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DLN: 93493226012065

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	014 ca	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014				
B Che	eck if ap	plicable	C Name of organization ROOSEVELT COUNTY ELECTRIC COOPERATIVE INC		D Employe	er ider	ntification number
┌ Add	ress cha	ange	ROOSEVEET COUNTY ELECTRIC COOPERATIVE INC		85-006	5332	2
┌ Nar	ne chan	ge	Doing business as				
┌ Init	ıal returi	n			E Telephon	e numl	har
Fina	al ,		Number and street (or P O box if mail is not delivered to street address) Room/suit BOX 389	е			
	ırn/term 				(575)3	56-4	491
_	ended re		City or town, state or province, country, and ZIP or foreign postal code PORTALES, NM 881300389		G Gross rec	eipts \$	18,522,549
I App	lication	pending					<u> </u>
			F Name and address of principal officer JERRY W PARTIN	H(a) Is the	s a group r dinates?	eturn	for
			BO X 389	Suboi	umates		j 1 es j• 110
			PORTALES,NM 881300389	H(b) Are a		ates	┌ Yes ┌ No
	k-exemi	pt status	5	ınclud If "No		ılıst	(see instructions)
- 1 W	oheito	• - - \//\	WW RCEC ORG				
					p exemptio		
K Forr	n of org	anızatıoı	n	L Year of for	mation 1940	<u>M</u>	State of legal domicile 1
Pa	rt I	Sun	nmary			·	
			describe the organization's mission or most significant activities		ıc		
a		U PRC	OVIDE ELECTRIC ENERGY TO RURAL AREAS AT COST ON A COOPE	KATIVE DAS	15		
Ě	_						
Ě	, -	hock t	:his box ► if the organization discontinued its operations or disposed of	more than 2	E% of its n	ot ac	cotc
Governance	2	. HECK (inis box F in the organization discontinued its operations of disposed of	more than 2	J /0 OI ICS II	iet as.	5615
26	3 N	lumber	of voting members of the governing body (Part VI, line 1a)		. [3	7
Activities	4 N	lumber	of independent voting members of the governing body (Part VI, line 1b)		. [4	7
Ĭ			umber of individuals employed in calendar year 2014 (Part V, line 2a) .			5	55
a ब			umber of volunteers (estimate if necessary)		• •	6	0
			nrelated business revenue from Part VIII, column (C), line 12 elated business taxable income from Form 990-T, line 34		• •	7a	0
	DIV	iet uiii	erated business taxable income from Form 990-1, line 34		r Year	7b	Current Year
	8	Contr	ributions and grants (Part VIII, line 1h)	F110	i reai	0	0
₽	9		am service revenue (Part VIII, line 2g)		16,911,31	-	17,518,557
Rayenue	10		stment income (Part VIII, column (A), lines 3, 4, and 7d)		230,72		217,288
<u>#</u>	11	Other	r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,64	11	2,311
	12		${\tt revenue-add\ lines\ 8\ through\ 11\ (must\ equal\ Part\ VIII,\ column\ (A\),\ line}$		17,143,67	70	17,738,156
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		1,45	_	2,350
	14		fits paid to or for members (Part IX, column (A), line 4)		1,166,47	_	1,061,093
	15		ies, other compensation, employee benefits (Part IX, column (A), lines		2,177,24		2,276,594
8		5-10			2,1//,2-	_	
Expenses	16a		ssional fundraising fees (Part IX, column (A), line 11e)			0	0
五	b	Total f	undraising expenses (Part IX, column (D), line 25) ▶ 0				
	17		r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		13,797,79	_	14,374,629
	18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		17,142,95	-	17,714,666
. 07	19	Revei	nue less expenses Subtract line 18 from line 12	+		2.3	23,490
Not Assets or Fund Balances					of Current ear	`	End of Year
SS. Bafa	20	Total	assets (Part X, line 16)		48,364,77	7 5	48,729,377
# # # # # # # # # # # # # # # # # # #	21	Total	liabilities (Part X, line 26)		32,419,21	1 2	31,966,391
	22		ssets or fund balances Subtract line 21 from line 20		15,945,56	5 3	16,762,986
	t II		nature Block				
			perjury, I declare that I have examined this return, including accompany belief, it is true, correct, and complete Declaration of preparer (other the				
			knowledge	·			
		***	***	20	15-08-13		
Sign		Sign	nature of officer	Da			
Here	•		RY W PARTIN EXECUTIVE VICE PRESIDENT & GEN MGR				
		<u> </u>	e or print name and title Print/Type preparer's name Preparer's signature Da	ite	. = 1-	PTIN	
Paid				1 = 00 12 CITE		P00439	459
			Firm's name BOLINGER SEGARS GILBERT AND MOSS LLP	Firm	's EIN 🕨 75-	088203	37
	pare Only		Firm's address ► 8215 NASHVILLE AVENUE	Phor	ne no (806)	747-38	306
USE	JIII)	y	LUBBOCK, TX 79423				

(Expenses \$ including grants of \$

Total program service expenses ►

) (Revenue \$

Part IV	Chec	klist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 22 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
C	gaming (gambling) winnings to prize winners?	1 c		
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			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
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		No
h	If "Yes," enter the name of the foreign country			
U	See instructions for filing requirements for FinCEN Form 114, Report 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		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
6-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
oa	organization solicit any contributions that were not tax deductible as charitable contributions?	oa		NO
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	The which the organization is need to issue qualified fleatin plans			
		 14-	 	NI o
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		Νo

Section A. Governing Body and Management

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

Check if 3 chedule 0 contains a response of note to any fine in this rait vi	Check if Schedule C	contains a response or note to any line in this Part VI														
--	---------------------	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		N o
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			No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R		ie Cod	
	Takion bi i ondies (This Section b requests information about policies not required by the Internal R	CVCIIC	Yes	No.
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		
	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		Yes	
11a	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?		Yes	
11a b	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?	11a		
11a b 12a	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?	11a	Yes	No
11a b 12a b	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?	11a		No No
11a b 12a b	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	11a 12a 12b		
11a b 12a b	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	11a 12a 12b	Yes	
11a b 12a b c	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?	11a 12a 12b 12c 13	Yes	No
11a b 12a b c 13	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	11a 12a 12b 12c 13	Yes	No
11a b 12a b c 13 14 15	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?	11a 12a 12b 12c 13	Yes	No
11a b 12a b c 13 14 15	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	11a 12a 12b 12c 13	Yes	No
11a b 12a b c	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?	11a 12a 12b 12c 13 14	Yes	No
11a b 12a b c 13 14 15	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	11a 12a 12b 12c 13 14	Yes	No
11a b 12a b c 13 14 15 a b	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	11a 12a 12b 12c 13 14 15a	Yes	No
11a b 12a c 13 14 15 a b 16a b	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	11a 12a 12b 12c 13 14 15a 15b	Yes	No
11a b 12a c 13 14 15 a b 16a b	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	11a 12a 12b 12c 13 14 15a 15b	Yes	No
11a b 12a b c 13 14 15 a b 16a b	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? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	11a 12a 12b 12c 13 14 15a 15b	Yes	No

Own website Another's website Vupon request Other (explain in Schedule O)

- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records 20 ►DEBORAH GOFF ACCOUNTINGFINANCE MANAGER

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h ar or/tr	chenicie he unicie he Highest compensated chiphest compensated	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) EVELYN LEDBETTER PRESIDENT	2 80	Х		х				8,789	0	0
(2) WESLEY BROWN VICE PRESIDENT	2 00	Х		х				7,770	0	0
(3) DAVE SANDERS SEC/TREAS	1 20	Х		х				7,770	0	0
(4) BILL CATHEY TRUSTEE	2 60	х						8,789	0	0
(5) DARRELL CAVINESS TRUSTEE	1 90	Х						8,789	0	0
(6) GENE CREIGHTON TRUSTEE	2 80	Х						9,105	0	0
(7) KENNETH COX TRUSTEE	1 10	Х						8,112	0	0
(8) JERRY PARTIN EXECUTIVE VP & GM	45 00			х				134,369	0	125,377
(9) DEBORAH GOFF ACCOUNTING & FINANCE MGR	40 00			х				76,318	0	55,023

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				unless officer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	•			
c	Total from continuation sheets to Part VII, Section A	F			
d	Total (add lines 1b and 1c)	۰	269,811	0	180,400

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►1

			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee				
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such</i>				
	ındıvıdual	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No	

Section B. Independent Contractors

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

Description of services	Compensation
_	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

	1a
rants	b
s, G	С
Giff ìilar	d
ons, Sirr	e f
ibuti ther	
Contributions, Giffs, Grants and Other Similar Amounts	b c d e f
æver	b
лсе F	С
Ser	d e
Program Serwce Revenue	f
<u>~</u>	2a b c d e f
	4
	4 5
	l 6a
	b
	q C
	/ a
	b
	c
	а 8а
venue	
er Re	
₽	C
	9a
	b
	4.0
	10a
	b
	11a
	b c
	d
	e

VIII	Statement of Check of Sched		oonse or note to any li	ne in this Part VIII	<u> </u>		<u>.</u>
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns	La				
b	Membership du	ies	Lb				
C	Fundraising ev	ents	1c				
d	Related organiz	zations	Ld				
e	Government grant	s (contributions)	Le				
f	All other contribution	ons, gifts, grants, and ot included above	1f				
g	Noncash contributi 1a-1f \$	ons included in lines					
h	Total. Add line:	s 1 a - 1 f					
			Business Code				
2a	ELECTRIC SALES		221000	16,736,320	16,736,320		
b	POWER SUPPLY RE	EVENUE	221000		683,765		
c	PATRONAGE DIVID	ENDS	221000	69,407	69,407		
d	SERVICE FEES	_	221000	29,065	29,065		
e							
f	All other progra	am service revenue					
g	Total. Add line:	s 2a-2f		17,518,557			
3		ome (including divid					
		aramounts)		230,007			230,007
5		stment of tax-exempt bo					
3	Royalties .	(ı) Real	(II) Personal				
6a	Gross rents	(1) 11521	540				
b	Less rental expenses		0				
c	Rental income		540				
d	or (loss) Net rental inco	l me or (loss)		540			540
		(ı) Securities	(II) O ther				
7a	Gross amount from sales of assets other	755,823					
ь	than inventory Less cost or other basis and	768,542					
	sales expenses Gain or (loss)	-12,719					
d	, ,	ss)		-12,719			-12,719
8a		rom fundraising					
	\$of contributions See Part IV , lir	s reported on line 1c ne 18)				
			а				
b		penses	b				
C 9a		(loss) from fundraisii Trom gaming activitie					
34		ne 19	a				
b	Less direct ex	penses	b				
c	Net income or	(loss) from gamıng a	ctivities				
10a	Gross sales of returns and allo		16,191				
Ь	less costofa	oods sold l	· -				
	=	(loss) from sales of ı		340	340		
	Mıscellaneou		Business Code				
11a	LOAN SERVIC	E FEE	522299	1,431			1,431
b							
С							
d		ue					
e	Total. Add lines	s 11a-11d	🕨	1,431			
12	Total revenue.	See Instructions .		17,738,156	17,518,897	0	219,259

		Statement of Functional Expenses						
Sectio	ction 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 F	Part IX					
		ude amounts reported on lines 6b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1		ts and other assistance to domestic organizations and estic governments See Part IV, line 21	2,350					
2		ts and other assistance to domestic iduals See Part IV, line 22	,					
3	gove	ts and other assistance to foreign organizations, foreign rnments, and foreign individuals See Part IV, lines 15						
4		fits paid to or for members	1,061,093					
5		pensation of current officers, directors, trustees, and employees	450,211					
6	(as d	pensation not included above, to disqualified persons efined under section 4958(f)(1)) and persons ribed in section 4958(c)(3)(B)						
7	Othe	r salaries and wages	1,315,679					
8		ion plan accruals and contributions (include section 401(k) 403(b) employer contributions)	178,283					
9		r employee benefits	217,097					
10		oll taxes	115,324			_		
11	-	for services (non-employees)						
а	Mana	agement						
ь		1						
c	_	punting						
d		ying						
e		essional fundraising services See Part IV, line 17						
f		stment management fees						
g g	Othe	r (If line 11g amount exceeds 10% of line 25, column (A)						
12		ertising and promotion						
13		e expenses						
14		mation technology						
15		Ities						
16	-	upancy						
10 17		el						
18	Paym	nents of travel or entertainment expenses for any federal,						
19		erences, conventions, and meetings						
20		rest	1,005,747					
21		nents to affiliates	, , , , , , , , , , , , , , , , , , , ,					
22		eciation, depletion, and amortization	1,419,582					
23		rance	, , <u>-</u>					
24	Othe	r expenses Itemize expenses not covered above (List ellaneous expenses in line 24e If line 24e amount exceeds 10% e 25, column (A) amount, list line 24e expenses on Schedule O)						
а	PURG	CHASED POWER	10,195,122					
b	DIST	RIBUTION EXPENSE	1,057,111					
c	ADM	IN & GEN EXPENSE	426,970					
d	CON	SUMER CUSTOMER	222,876					
e	Allot	ther expenses	47,221					
25	Total	functional expenses. Add lines 1 through 24e	17,714,666					
26	repor educ	costs. Complete this line only if the organization red in column (B) joint costs from a combined ational campaign and fundraising solicitation. Check Tiffollowing SOP 98-2 (ASC 958-720)	·					

Part X Balance Sheet

Fal	T X	Check if Schedule O contains a response or note to any line in	this Pa	art X		•	· · · · ·
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			440,236	1	435,885
	2	Savings and temporary cash investments				2	250,000
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,369,585	4	1,421,034
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete Paschedule L	art II d	of		5	
ts	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contril mploy	outing employers		6	
Assets	7	Notes and loans receivable, net			1,794,662	7	1,951,881
	8	Inventories for sale or use			514,513	-	491,045
	9	Prepaid expenses and deferred charges			1,588,377	9	1,485,119
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		57,195,676	, ,	9	1,400,110
	ь	Less accumulated depreciation	10b	21,397,765	35,236,577	10c	35,797,911
	11	Investments—publicly traded securities			3,608,189	11	2,476,230
	12	Investments—other securities See Part IV, line 11			, ,	12	<u> </u>
	13	Investments—program-related See Part IV, line 11			3,213,752	13	3,913,370
	14	Intangible assets			, ,	14	<u> </u>
	15	Other assets See Part IV, line 11			598,884	15	506,902
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			48,364,775	16	48,729,377
	17	Accounts payable and accrued expenses			1,210,082	17	1,125,757
	18	Grants payable		18	.,		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Scho		21			
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali		21			
Liabiliti		persons Complete Part II of Schedule L				22	
Ï	23	Secured mortgages and notes payable to unrelated third partie			28,031,577	23	27,322,104
	24	Unsecured notes and loans payable to unrelated third parties				24	_
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	ted th	rd parties,			
		D			3,177,553	25	3,518,530
	26	Total liabilities. Add lines 17 through 25			32,419,212	26	31,966,391
ce s		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	┌ and	complete			
lan I	27	Unrestricted net assets				27	
8	28	Temporarily restricted net assets	•			28	
돧	29	Permanently restricted net assets				29	
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check h	ere 🟲	✓ and			
5		complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			0	30	0
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			0	31	0
	32	Retained earnings, endowment, accumulated income, or other			15,945,563	32	16,762,986
Š	33	Total net assets or fund balances			15,945,563	33	16,762,986
	34	Total liabilities and net assets/fund balances			48,364,775	34	48,729,377

Pai	Reconcilliation 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		17,7	738,156
2	Total expenses (must equal Part IX, column (A), line 25)	2		17,7	714,666
3	Revenue less expenses Subtract line 2 from line 1	3			23,490
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		15,9	945,563
5	Net unrealized gains (losses) on investments	5			21,218
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			772,715
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		16,7	762,986
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	<u> </u>
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	arate			
	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 oversigl audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

DLN: 93493226012065

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

mai	Revenue Service 1111 of that for a boat schedule b (1 of the	1 330) and its instructions is at www.	3.g01/	
	ne of the organization SEVELT COUNTY ELECTRIC COOPERATIVE INC			oloyer identification number
	Organizations Maintaining Days Ad-	sized Funds on Other Circles		0065332
?a	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.		
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year		_	
	Aggregate value of contributions to (during year)		_	
	Aggregate value of grants from (during year)		_	
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	-	nor adv	rsed Yes No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the beneft conferring impermissible private benefit?			
a r	t II Conservation Easements. Complete if	the organization answered "Yes"	to Forr	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)	certifie	rically important land area d historic structure m of a conservation
	easement on the last day of the tax year			
				Held at the End of the Year
l	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements		2b	
	Number of conservation easements on a certified histo	. ,	2c	
	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transferr	ed, released, extinguished, or terminat	ed by th	ne organization during
	the tax year ►			
	Number of states where property subject to conservati	on easement is located 🗠		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	he periodic monitoring, inspection, har	ndling of	f violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments	during the year
	A mount of expenses incurred in monitoring, inspecting	and enforcing conservation easemen	ts durin	a the year
	►\$, and emoterny conservation easemen	es dumi	g the year
	Does each conservation easement reported on line 2(c and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ction 1	70(h)(4)(B)(ı) Yes No
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia		
Ti	Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar Assets.
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education	, or rese	earch in furtherance of public
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education		
	(i) Revenue included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			► \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
	Revenue included in Form 990, Part VIII, line 1			▶ \$
)	Assets included in Form 990, Part X			F \$

Part	TIT Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	<u>cal Ti</u>	<u>reası</u>	<u>ures, or O</u>	the	<u>r Simil</u>	<u>ar As</u>	sets (c	<u>ontınued)</u>
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, ch	neck	any of	the fol	llowing that a	are a	significa	ant use	of its	
а	Public exhibition		d	Γ	Loan	orexc	change progr	ams				
b	Scholarly research		e	Γ	Othe	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and expla	ın hov	v the	y furth	er the	organızatıon	ı's e>	cempt pu	rpose ı	n	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part c	of the	organ	ızatıon	n's collection	۱?			☐ Yes	┌ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answere	d "Y	es" to F	orm 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	for c	ontribi	utions	or other ass	ets	not		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ving t	able							
										An	nount	
C	Beginning balance						<u> </u>	1 c				
d	Additions during the year						<u> </u>	1d				
e	Distributions during the year						L	1e				
f	Ending balance							1f				
2a b	Did the organization include an amount on Fo									,	│ Yes	Г № Г
	If "Yes," explain the arrangement in Part XII rt V Endowment Funds. Complete i											•
Fa	Endowment Funds. Complete	(a)Current year)Prior			Two years back				(e)Four y	ears back
1a	Beginning of year balance								•			
b	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships							+				
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end baland	ce (lın	e 1g	, colum	nn (a))	held as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment 🕒											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	ıld equal 100%										
За	Are there endowment funds not in the posses	ssion of the organiza	ation 1	that	are hel	danda	administered	d for	the			
	organization by										Yes	No
	(i) unrelated organizations			•		•		•		. 3a(_	
ь	(ii) related organizations							•		. 3a(<u> </u>
4	Describe in Part XIII the intended uses of th	· · · · · · · · · · · · · · · · · · ·				•		•			<u>, </u>	<u> </u>
	t VI Land, Buildings, and Equipme	e nt. Complete if t				n ans	wered 'Yes	' to	Form 9	90, Pa	ırt IV, l	ine
	112 Coo Form OOO Dart V line 1	10.						thor	(-) (1	
	11a. See Form 990, Part X, line 1 Description of property				Cost or s (inves		(b)Cost or ot basis (othe		(c) Accu depred	mulated ciation	(d) B	ook value
	Description of property						basis (othe	r)			(d) B	
	Description of property		· .				basis (othe	r) ,715		ciation		150,715
b E	Description of property		· ·				basis (othe	r)				150,715
b E	Description of property Land		· · ·				basis (othe	715 ,664	depred	ciation	2	150,715 309,102
b 6 c 1 d 6	Description of property Land		· · · ·				basis (othe	,715 ,664	deprec	621,56	2	150,715 309,102 33,162,859 2,175,235

(a) Description of security or category (including name of security)	(b)Book value		ethod of valuation d-of-year market value
(1)Financial derivatives			•
2)Closely-held equity interests			
Other			
		+	
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)			
art VIII Investments—Program Related. Con	nplete if the organization	on answered 'Y	es' to Form 990, Part IV, line :
See Form 990, Part X, line 13. (a) Description of investment	(b) Boo	k value	(c) Method of valuation
(a) been provided in the control of	(1, 200		Cost or end-of-year market value
1) CAPITAL TERM CERTIFICATES - CFC		503,276	С
2) INVESTMENT IN SUBSIDIARY		5,285	C
3) MEMBERSHIPS		3,015	C
4) PATRONAGE CAPITAL - CFC 5) PATRONAGE CAPITAL - FEDERATED		76,215 133,164	
6) PATRONAGE CAPITAL - FEDERATED		19,652	C
7) PATRONAGE CAPITAL - OTHER		3,829	C
8) PATRONAGE CAPITAL - WFEC		33,307	C
9) EQUITY CONTRIBUTION - WFEC		3,135,627	С
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)	Þ	3,913,370	
Part IX Other Assets. Complete if the organization a		0, Part IV, line	1
(a) Descript	tion		(b) Book value
Fotal. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		
Part X Other Liabilities. Complete if the organ		to Form 990. I	Part IV, line 11e or 11f. See
Form 990, Part X, line 25.		,	,
(a) Description of liability	(b) Book value		
ederal income taxes			
CCRUED EMPLOYEE COMPENSATED ABSENCES	314,436		
THER CURRENT AND ACCRUED LIABILITIES	7,927	-	
VERBILLED POWER COST	260,258	-	
USTOMER DEPOSITS	253,972	-	
DEFERRED CREDIT - RENEWABLE ENERGY FUND	1,538,686	-	
DEFERRED CREDIT - ADVANCES ON CONSTRUCTION DEFERRED CREDIT - OTHER	698,226 445,025	-	
JELEKKED GREDIT - OTHER	743,025	1	
		1	
otal. (Column (b) must equal Form 990, Part X, col (B) line 25)	3,518,530	<u> </u>	

Part		evenue per Audited Financial Stat vered 'Yes' to Form 990, Part IV, line 1:		ts With Revenue	per R	eturn Complete if
1	<u>-</u>	r support per audited financial statements			1	
2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	·	2a			
b	Donated services and use of f	acilities	2b		1	
С		5	2c		1	
d			2d		1	
e	Add lines 2a through 2d .					
3	Subtract line 2e from line 1 .				3	
4		0, Part VIII, line 12, but not on line 1				
а		uded on Form 990, Part VIII, line 7b .	4a			
b			4b		1	
С	·				− 4c	
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	12).		5	
Part		xpenses per Audited Financial Sta			s per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line		<u> </u>		·
1		audited financial statements			1	
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25				
а	Donated services and use of f	acılıtıes	2a			
b	Prior year adjustments		2b			
C	Other losses		2c			
d	Other (Describe in Part XIII)		2d			
e	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)		4b			
C					4c	
5		nd 4c. (This must equal Form 990, Part I, line	18)		5	
	XIII Supplemental Inf					
Part '	ide the descriptions required for V , line 4 , Part X, line 2 , Part XI mation	Part II, lines 3, 5, and 9, Part III, lines 1a a lines 2d and 4b, and Part XII, lines 2d and	and 4 , F 4b Als	Part IV , lines 1b and 2 o complete this part t	b, o provid	le any addıtıonal
	Return Reference	Explanation				
Part X	, Line 2	THE COOPERATIVE APPLIES THE "UNC ACCOUNTING PRINCIPLES GENERALLY THE PRIMARY TAX POSITION OF THE C EXEMPT ENTITY THE COOPERATIVE DITHAT ITS TAX POSITION WILL BE SUST REVENUE SERVICE, AND THAT ALL TAX SETTLEMENT WITH TAXING AUTHORITI	ACCEI OOPER ETERM: AINED BENER	PTED IN THE UNITE RATIVE IS ITS FILIN INED THAT IT IS MC UPON EXAMINATIC	D STAT G STAT RE LIK N BY T	ES OF AMERICA FUS AS A TAX ELY THAN NOT THE INTERNAL
SCHE	DULE D	Part IX THE AMOUNT OF OTHER ASSETS EQUAL OR EXCEED 5 PERCENT OF THE 16, COLUMN B CONSEQUENTLY IN ACC PART IX HAS BEEN LEFT BLANK	ON FO	ASSETS ON FORM 9	90, PA	GE 11, PART X, LINE

Jenedale 2 (1 31111 33 3) 23 13		i age S
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 85-0065332

Name: ROOSEVELT COUNTY ELECTRIC COOPERATIVE INC

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) CAPITAL TERM CERTIFICATES - CFC	503,276	C
(2) INVESTMENT IN SUBSIDIARY	5,285	C
(3) MEMBERSHIPS	3,015	С
(4) PATRONAGE CAPITAL - CFC	76,215	С
(5) PATRONAGE CAPITAL - FEDERATED	133,164	С
(6) PATRONAGE CAPITAL - NRTC	19,652	С
(7) PATRONAGE CAPITAL - OTHER	3,829	С
(8) PATRONAGE CAPITAL - WFEC	33,307	С
(9) EQUITY CONTRIBUTION - WFEC	3,135,627	С

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DLN: 93493226012065

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

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

Open to Public Inspection

Name of the organization **Employer identification number** ROOSEVELT COUNTY ELECTRIC COOPERATIVE INC 85-0065332

Pai	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)			
h	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?			
	directors, trustees, officers, filefading the electric briedtor, regulating the items effected in file 14.	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 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			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
	(i) ii)	127,891 0	0	6,478	102,538	22,839 0	259,746 0	0

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Also complete this part for any addition	A 150 Complete tims part for any additional information			
Return Reference	Explanation			
COLUMN Ć	INCLUDED IN THE AMOUNT IS THE ACTUARIAL VALUE OF BENEFITS PAYABLE UNDER A DEFINED BENEFIT RETIREMENT PLAN THE CONTRIBUTION RATE FOR PARTICIPANTS IN THE NRECA R&S DEFINED BENEFIT PENSION PLAN ARE THE SAME FOR ALL INDIVIDUALS IN THE PLAN THE CHANGE IN ACTUARIAL VALUE FOR EACH PARTICIPANT, HOWEVER, VARIES WITH AGE IN OTHER WORDS, THE OLDER A PLAN PARTICIPANT IS, THE GREATER THE INCREASE IN THAT INDIVIDUAL'S CHANGE IN ACTUARIAL VALUE, ALL OTHER THINGS BEING EQUAL BECAUSE THIS RELATES TO A MULTI-EMPLOYER PLAN, CASH CONTRIBUTION TO THE PLAN IN LIEU OF THE ACTUARIAL INCREASE ARE EXPENSED IN THE FINANCIAL STATEMENTS BREAKDOWN OF DEFERRED COMPENSATION REPORTED ON PART II, COLUMN (C) JERRY PARTIN ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$102,538 TOTAL REPORTED IN COLUMN C \$102,538 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (102,538) ADD CASH CONTRIBUTED TO DEFINED BENEFIT PLAN 33,150 EXPENSE TO THE COOPERATIVE \$33,150			

Schedule J (Form 990) 2014

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

Name of the or	rganization NTY ELECTRIC CO	ODEDATIVE INC					E	mploy	er ident/	ificatio	n numbe	er
ROOSEVEET COOL	WIT ELECTRIC CO.	OF ERATIVE INC					8	35-00	65332			
Part I Exc	ess Benefit	Transactio	ns (section	n 501(c)(3),	section 501(c	:)(4), and 501				only)		
	plete if the org										40b	
1 (a) Nan	ne of disqualifie	ed person () Relations	hıp between	disqualified	(c) Desc	ription	of tra	nsaction	1	(d) Cor	rected?
			persor	and organiz	ation						Yes	No
	amount of tax ı	incurred by or	janization m	ianagers or d	ısqualıfıed per	rsons during t	he year	r unde	r sectior	1		
4958 .									- \$			
3 Enter the	amount of tax,	ıf any, on lıne	2, above, re	ımbursed by	the organizati	on			► \$			
										•		
Part II												
	nd/or From											
	ne organization				t V, line 38a, d	or Form 990,	Part IV	, line :	26, or ıf	the org	anızatıo	n
reported an a	mount on Form	990, Part X, I	ne 5, 6, or i	2 2								
(-) N			1,00		1, 10	(6) D. I.	()	T	1 (1)		1 (13)46	. 1. 1
(a) Name of	(b) Relations		(d) Loa		(e)Original		(g) defau		(h)		(i)Wr	
interested	with organiza	tion Purpose Ioan		of or from the principorganization? amou		due	аета (uitr	A pproby		agreer	nent/
person		10411	organiza						commit			
			То	From			Yes	No	Yes	No	Yes	No
	•	•	•	•	•							
otal		▶ \$										
art IIII Gr	ants or Ass											
		istance Bei	nefitina I	nterested	Persons.							
		istance Bei				art IV. line 2	<u> </u>		<u> </u>			
(a) Name of	mplete if the	organızatıoı	n answere	d "Yes" on I	Form 990, Pa			ictano	· · · · · · · · · · · · · · · · · · ·) Durna	se of ac-	cictanco
nerco	mplete if the	organızatıoı (b) Relatıonsh	n answered op between	d "Yes" on I				ıstano	:e (e)) Purpo	se of as:	sistance
perso	mplete if the	organızatıoı (b) Relatıonsh nterested pers	n answered on and the	d "Yes" on I	Form 990, Pa			ıstano	:e (e)) Purpo	se of as:	sıstance
perso	mplete if the	organızatıoı (b) Relatıonsh	n answered on and the	d "Yes" on I	Form 990, Pa			ıstano	ce (e)) Purpo	se of as:	sistance

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.						
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	
(1) SKYLER PARTIN	FAMILY MEMBER OF EVP & GM		WAGES PAID FOR PART-TIME, SEASONAL EMPLOYMENT WHEN SCHOOL IS NOT IN SESSION		Νo	

Dort V	Supplemental	Information
Part V	Supplemental	imormation

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

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2014

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2014

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization ROOSEVELT COUNTY ELECTRIC COOPERATIVE INC	Employer identification number
	85-0065332

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

Return Reference	Explanation
Form 990, Part VI, Section A, line 7a	THE MEMBERS OF THE COOPERATIVE VOTE ON THE BOARD OF TRUSTEES ELECTIONS ARE DONE ON A ONE MEMBER ONE VOTE BASIS

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

Return Reference	Explanation
Form 990, Part VI, Section A, line 8b	FROM TIME TO TIME THE ENTIRE BOARD WILL GO INTO EXECUTIVE SESSION FOR DISCUSSING ITEMS OF A SENSITIVE AND CONFIDENTIAL NATURE. WHEN THIS OCCURS MANAGEMENT AND OTHERS IN ATTENDANCE ARE REMOVED FROM THE MEETING ROOM ITEMS DISCUSSED IN EXECUTIVE SESSION ARE NOT DOCUMENTED. HOWEVER, ACTIONS TAKEN BY THE BOARD AFTER EXECUTIVE SESSIONS ARE ADJOURNED ARE FULLY DOCUMENTED IN THE WRITTEN MINUTES.

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	MANAGEMENT PROVIDED A COPY OF THE FORM 990 TO THE BOARD FOR DISCUSSION AND REVIEW ANY COMMENTS RECEIVED FROM THE BOARD ARE ADDRESSED PRIOR TO FILING

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	THE BOARD OF TRUSTEE EVALUATES THE PERFORMANCE OF THE EXECUTIVE VP & GENERAL MANAGER AND THEN VOTES ON THE ANUALLY SALARY THE DECISION IS PARTIALLY BASED ON A COMPENSATION SURVEY, WHICH INCLUDES SALARIES FROM SIMILAR COOPERATIVES THROUGHOUT NEW MEXICO AND THE NATION THE EXECUTIVE VP & GENERAL MANAGER EVALUATES THE PERFORMANCE OF THE ORGANIZATION'S OTHER EMPLOYEES MEETING THE DEFINITION OF OFFICER AND KEY EMPLOYEES A COMPENSATION SURVEY, WHICH INCLUDES SALARIES FROM SIMILAR COOPERATIVES THROUGHOUT NEW MEXICO AND THE NATION, IS THEN USED TO HELP SET COMPENSATION

Return Reference	Explanation
Section C, line 19	THE BY LAWS OF THE COOPERATIVE ARE LOCATED ITS WEBSITE. THE COOPERATIVE ALSO ANNUALLY PROVIDES A COPY OF THE AUDITED BALANCE SHEET AND INCOME STATEMENT TO THE MEMBERS OF THE COOPERATIVE WITH THE ANNUAL REPORT ADDITIONALLY, THE COOPERATIVE PROVIDES A COMPLETE COPY OF ITS CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS UPON REQUEST OF A MEMBER

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

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

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

Return Reference	Explanation
FORM 990, PART VIII, LINE 2	THE COOPERATIVE AND WESTERN FARMERS ELECTRIC COOPERATIVE (WFEC), A RURAL ELECTRIC GENERATION AND TRANSMISSION COOPERATIVE, HAVE ENTERED INTO A WHOLESALE POWER CONTRACT WHERE WFEC WILL PROVIDE THE COOPERATIVE WITH ELECTRIC POWER AS PART OF THE AGREEMENT THE COOPERATIVE MUST CONTRIBUTE EQUITY TO WFEC IN A MANNER AND AMOUNT SUCH THAT, AS OF JUNE 1, 2026, THE COOPERATIVE HAS CONTRIBUTED EQUITY TO WFEC COMPARABLE TO THE AMOUNT OF EQUITY CONTRIBUTED TO WFEC BY PRIOR EXISTING MEMBERS THE PURPOSE OF THE CONTRIBUTION IS TO OBTAIN A POWER SUPPLY IN ORDER TO MEET THE TERMS OF THE WHOLESALE PURCHASE CONTRACT PURUSANT TO APPROVAL BY THE NEW MEXICO PUBLIC REGULATION COMMISSION, THE EQUITY CONTRIBUTION IS RECOVERED MONTHLY FROM THE MEMBERS THROUGH THE SALE OF ELECTRICITY

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

Return Reference	Explanation
Form 990, Part IX, Lines 5-7	SALARIES AND WAGES ARE ALLOCATED TO ASSET, LIABILITY, AND EXPENSE ACCOUNTS BASED ON THE ACCOUNTING SYSTEM DESCRIBED ABOVE. THE FOLLOWING SCHEDULE RECONCILES AMOUNTS REPORTED ON LINES 5-7 TO TOTAL WAGES ACCRUED AND/OR PAID TOTAL PER LINES 5-7 \$ 1,765,890 LESS DIRECTORS FEES REPORTED ON 1099-MISC (59,124) LESS EMPLOYEE OFFICER BENEFITS REPORTED ON LINE 5 (180,400) PLUS SALARIES AND WAGES CAPITALIZED DIRECTLY TO PLANT 506,627 PLUS SALARIES AND WAGES CAPITALIZED/EXPENSED INDIRECTLY THROUGH CLEARING AND OTHER ACCOUNTS 561,877 TOTAL WAGES ACCRUED AND/OR PAID \$ 2,594,870

Return Reference	Explanation
Form 990, Part IX, Line 24	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS ADMINISTRATIVE AND GENERAL EXPENSE ON FORM 990, PART IX, LINE 24 ACCOUNTING EXPENSE \$ 50,741 ADVERTISING 24,146 ANNUAL MEETING EXPENSE 27,296 CAPITAL CREDIT EXPENSE 4,004 DUES PAID TO ASSOCIATED ORGANIZATIONS 55,875 MAINTENANCE OF GENERAL PLANT 92,504 OFFICE AND SUPPLIES 16,066 OUTSIDE SERVICES 56,867 REGULATORY COMMISSION EXPENSE 80,244 TRUSTEE TRAINING & TRAVEL EXPENSE 19,227 TOTAL ADMINISTRATIVE AND GENERAL EXPENSE PER 990 \$ 426,970

Return Reference	Explanation
FORM 990, PART IX, LINE 4	THE FORM 990 INSTRUCTIONS SPECIFICALLY STATE THAT THE AMOUNT OF PATRONAGE DIVIDENDS PAID TO THE MEMBERS (HEREINAFTER REFERRED TO A SPATRONS), SHOULD BE REPORTED ON PART IX, LINE 4 AS "BENEFITS PAID TO MEMBERS". THE PHASE S" "PATRONAGE DIVIDENDS PAID" REFERS TO THE PROCESS, SUBSEQUENT TO YEAR-PAID, BY WHICH THE COOPERATIVE ALLOCATES PATRONAGE CAPITAL TO AND, THEREFORE, OPERATES AT COST WITH ITS PATRONS THE COOPERATIVE ALLOCATES PATRONAGE CAPITAL TO AND, THEREFORE, OPERATES AT COST WITH ITS PATRONS THE COOPERATIVE STAX EXEMPT PURPOSES IS TO PROVIDE ELECTRICITY TO ITS PATRONS AND TO DO SO ON A COOPERATIVE BASIS "AX LAW DEFINES" "OPERATING ON A COOPERATIVE DEPRATES AT COST WITH ITS PATRONS THE COOPERATIVE SHADE S" OF PATRONAGE DAY DEPRATED ON A COOPERATIVE CONTROL. AND OPERATION AT COST THE COOPERATIVE OFFER S' AS SUBDRONATION OF CAPITAL, DEMOCRATIC CONTROL. AND OPERATION AT COST THE COOPERATIVE OFFER S' AS SUBDRONATION OF CAPITAL, DEMOCRATIC CONTROL. AND OPERATION AT COST THE COOPERATIVE OFFER S' AS SUBDRONATION OF CAPITAL, DEMOCRATIC CONTROL. AND OPERATION AT COST THE COOPERATIVE OFFER SHADE OF PATRONAGE CONTROL. THE ALLOCATION OF PATRONAGE DAY DEMOCRATIC CONTROL OF PATRONAGE OF PATRONAGE DAY DEMOCRATIC CONTROL OF PATRONAGE ON THE TRANSACTIONS OF PATRONAGE FOR THE COOPERATIVE SY EAR-BUD OF DECEMBER 31 EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE DIVIDEND IS PROVIDED FOR IN THE MONEROUS PATRONAGE AND TO ASSURE THAT THE COOPERATIVE WILL OPERATE ON A NONFROFTE BASIS, THE COOPERATIVE IS DELIGATED TO ACCOUNT ON A PATRONAGE BASIS TO ALL ITS PATRONAS FOR ALL AMOUNTS RECEIVED AND EXCEPT AND A COUNTROL ON A PATRONAGE BASIS TO ALL ITS PATRONAS FOR ALL AMOUNTS RECEIVED AND EXCEPT AND EXERCE OF PATRONAGE COOPERATIVE IS OBLIGATED TO PAY BY CREDITS TO A CAPITAL ACCOUNT OF ANY DAY OF THE PATRONAS AS CAPITAL (C) THE COOPERATIVE WILL OPERATE ON A NONFROFTE BASIS, THE COOPERATIVE IS

Return Reference	Explanation
FORM 990, PART X, LINES 11 AND 12	THE COOPERATIVE HAS DETERMINED THAT INVESTMENTS HELD IN A BROKERAGE ACCOUNTS SHOULD BE INCLUDED ON PART X, LINE 11 IN 2014 TO INCREASE CONSISTENCY, THE AMOUNT OF SUCH INVESTMENTS FROM THE PRIOR YEAR HAS BEEN RECLASSIFIED FROM LINE 12 TO LINE 11

Return Reference	Explanation
Form 990, Part XI, line 9	EQUITY METHOD INCOME (LOSS) FROM SUBSIDIARY -23,490 OTHER COMPREHENSIVE INCOME (LOSS) - PROVISION FOR PENSIONS & BENEFITS -199,000 PATRONAGE CAPITAL - ASSIGNABLE 1,061,093 PATRONAGE CAPITAL - RETIRED - 65,888

Return Reference	Explanation
Form 990, Part XII, Line 2C	THE BOARD AS A WHOLE IS RESPONSIBLE FOR OVERSEEING THE AUDIT AND SOLICITING THE CPA WHO WILL PERFORM THE AUDIT

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DLN: 93493226012065

2014

OMB No 1545-0047

Open to Public Inspection

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

ROOSEVELT COUNTY ELECTRIC COOPERATIVE INC 85-0065332 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))		(g) Section 512(b) (13) controlled entity?	
						Yes	No
PO BOX 389	TO PROVIDE COLLEGE SCHOLARSHIPS TO MEMBERS OF THE COOPERATIVE	NM	501(c)(3)		ROOSEVELT COUNTY ELECTRIC COOPERATIVE INC	Yes	

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, I	Part IV, line	34 د
	because it had one or more related organizations treated as a partnership during the tax year.		

(a) Name, address, and EIN of	(b) Primary activity	(c) Legal	(d) Direct	(e) Predominant	(f) Share of	(g)	(h)		(i) Code V-UBI	(j)	(k) or Percentac
related organization	, ,	domicile	controlling	ıncome(related,					amount in box	managır	g ownersh
		(state or foreign	entity	unrelated, excluded from		assets			20 of Schedule K-1	partner	?
		country)		tax under sections 512-					(Form 1065)		
				514)							
				,			Yes	No		Yes N	o
											_

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity			(e) Type of entity (C corp, S corp, or trust)		(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(i contro entit	n 512 13) olled
								Yes	No
(1) ESTACADO ENERGY SERVICES INC PO BOX 389 PORTALES, NM 88130 68-0602988	ELECTRICIAN SERVICES		ROOSEVELT COUNTY ELECTRIC COOPERATIVE INC		36,570	5,283	100 000 %	Yes	

Pa	Transactions With Related Organizations Complete if the organization answers	wered "Yes" on Form	າ 990, Part IV, line	: 34, 35b, or 36.		
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 D	Ouring the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
b	Gift, grant, or capital contribution to related organization(s)			1b		No
c	Gift, grant, or capital contribution from related organization(s)			1c		No
d	Loans or loan guarantees to or for related organization(s)			1d		No
e	Loans or loan guarantees by related organization(s)			1e		No
f	Dividends from related organization(s)			1f		No
g	Sale of assets to related organization(s)			19		No
h	Purchase of assets from related organization(s)			1h		No
i	Exchange of assets with related organization(s)			11		No
j	Lease of facilities, equipment, or other assets to related organization(s)			1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)			1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)			11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)			1n	ו	No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1r	Yes	
0	Sharing of paid employees with related organization(s)			10	Yes	
р	Reimbursement paid to related organization(s) for expenses			1 p		No
q				1q		No
-						
r	Other transfer of cash or property to related organization(s)			1r	Yes	
s	Other transfer of cash or property from related organization(s)			1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complet	_	· · ·			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	involve	d
) N	IA - LESS THAN 50000	N				

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NA - LESS THAN 50000	N		
(2) NA - LESS THAN 50000	0		
(3) NA - LESS THAN 50000	R		

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

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

1 <u> </u>													
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?	7	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No	<u> </u>	Yes	No	
									\Box	1			

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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