,057,078	535	7,491.258	2,895,270	



L	TT A LA	the state of the s	4						'
	IAI	NATIONAL KUKAL UTILITIES	S			BORROWER NAME	AME		Jefferson Davis
	COOPERA	COOPERATIVE FINANCE CORPORATION	RATION			BORROWER DESIGNATION	ESIGNATION		LA019
	FINANCIA	FINANCIAL AND STATISTICAL REPORT	EPORT			ENDING DATE			12/31/2014
Ā	PART E. CHANGES IN UTILITY PLANT								
	PLANT ITEM	BALANCE BEGINNING OF YEAR (a)	INING OF YEAR	ADDITIONS (b)	RETIREMENTS (c)	MENTS	ADJUSTMENTS AND TRANSFER (d)	BALANCE END OF YEAR	D OF YEAR
[Distribution Plant Subtotal		31,888,572	4,021,288		240,961	0		35,668,899
7	General Plant Subtotal		3,813,774	338,091		164,209	0		3,987,656
m			1,065,794	1,826,523		0	0		2,892,317
4	Intangibles		0	0		0	0		0
S	Transmission Plant Subtotal		4,211,464	60,620		3,677	0		4.268,407
9			0	0		0	0		0
7			0	0		0	0		0
∞	Production Plant - Nuclear		0	0		0	0		0
6	Production Plant - Hydro		0	0		0	0		0
2	0 Production Plant - Other		0	0		0	0		0
Ξ	1 All Other Utility Plant		0	0		0	0		0
12	2 SUBTOTAL: (1 thru 11)		40,979,604	6,246,522		408,847	0		46,817,279
13	Construction Work in Progress		3,536,940	(3,071,806)					465,134
Ě	14 TOTAL UTILITY PLANT (12+13)		44,516,544 3,174,716	3,174,716		408,847	0		47,282,413
		CFC NO LONGER REQUIRES SECTIONS "F", "G", AND "N" DATA Those sections refer to data on "Analysis of Accumulated Provision for Depreciation" (F), "Materials and Supplies" (G), "Annual Meeting and Board Data" (R), and "Conservation Data" (P).	NGER REQUIRES o data on "Analysis (G), "Annual Meetin	SECTIONS "F", " of Accumulated Pr ng and Board Data'	G", AND "N" DA ovision for Depreci '(N), and "Conser	fA ation" (F), vation Data" (P).			
ַ≾	PART H. SERVICE INTERRUPTIONS								
L	Avg. M	Minutes per Consumer by Cause	Avg. Minutes per Consumer by Cause	r Consumer by	Avg. Minutes per Consumer by Cause	r Consumer by	Avg. Minutes per Consumer by Cause	onsumer by Cause	TOTAL
	TAICH LE	Power Supplier	Major Event (b)	Svent	Planned (c)	pp	All Other (d)	her	9
_	Present Year			114 00		0 03		2 05	162.88
7	Five-Year Average	71 89		179 28		1 23		163 88	416.28
۲	PART I. EMPLOYEE - HOUR AND PAYROLL STATIST	TICS							
_	Number of Full Time Employees			41 4	4 Payroll - Expensed	Pa			586,077
7				_	5 Payroll - Capitalized	zed			339,239
٣	Employee - Hours Worked - Overtune			7,277	6 Payroll - Other				349,587
2	PART J. PATRONAGE CAPITAL					PARTK. DUEFS	DUE FROM CONSUMERS FOR ELECTRIC SERVICE	FOR ELECTRIC SE	RVICE
	ITEM			EAR	VITVE	1. Amount Due Over 60 Days:			
٦	Canara Detrament			(B)	(a)	700	103,309	_	
. 2	${}^{-}$			72.529	1 689 281	. Amount William	18 000		
က်				72,529	1996681				
4	Cash Received from Retirement of Patronage Capital by Suppliers of Electric Power	Suppliers of Electric Power		0					
~		Lenders for Credit Extended to	the Electric System	79,647	د سانو ۲۰		4 ,	n Air	,
છં	. Total Cash Received (4+5)			79,647	.				



NATIONAL RURAL UTILITIES BORROWER NAME Jefferson Davis COOPERATIVE FINANCE CORPORATION BORROWER DESIGNATION LA019 FINANCIAL AND STATISTICAL REPORT ENDING DATE 12/31/2014

	FINANCIAL AND STATISTICAL REPORT	ENDING DATE	12/31/2014
PART I	L. KWH PURCHASED AND TOTAL COST (Continued)		
	CO	MMENTS	
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NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORPORATION FINANCIAL AND STATISTICAL REPORT

BORROWER NAME

BORROWER DESIGNATION

LA019

ENDING DATE

12/31/2014

PART M. LONG-TERM LEASES (If additional space is needed, use separate sheet)

	LIST BELOW ALL "RESTRICTED PROPERTY	" ** HELD UNDER "LONG TERM" L	EASE (If none, State "NONE")	
	NAME OF LESSOR	TYPE OF PROPERTY	RENTAL THIS YEAR	
1	Howard Hughes	Long Term		\$2,863
2	J. A. Davis Properties, LLC	Long Term		\$450
3			TOTAL	\$3,313

** "RESTRICTED PROPERTY" means all properties other than automobiles, trucks, tractors, other vehicles (including without limitation aircraft and ships), office and warehouse space and office equipment (including without limitation computers) "LONG TERM" means leases having unexpired terms in excess of 3 years and covering property having an initial cost in excess of \$250,000)

PART O	L- LONG	3-TERM DE	BT SERVI	CE REQ	UIREMENTS
--------	---------	-----------	----------	--------	-----------

			BILLED THIS YEAR		
NAME OF LENDER	BALANCE END OF	INTEREST	PRINCIPAL	TOTAL	CFC USE ONLY
	YEAR	(a)	(b)	(c)	(d)
National Rural Utilities Cooperative Finance Corporation	14,799,709	610,497	997,349	1,607,846	
2 NCSC	0	0	0	0	1
3 Farmer Mac	0	0	0	0	
4	0	0	0	0	
5	0	0	0	0	
6	0	0	0	0	
7	0	0	0	0	
8	0	0	0	0	
9	0	0	0	0	
10 Principal Payments Received from Ultimate Recipients of IRP Loans	1 100 mg/s	到 新人 小人	0	1272	
11 Principal Payments Received from Ultimate Recipients of REDL Loans			0		
12 TOTAL (Sum of 1 thru 9)	\$14,799,709	\$610,497	\$997,349	\$1,607,846	The state of the s



NATIONAL RURAL UTILITIES BORROWER NAME Jefferson Davis COOPERATIVE FINANCE CORPORATION BORROWER DESIGNATION LA019 FINANCIAL AND STATISTICAL REPORT ENDING DATE 12/31/2014 PART R. POWER REQUIREMENTS DATA BASE DECEMBER TOTAL KWII SALES CONSUMER, SALES, AND JANUARY CONSUMERS CONSUMERS AVERAGE AND REVENUE CONSUMERS CLASSIFICATION REVENUE DATA (b) (c) (d) (a) 6,914 6,886 6,900 No Consumers Served Residential Sales (excluding seasonal) KWH Sold 119,147,904 Revenue 11,169,420 No Consumers Served 1,076 1,142 1.109 Residential Sales b KWH Sold Seasonal 8,183,806 Revenue 889,510 Irrigation Sales No Consumers Served 134 157 146 KWH Sold 12,186,285 Revenue 1,505,529 886 1.328 1.107 Corram and Ind No Consumers Served b KWH Sold 1000 KVA or Less 23,452,231 Revenue 2,446,160 Comm and Ind No Consumers Served 1,239 213 726 Over 1000 KVA b. KWH Sold 99,060,801 Revenue 7,865,693 No Consumers Served 42 41 Public Street & Highway 40 Lighting KWH Sold 285,323 Revenue 30,464 0 0 0 Other Sales to Public No Consumers Served Authority KWH Sold 0 Revenue 0 Sales for Resales-RUS 0 0 No Consumers Served 0 KWH Sold Borrowers 0 Revenue 0 0 Sales for Resales-Other No Consumers Served 0 0 KWH Sold 0 Revenue 0 10. TOTAL No. of Consumers (lines 1a thru 9a) 10,291 9.766 10.029 TOTAL KWH Sold (lines 1b thru 9b) 262,316,350 TOTAL Revenue Received From Sales of Electric Energy (line 1c thru 9c) 23,906,776 Transmission Revenue Other Electric Revenue 496,828 KWH - Own Use 60,853 TOTAL KWH Purchased 281,609,115 TOTAL KWH Generated 18 Cost of Purchases and Generation 15,060,675 Interchange - KWH - Net Peak - Sum All KW Input (Metered) 67,208 Non-coincident **●**Coincident



NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORPORATION FINANCIAL AND STATISTICAL REPORT

BORROWER NAME

BORROWER DESIGNATION

LA019

ENDING DATE

12/31/2014

PART S	ENERGY EFFICIENCY PROGRAMS						
			Added This Year			Total To Date	
Line #	Classification	Number of Consumers (a)	Amount Invested (b)	ESTIMATED MMBTU Savings (c)	Number of Consumers (d)	Amount Invested (e)	ESTIMATED MMBTU Savings (1)
1	Residential Sales (excluding seasonal)	0	0	0	0	0	0
2	Residential Sales - Seasonal	0	0	0	0	0	0
3	Imgation Sales	0	0	0	0	0	0
4	Comm. and Ind. 1000 KVA or Less	0	0	0	0	0	0
5.	Comm. and Ind Over 1000 KVA	0	0	0	0	0	0
6	Public Street and Highway Lighting	0	0	0	0	0	0
7	Other Sales to Public Authorities	0	0	0	0	. 0	0
8	Sales for Resales - RUS Borrowers	0	0	0	0	0	0
9	Sales for Resales - Other	0	0	0	0	0	0
10.	TOTAL	0	0	0	0	0	0



BORROWER NAME Jefferson Davis NATIONAL RURAL UTILITIES BORROWER DESIGNATION COOPERATIVE FINANCE CORPORATION I A019 FINANCIAL AND STATISTICAL REPORT ENDING DATE 12/31/2014 (All investments refer to your most recent CFC Loan Agreement) 7a - PART 1 - INVESTMENTS DESCRIPTION INCLUDED (S) EXCLUDED (S) INCOME OR LOSS (c) (b) (d) INVESTMENTS IN ASSOCIATED ORGANIZATIONS CFC 565,317 CoBank 207,312 Arkansas Electric 290,809 Investments in Associated Organizations 610,202 1,466,328 207,312 Subtotul (Line 5 thru 8) **INVESTMENTS IN ECONOMIC DEVELOPMENT PROJECTS** 10 11 12 Subtotal (Line 9 thru 12) 0 0 4. OTHER INVESTMENTS 13 14 15 16 Subtotal (Line 13 thru 16) 0 0 S. SPECIAL FUNDS 18 19 20 Subtotal (Line 17 thru 20) CASH-GENERAL JD Bank 81,556 21 Jennings Petty Cash 1,000 23 24 Subtotal (Line 21 thru 24) 82,556 0 7. SPECIAL DEPOSITS 25 26 27 28 Subtotal (Line 25 thru 28) 0 TEMPORARY INVESTMENTS CFC Daily Fund 93,270 Rate Savings Account 10 30 31 32 Subtotal (Line 29 thru 32) 10 93,270 9. ACCOUNT & NOTES RECEIVABLE - NET All other (various billings) 33 224,181 34 35 36 224,181 Subtotal (Line 33 thru 36) 0 10. COMMITMENTS TO INVEST WITHIN 12 MONTHS BUT NOT ACTUALLY PURCHASED 37 38 39 40 Subtotal (Line 37 thru 40) Total 514,059 1,559,598 ō 2014 yed cic_form7.xism Page 1 of 1



	NATIONAL RURAL UTILITIES		BORROWER NAM	E	Jefferson Davis	
Ì	· COOPERATIVE FINANCE CORPORATION	:	BORROWER DESI	GNATION	LA019	
	FINANCIAL AND STATISTICAL REPORT		ENDING DATE		12/31/2014	
	(All investments refe	r to your most recen	t CFC Loan Agreemer	nt)		
7a - P/	ART IL LOAN GUARANTEES					
Line No	Organization & Guarantee Beneficiary (a)	Maturity Date of Guarantee Obligation (b)	Original Amount (\$) (c)	Performance Guarantee Exposure or Loan Balance (\$) (d)	Available Loans (Covered by Guarantees) (e)	
1			0	0	0	
2			0	0	0	
3		L		0	0	
4			0	0	0	
5		. In and the state of the state of	0	0	0	
	ALS (Line 1 thru 5)	1. 经营业	0_	0	0	
7a - P/	ART III. LOANS	· · · · · · · · · · · · · · · · · · ·				
Line No	Name of Organization (a)	Maturity Date (b)	Original Amount (\$) (c)	Loan Balance (\$) (d)	Available Loans (e)	
1			0	0	0	
2			0	0	0	
3			0	0	0	
4_			0	0	0	
5		1 Q. 30, 1 4, 2 1 1 1 1 1	0	0	0	
	LS (Line 1 thru 5)	ا الله الله الله الله الله الله الله ال	0	0	0	
7a - PA	ART IV. TOTAL INVESTMENTS AND LOANS GUARANTEES			· · · · · · · · · · · · · · · · · · ·		
1	TOTAL (Part I, Total - Column b + Part II, Totals - Column d + Colum	ın e + Part III, Totals -	Column d + Column e)		514,059	
	LARGER OF (a) OR (b)			# 000 000	8,347,966	
	a 15 percent of Total Utility Plant (CFC Form 7, Part C, Line 3) b 50 percent of Total Equity (CFC Form 7, Part C, Line 35)			7,092,362 8,347,966		

JEFFERSON DAVIS ELECTRIC COOPERATIVE, INC. EMPLOYER I.D. #72-0362325 2014 FORM 990 RETURN SCHEDULE NO.2- PART IX- LINE 24a

OTHER EXPENSES:

Transmission Expense	\$ 3,597.00
Distribution Expense - Operations	\$ 1,632,154.00
Distribution Expense - Maintenance	\$ 1,902,178.00
Consumer Accounts Expense	\$ 737,869.00
Customer Service & Information Expense	\$ 13,459.00
Sales Expense	\$ 6,833.00
Administrative & General Expense	\$ 1,420,261.00
Tax Expense	\$ 258,159.00
Interest Expense	\$ 623,732.00
Depreciation & Amortization Expense	\$ 1,652,780.00
Other Miscellaneous Deductions	\$ 34,934.00
TOTAL OTHER EXPENSES	\$ 8,285,956.00