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DLN: 93493133014725

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 20	14 ca	lendar year, or tax year beginning 01-01-2014 , and ending 12-31-20)14					
B Ch	eck ıf app	lıcable	C Name of organization SOCORRO ELECTRIC COOPERATIVE INC		D Emp	loyer id	entification number		
┌ Ad	dress char	nge			85-0	008496	58		
∏ Na	me chang	e	Doing business as						
☐ Ini	tıal return				E Telep	hone nui	mber		
Fir	al urn/termıı	nated	Number and street (or P O box if mail is not delivered to street address) Room/ PO BOX H	'suite	, i	5)835-			
•	ended ret		City or town, state or province, country, and ZIP or foreign postal code		(575	,,633-	0300		
_	plication p		SOCORRO, NM 87801		G Gross	receipts	\$ 25,192,730		
	•	,	F Name and address of principal officer	ша	To Alexander		6		
			JOSEPH HERRERA	П(а)	Is this a grou subordinates		n for		
			PO BOX H SOCORRO, NM 87801	ЦЪ	Are all subor	J	┌ Yes ┌ No		
					included?	umates	j řesj No		
I Ta	x-exempt	status	5		If "No," attac	:h a lıst	(see instructions)		
J W	ebsite:	► W\	WW SOCORROELECTRIC COM	H(c)	Group exemp	otion ni	ımber ►		
K For	m of orga	nızatıo	n 🔽 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨	L Yea	ar of formation		M State of legal domicile		
Pa	rt I	Sun	nmary				**		
			describe the organization's mission or most significant activities						
e e	1	PRC	OVIDE QUALITY AND RELIABLE ELECTRIC SERVICE TO MEMBER:	SOFTHE	COOPERATI	VE			
alle	_								
Governance	2 CH	neck t	this box 📭 if the organization discontinued its operations or disposed	d of more t	than 25% of it	s net a	ssets		
50			, , , , , , , , , , , , , , , , , , , ,						
26	1		r of voting members of the governing body (Part VI, line 1a)			3	5		
Activities			r of independent voting members of the governing body (Part VI, line 1			5	5		
C t IV			umber of individuals employed in calendar year 2014 (Part V, line 2a) umber of volunteers (estimate if necessary)			6	43		
đ			nrelated business revenue from Part VIII, column (C), line 12			7a	0		
			elated business taxable income from Form 990-T, line 34			7b	0		
_					Prior Year	<u> </u>	Current Year		
	8	Contr	ributions and grants (Part VIII, line 1h)			0	0		
Revenue	9	Progr	ram service revenue (Part VIII, line 2g)		25,229	,678	24,688,208		
9,6	10	Inves	stment income (Part VIII, column (A), lines 3, 4, and 7d)		180	,152	399,483		
ш			r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		39	,464	48,100		
			revenue—add lines 8 through 11 (must equal Part VIII, column (A), li	ine	25,449	,294	25,135,791		
			ts and similar amounts paid (Part IX, column (A), lines 1–3)			640	0		
	14	Bene	fits paid to or for members (Part IX, column (A), line 4)		1,974	,151	1,705,951		
			ries, other compensation, employee benefits (Part IX, column (A), lines	5	2,320	,897	2,361,302		
<u>\$</u>		5 – 10 Profe	ssional fundraising fees (Part IX, column (A), line 11e)	_		0	0		
Expenses			undraising expenses (Part IX, column (D), line 25) ▶0	·					
Δ				·	20.065	. 703	20.661.245		
	1		r expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	20,965		20,661,245		
			nue less expenses Subtract line 18 from line 12			,824	407,293		
<u>ም</u>		- , -			jinning of Curr		End of Year		
Not Assets or Fund Balances				<u> </u>	Year				
Ass Bal			assets (Part X, line 16)	·	72,189		70,576,729		
<u> 5</u> 5			liabilities (Part X, line 26)	•	49,441		47,649,836		
	22 1 .1 11		ssets or fund balances Subtract line 21 from line 20	•	22,748	,446	22,926,893		
Unde my k	r penalt nowledg	ies of e and	f perjury, I declare that I have examined this return, including accompa belief, it is true, correct, and complete Declaration of preparer (other knowledge						
		<u>***</u>	***		2015-05-10				
Sign	, I	Sıgr	nature of officer		Date				
Her	e		NE DOROUGH PRESIDENT						
		, ,	e or print name and title Print/Type preparer's name Preparer's signature	Date	Check 🔽 ıf	PTIN			
Pai	Ч	L	WILLIAM M MILLER WILLIAM M MILLER	Preparer's signature Date Check Self-					
	_u parer		Firm's name BOLINGER SEGARS GILBERT AND MOSS LLP		Firm's EIN 🟲	75-0882	037		
	Only		Firm's address ► 8215 NASHVILLE AVENUE		Phone no (80	06) 747-	3806		
	. Unity								

4e Total program service expenses ►

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νο
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 1	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? <i>If "Yes," complete Schedule D, Part III</i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
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)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
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</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <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			<u></u>
4_	Fatantha number was stadio Barra 2 of Farms 1006 Fatan 0 of material labels 1 day 1	. —	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a	8		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	\dashv		
	gaming (gambling) winnings to prize winners?	1c		
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	13		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gift			
7	were not tax deductible?	6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
d	file Form 8282?	. 7c		
_				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	-		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 a			
h	required?	7g		
	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		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	5 2		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	5		
12a	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	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			
c	In which the organization is licensed to issue qualified health plans	\dashv		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		

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

Check if Schedule O contains a response or note to any line in this Part VI							/ line in this Part VI	response or note to ar	contains a r	Check if Schedule O
---	--	--	--	--	--	--	------------------------	------------------------	--------------	---------------------

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Νo
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		Νo
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	O ther officers or key employees of the organization	15b	Yes	
	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?	16a		No
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?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

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 interest 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 records ►JOSEPH HERRERA CEOGM

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	person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	organization and related organizations	
(1) ANNE DOROUGH	11 10	х		Х				5,535	0	0	
PRESIDENT	1 00										
(2) DAVE WADE VICE PRESIDENT	7 60 1 00	х		х				9,584	0	0	
(3) LEO CORDOVA SECRETARY/TREASURER	23 50 1 00	х		х				4,678	0	0	
(4) MELISSA AMARO TRUSTEE	1 10	х						1,718	0	0	
(5) CHARLES WAGNER TRUSTEE	42 10 1 00	Х						3,456	0	0	
(6) JOSEPH HERRERA	60 00			Х				156,180	0	37,326	
CEO/GENERAL MANAGER								153,100		5.,520	
(7) TONY LOPEZ	46 00					х		111,348	0	29,131	
LINE FOREMAN											

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	more t perso	han d n is	ne l both	box, an d	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Lb	Sub-Total				
c	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	►	292,499	0	66,457

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

			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 I 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? If "Yes," complete Schedule J for such			
	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? <i>If "Yes," complete Schedule J for such person</i>	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

(A) Name and business address	(B) Description of services	(C) Compensation
BRYCE WILSON, 3110 101ST STREET LUBBOCK, TX 79423	ACCOUNTING CONSULTANT	142,191
WIGGINS WILLIAMS & WIGGINS PO BOX 1308 ALBUQUERQUE, NM 870361308	ATTORNEY FEES	103,506
2. Total number of independent contractors (including but not limited to those listed above)	who received more than	

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 ►2

Form 99		•						Page 9
Part V	<u>/++1</u>	Statement o Check if Schedi	o f Revenue ule O contains a respor	nse or note to any lu	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
χ£	1a	Federated cam	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	Ь	Membership du	es 1b					
A.G.	С	Fundraising eve	ents 1c					
Giffs, nilar An	d	Related organiz	zations 1d					
imil	e	Government grant	s (contributions) 1e					
tion r. S	f	All other contribute	ons, gifts, grants, and 1f					j j
Contributions, and Other Sim	و ا	Noncash contributi	ons included in lines		i			
on tr	h	1a-1f \$ Total. Add lines	- 1 - 1 f					
<u>ة ت</u>		iotal. Add lines	S 1a-11	▶				
Ele	2a	ELECTRIC SALES		Business Code 221000	23,594,700	23,594,700		
e Re	Ь	PATRONAGE DIVID	ENDS	221000	934,212	934,212		
E e	С	SERVICE FEES		221000	159,296	159,296		
er E	d							
<i>⊕</i>	е							
Program Service Revenue	f	All other progra	am service revenue					
<u>~</u>	g	Total. Add lines	s 2a-2f		24,688,208			
	3		ome (including dividendar amounts)		394,250			394,250
	4		stment of tax-exempt bond					
	5	Royalties						
	6a	Gross rents	(ı) Real	(11) Personal 39,000				
	Ь	Less rental		0				
	c	expenses Rental income		39,000				
	d	or (loss) Net rental inco	me or (loss)		39,000			39,000
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	952	61,220				
	Ь	Less cost or other basis and	0	56,939				
	c	sales expenses Gaın or (loss)	952	4,281				
	d	Net gain or (los	ss)		5,233			5,233
ii e	8a	Gross income f events (not inc \$						
Other Revenue		of contributions See Part IV, lin	s reported on line 1c) ne 18 a					
ŧ.	Ь		penses b (loss) from fundraising	avents				
0	9a		rom gaming activities ne 19	events p-				
	b c		a penses b (loss) from gaming activ	vities				
	10a	Gross sales of returns and allo						
	ь	Less cost of g	oods sold b					
	С		(loss) from sales of inve					
	11-	Miscellaneous		Business Code 221000	9,100			9,100
	11a	MISCELLANEO OPERATING I		221000	9,100			5,100
	Ь							
	C	All other reven						
	d e	Total. Add lines	l	🕨				
	12		See Instructions .		9,100			
]			• • • •	25,135,791	24,688,208	0	447,583

	990 (2014)				Page 10
	Statement of Functional Expenses			I-b I (A)	
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this				<u></u>
Do no	ot include amounts reported on lines 6b,	(A)	(B)	(c)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21		Скрепосо	успетат схрепаса	Схрепзез
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members	1,705,951			
5	Compensation of current officers, directors, trustees, and key employees	218,477			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	1,248,538			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	230,001			
9	Other employee benefits	551,673			
10	Payroll taxes	112,613			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,277,631			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,284,392			
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a	PURCHASED POWER	13,410,753			
b	DISTRIBUTION EXPENSE	1,267,445			
c	ADMIN & GENERAL EXP	695,985			
d	CUSTOMER SERVICE	468,980			
e	All other expenses	256,059			
25	Total functional expenses. Add lines 1 through 24e	24,728,498			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2014)

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in t	hıs Pa	art X		_	
		, , , , , , , , , , , , , , , , , , , ,			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			2,103,642	1	1,230,139
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,616,153	4	1,557,947
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees Complete Paschedule L	rt II o	of .		_	
35	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and cand sponsoring organizations of section $501(c)(9)$ voluntary enorganizations (see instructions) Complete Part II of Schedule L	ontrıl nploy	outing employers		5	
Assets	l _				20.057	6	100 000
Ą	7	Notes and loans receivable, net			26,057	7	120,230
	8	Inventories for sale or use			704,430	8	589,767
	9 10a	Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis Complete		79,083,706	6,234,185	9	6,312,104
	ь	Part VI of Schedule D Less accumulated depreciation	10a 10b	26,911,843		10c	52,171,863
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11		•		12	
	13	Investments—program-related See Part IV, line 11			7,694,157	13	8,553,238
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			189,203	15	41,441
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			72,189,934	16	70,576,729
	17	Accounts payable and accrued expenses			1,464,865	17	1,382,878
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
ø.	21	Escrow or custodial account liability Complete Part IV of Sche			240,452	21	222,656
Liabilities	22	Loans and other payables to current and former officers, directors, employees, highest compensated employees, and disqualif	ors, tr				
ар		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	s .		46,228,633	23	44,474,452
	24	Unsecured notes and loans payable to unrelated third parties				24	_
	25	Other liabilities (including federal income tax, payables to relat and other liabilities not included on lines 17-24) Complete Pai	rt X of	Schedule	4 507 520	-	4 500 050
		D			1,507,538	25	1,569,850
	26	Total liabilities. Add lines 17 through 25			49,441,488	26	47,649,836
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ► ∫ lines 27 through 29, and lines 33 and 34.	and	complete			
<u>8</u>	27	Unrestricted net assets				27	
B	28	Temporarily restricted net assets	•			28	
Ε	29	Permanently restricted net assets	•			29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere 🟲	✓ and			
	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 for	unds		22,748,446	32	22,926,893
Net	33	Total net assets or fund balances			22,748,446	33	22,926,893
_	34	Total liabilities and net assets/fund balances			72,189,934	34	70,576,729

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		25,1	135,791
2	Total expenses (must equal Part IX, column (A), line 25)	2		24,7	728,498
3	Revenue less expenses Subtract line 2 from line 1	3		4	107,293
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			748,446
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		- 2	228,846
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			926,893
Par	rt XIII Financial Statements and Reporting	<u> </u>		<u> </u>	
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔽
				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	
	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				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign 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?	e	За		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		

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Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

Name of the organization **Employer identification number** SOCORRO ELECTRIC COOPERATIVE INC 85-008<u>4968</u> Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization 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) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Γ Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located **\(\mathbb{F}_{\top}\)** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (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, historical treasures, or other similar assets for financial gain, provide the

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Part	••• Organizations Maintaining Col	llections of Art	<u>, His</u>	<u>tori</u>	cal T	reası	ures, or O	<u>the</u>	r Simila	ar As	sets (c	ontinued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds, ch	eck	any of	the fol	lowing that a	re a	significa	nt use	of its	
а	Public exhibition		d	Γ	Loan	orexc	hange 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	organization	's ex	empt pur	rpose	n	
5	During the year, did the organization solicit o assets to be sold to raise funds rather than t	o be maintained as	part o	f the	organ	ızatıon	ı's collection	?			┌ Yes	┌ No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						n answered	Y" t	es" to F	orm 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary	for c	ontribi	utions	or other ass	ets ı	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						L	1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a b	Did the organization include an amount on Fo										✓ Yes	┌ No
	If "Yes," explain the arrangement in Part XII											
Ра	rt V Endowment Funds. Complete r	(a)Current year		Prior			FORM 990, Two years back				(e)Four	ears back
1a	Beginning of year balance	,			,	` '	<u> </u>	<u> </u>	· · ·			·
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 balanc	e (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 shou	ıld equal 100%										
За	Are there endowment funds not in the posses	sion of the organiza	ation t	hat a	are hel	danda	admınıstered	for	the			
	organization by										Yes	No
	(i) unrelated organizations			•		•		•		. 3a(_	
ь	(ii) related organizations							•		3a(. 3I		+
4	Describe in Part XIII the intended uses of th	<u>-</u>				•		•			<u> </u>	
Par	Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1	nt. Complete if t				n ans	wered 'Yes'	' to	Form 99	90, Pa	rt IV, l	ine
	Description of property				Cost or s (inves		(b) Cost or ot basis (other		(c) Accur deprec		(d) B	ook value
1a	and		•				86,	.262	<u> </u>		+	86,262
b i	Buildings						963,	498		718,04	7	245,451
c l	_easehold improvements											
				$\overline{}$							1	
d l	Equipment						77,815,	477	26	,193,79	6	51,621,681
	Othor		<u>.</u>				77,815, 218,		26	,193,79	6	218,469

See Form 990, Part X, line 12.	1 (1)	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. Cor	nplete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c
See Form 990, Part X, line 13.		,
(a) Description of investment	(b) Book value	(c) Method of valuation
Con Additional Data Table		Cost or end-of-year market value
See Additional Data Table		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	8,553,238	
Part IX Other Assets. Complete if the organization		
(a) Descrip		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.		>
Part X Other Liabilities. Complete if the organ	ization answered 'Yes' t	o Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25. 1 (a) Description of liability	(b) Book value	
	(U) DOOK Value	
Federal income taxes		
CONSUMER DEPOSITS	112,827	
ACCRUED COMPENSATED ABSENCES	251,293	
ACCRUED TAXES & FRANCHISE FEES	306,332	
ACCUMULATED PROVISION FOR POST RETIREMENT HEALTH BENEFITS	422,038	
OTHER CURRENT & ACCRUED LIABILITIES	142,976	
DEFERRED CREDITS - UNCLAIMED PATRONAGE	142,976	
CAPITAL RETIREMENTS & OTHER PROPERTY	333,685	
DEBT SERVICE COST OVERCOLLECTED	699	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,569,850	
·	, , -	

	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete if
1	Total revenue, gains, and other support per audited financial statements	1	25,134,501
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	25,134,501
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	1,290
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	25,135,791
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
			T
1	Total expenses and losses per audited financial statements	1	23,021,257
1 2		1	23,021,257
	Total expenses and losses per audited financial statements	1	23,021,257
2	Total expenses and losses per audited financial statements	1	23,021,257
2 a	Total expenses and losses per audited financial statements	1	23,021,257
2 a b	Total expenses and losses per audited financial statements	1	23,021,257
2 a b	Total expenses and losses per audited financial statements	1 2e	23,021,257
2 a b c d	Total expenses and losses per audited financial statements	-	0
a b c d	Total expenses and losses per audited financial statements A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e	0
2 a b c d e	Total expenses and losses per audited financial statements A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e	23,021,257 0 23,021,257
2 a b c d e 3	Total expenses and losses per audited financial statements A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e 3	0
2 a b c d e 3 4 a	Total expenses and losses per audited financial statements	2e 3	0

Part XIII Supplemental Information

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

Return Reference	Explanation
Part IV, Line 2b	PURSUANT TO THE ARTICLE VIII, SECTIONS 3 THROUGH 5 OF THE COOPERATIVE'S BYLAWS, THE COOPERATIVE SHALL TRANSFER RETIREMENTS OF PATRONAGE CAPITAL, WHICH HAVE REMAINED UNCLAIMED FOR A PERIOD OF TWO YEARS, TO SOCORRO ELECTRIC FOUNDATION (THE FOUNDATION), A TAX-EXEMPT CHARITABLE TRUST ANY MEMBER MAY ALSO IRREVOCABLY ASSIGN ALL OR A PORTION OF HIS/HER CAPITAL CREDITS TO THE FOUNDATION AMOUNTS TRANSFERRED TO THE FOUNDATION ARE USED FOR (1) SCHOLARSHIPS TO ENABLE SELECTED STUDENTS TO ATTEND COLLEGE, TECHNICAL SCHOOL OR OTHER POST SECONDARY EDUCATION INSTITUTION AND (2) OTHER EDUCATIONAL OPPORTUNITIES AND CHARITABLE PURPOSES AS PROVIDED FOR IN THE FOUNDATION'S TRUST AGREEMENT A PORTION OF THESE UNCLAIMED CAPITAL CREDITS PAYMENTS ARE MAINTAINED IN A DESIGNATED ACCOUNT HELD BY THE COOPERATIVE
Part X, Line 2	THE COOPERATIVE HAS ADOPTED THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA THE PRIMARY TAX POSITION OF THE COOPERATIVE IS ITS FILING STATUS AS A TAX EXEMPT ENTITY THE COOPERATIVE DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT ITS TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE, AND THAT ALL TAX BENEFITS ARE LIKELY TO BE REALIZED UPON SETTLEMENT WITH TAXING AUTHORITIES
Part XI, Line 4b - Other Adjustments	EXPENSES RECORDED IN NON-OPERATING MARGINS RECLASSIFIED TO EXPENSES 1,290
Part XII, Line 4b - Other Adjustments	PATRONAGE CAPITAL ASSIGNABLE 1,705,951 EXPENSES RECORDED IN NON-OPERATING MARGINS RECLASSIFIED TO EXPENSES 1,290
Part IX	THE AMOUNT OF OTHER ASSETS ON FORM 990, PAGE 11, PART X, LINE 15 DOES NOT EQUAL OR EXCEED 5 PERCENT OF THE TOTAL ASSETS ON FORM 990, PAGE 11, PART X, LINE 16, COLUMN B CONSEQUENTLY IN ACCORDANCE WITH IRS INSTRUCTIONS SCHEDULE D, PART IX HAS BEEN LEFT BLANK
Part XII, Line 4B	FOR THE AUDITED FINANCIAL STATEMENTS, THE AMOUNT OF PATRONAGE DIVIDENDS PAID OR ALLOCATED TO THE MEMBERS IS REPORTED AS AN INCREASE IN EQUITY AND NOT AS AN EXPENSE THEREFORE, NET INCOME PER THE AUDITED FINANCIAL STATEMENTS IS REPORTED GROSS OF THE AMOUNT OF PATRONAGE DIVIDENDS THAT ARE EITHER ALLOCATED OR TO BE ALLOCATED AT THE TIME THE AUDITED FINANCIAL STATEMENTS ARE PREPARED HOWEVER, BECAUSE THE ALLOCATION OF PATRONAGE DIVIDENDS IS ONE ASPECT OF HOW THE COOPERATIVE FULFILLS ITS TAX EXEMPT PURPOSE OF OPERATING ON A COOPERATIVE BASIS, THE AMOUNT OF PATRONAGE DIVIDENDS EITHER ALLOCATED OR TO BE ALLOCATED TO THE MEMBERS IS REPORTED ON FORM 990, PART IX, LINE 4 AS "BENEFITS PAID TO MEMBERS" PATRONAGE DIVIDENDS ARE ALLOCATED ON A PATRONAGE BASIS AND DONE SO PURSUANT TO A PRE-EXISTING OBLIGATION AS PROVIDED FOR IN THE "NON-PROFIT OPERATION" ARTICLE OF THE COOPERATIVE'S BYLAWS

Concedit D (North 330) 2010			
Part XIII Supplemental Information	on (continued)		
Return Reference	Explanation		
l			
-			

Schedule D (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 85-0084968

Name: SOCORRO ELECTRIC COOPERATIVE INC

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) PATRONAGE CAPITAL - CFC	184,581	С
(2) PATRONAGE CAPITAL - FEDERATED INSURANCE	229,029	С
(3) PATRONAGE CAPITAL - SEDC	109,558	С
(4) PATRONAGE CAPITAL - TRI-STATE	7,348,669	С
(5) PATRONAGE CAPITAL - WUESC	75,704	С
(6) PATRONAGE CAPITAL - COBANK	95,141	С
(7) CAPITAL TERM CERTIFICATES - CFC	504,406	С
(8) MEMBERSHIPS - CFC	1,000	С
(9) NOTES RECEIVABLE - WEATHERIZATION LOANS	1,931	С
(10) OTHER INVESTMENTS	3,219	С

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DLN: 93493133014725

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 SOCORRO ELECTRIC COOPERATIVE INC **Employer identification number**

85-0084968

Рa	Ttl Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	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 Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	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		Νo
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?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
_	Only 501(c)(3), 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			
_	The organization?			
a		5a		
Ь	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b		
_				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
		_		
а	The organization?	6a		
Ь	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			
	ın 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	f W-2 and/or 1099-MISC compensation		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
	(i)	154,699	101	1,380	18,102	19,224	193,506	0
	(ii)	0	0	0	0	0	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

The state of the s	to the part of the					
Return Reference	Explanation					
	INCLUDED IN THIS AMOUNT IS THE INCREASE IN ACTUARIAL VALUE OF BENEFITS PAYABLE UNDER A DEFINED BENEFIT RETIREMENT PLAN THE CONTRIBUTION RATE FOR PARTICIPANTS IN THE NRECA R&S DEFINED BENEFIT PENSION PLAN ARE THE SAME FOR ALL INDIVIDUALS IN THIS MULTI-EMPLOYER PLAN THE CHANGE IN ACTUARIAL VALUE FOR EACH PARTICIPANT, HOWEVER, VARIES WITH AGE, YEARS OF SERVICE AND THE CURRENT INTEREST RATE ENVIRONMENT IN OTHER WORDS, THE OLDER A PLAN PARTICIPANT IS, THE GREATER THE INCREASE IN THAT INDIVIDUAL'S CHANGE IN ACTUARIAL VALUE, ALL OTHER THINGS BEING EQUAL BECAUSE THIS RELATES TO A MULTI-EMPLOYER PLAN, CASH CONTRIBUTIONS TO THE PLAN IN LIEU OF THE ACTUARIAL INCREASE ARE EXPENSED IN THE FINANCIAL STATEMENTS AND REPRESENT THE TRUE COST TO THE COOPERATIVE JOSEPH HERRERA ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$ 7,273 401(K) EMPLOYER MATCH 10,829 TOTAL COLUMN C 18,102 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (7,273) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 22,354 EXPENSE TO THE COOPERATIVE \$33,183					

Schedule J (Form 990) 2014

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DLN: 93493133014725

OMB No 1545-0047

2014

Open to Public Inspection

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 SOCORRO ELECTRIC COOPERATIVE INC	Employer identification number
	85-0084968

Return Reference	Explanation
	THE COOPERATIVE WAS FORMED BY THE MEMBERS TO PROVIDE ELECTRIC SERVICE AT COST ON A COOPERATIVE BASIS

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

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

Return Reference	Explanation
Form 990, Part VI, Section A, line 8b	FROM TIME TO TIME THE ENTIRE BOARD WILL GO INTO EXECUTIVE SESSION FOR DISCUSSING ITEMS OF A SENSITIVE AND CONFIDENTIAL NATURE. ITEMS DISCUSSED IN EXECUTIVE SESSION ARE NOT PUBLIC AND ARE NOT DOCUMENTED HOWEVER, ACTIONS TAKEN BY THE BOARD AFTER EXECUTIVE SESSIONS ARE ADJOURNED ARE FULLY DOCUMENTED IN THE WRITTEN MINUTES. DURING THE 2014 CALENDAR YEAR, THE BOARD DID NOT APPOINT COMMITTEES TO ACT ON ITS BEHALF. SUBSEQUENT TO YEAR-END, BY LAWS WERE AMENDED AND BOARD POLICIES ADOPTED FOR THE CREATION OF THREE COMMITTEES - FINANCE, ETHICS AND STANDING - FOR DEVELOPING AND REPORTING RECOMMENDATIONS TO THE FULL BOARD.

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	AFTER REVIEW BY THE GENERAL MANAGER AND BOARD PRESIDENT, A COPY OF THE FORM 990 WAS EMAILED TO THE BOARD PRIOR TO FILING DISCUSSION AND REVIEW WAS PERFORMED AT THE BOARD MEETING IMMEDIATELY FOLLOWING FILING THE FORM 990

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

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	WHEN DETERMINING THE COMPENSATION OF THE GENERAL MANAGER, THE BOARD OF TRUSTEES UTILIZES INTERNAL RESOURCES TO OBTAIN COMPENSATION DATA FOR GENERAL MANAGERS OF OTHER ELECTRIC COOPERATIVES LOCATED IN THE COOPERATIVES GEOGRAPHIC REGION A WRITTEN EMPLOY MENT CONTRACT IS ALSO UTILIZED ADJUSTMENTS TO COMPENSATION ARE DELIBERATED AND APPROVED BY THE BOARD OF TRUSTEES THE BOARD, THE GENERAL MANAGER, AND A COMPENSATION COMMITTEE UTILIZE INTERNAL RESOURCES WHEN DETERMINING THE COMPENSATION OF THE COOPERATIVES OTHER EMPLOYEES MEETING THE DEFINITION OF OFFICER AND KEY EMPLOYEES, IF ANY

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

Return Reference	Explanation
Form 990, Part VI, Section A, Line 1	THE COOPERATIVE HAS 5 TRUSTEES, ALL 5 ARE ALLOWED TO VOTE. HOWEVER, THE BOARD PRESIDENT VOTES ONLY IN THE CASE OF A TIE.

Return Reference	Explanation
Form 990, Part VI, Section B, Line 14	SUBSEQUENT TO YEAR-END, THE BOARD ADOPTED A RECORD RETENTION POLICY AS PART OF AN OVERALL BOARD POLICY REVIEW

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

Т

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

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

Return Reference	Explanation
	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 \$1,467,015 LESS TRUSTEES FEES REPORTED ON 1099-MISC (24,971) LESS OFFICERS BENEFITS REPORTED ON LINE 5 (37,326) PLUS SALARIES AND WAGES ALLOCATED TO NONOPS 5,597 PLUS SALARIES AND WAGES ALLOCATED TO ASSET ACCOUNTS 742,838 TOTAL WAGES ACCRUED AND/OR PAID \$2,153,153

Return Reference	Explanation
IX, Line 24	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS ADMINISTRATIVE AND GENERAL EXPENSE ON FORM 990, PART IX, LINE 24 OFFICE SUPPLIES AND EXPENSE \$ 96,617 DOCUMENT REQUEST 24,685 OUTSIDE SERVICES EMPLOYED 262,262 DISTRICT MEETING EXPENSES 55,755 REGULATORY COMMISSION EXPENSE 22,990 ASSOCIATION DUES 111,162 ANNUAL MEETING EXPENSE 17,366 TRUSTEE EXPENSES 24,971 MAINTENANCE OF GENERAL PLANT 80,177 TOTAL ADMINISTRATIVE AND GENERAL EXPENSE PER 990 \$695,985

Return Reference	Explanation
Form 990, Part IX, Line 24e	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS OTHER EXPENSES ON FORM 990, PART IX, LINE 24E. TAXES EXPENSE \$144,179 SALES EXPENSE 14,029 OTHER DEDUCTIONS 97,851 TOTAL OTHER EXPENSES PER FORM 990 LINE 24E \$256,059

Return Reference	Explanation
Form 990, Part IX, Line 4	THE FORM 990 INSTRUCTIONS SPECIFICALLY STATE THAT THE AMOUNT OF PATRONAGE DIVIDENDS PAID TO THE MEMBERS SHOULD BE REPORTED ON PART IX, LINE 4 THE PHPRASE "PATRONAGE DIVIDENDS PAID" REPERS TO THE PROCESS, SUBSEQUENT TO YEAR PRUB, BY WHICH THE COOPERATIVE STAX EXEMPT PURPOSE IS TO PROVIDE ELECTRICITY TO ITS MEMBERS AND TO DO SO ON A COOPERATIVE BASIS TAX LAW DEFINES "OPERATING ON A COOPERATIVE BASIS" AS SUBGROINATION OF CAPITAL, DEMOCRATIC CONTROL, AND OPERATION AT COST THE COOPERATIVE OPERATES AT COST THROUGH THE ALLOCATION OF TRUE PATRONAGE DIVIDENDS (ALSO REFERRED TO AS ALLOCATIONS OF PATRONAGE CAPITAL) TO ITS MEMBERS PATRONAGE DIVIDENDS DIVIDENDS (ALSO REFERRED TO AS ALLOCATIONS OF PATRONAGE CAPITAL) TO ITS MEMBERS PATRONAGE DIVIDENDS PRODUCED FROM THE TRANSACTIONS DONE WITH OR FOR MEMBERS, AND (3) IN A FAR AND EQUITABLE BASIS ON THE BASIS OF PATRONAGE (I E PURCHASES). ADDITIONALLY, THE CALLOCATION OF PATRONAGE DIVIDENDS SHOULD BE MADE WITHIN A REASONABLE TIME PERIOD AFTER THE CLOSE OF THE COOPERATIVES YEAR-BND OF DECEMBER 31 EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE DIVIDEND IS PROVIDED FOR IN THE NON-PROPIT OPERATION ARTICLE OF THE COOPERATIVES BY LAWS AND IS SUMMARIZED AS FOLLOWS (A) IN ORDER TO INDUCE PATRONAGE AND TO ASSURE THAT THE COOPERATIVE WILL OPERATE ON A NON-PROFIT BASIS, THE COOPERATIVE IS OBLIGATED TO ACCOUNT ON A PATRONAGE BASIS TO ALL ITS MEMBERS FOR ALL AMOUNTS RECEIVED AND RECEIVED AND RECEIVED AND RECEIVED ON THE PROVISION OF ELECTRIC ENERGY) (B) THE MARGINS FROM THE REPOSISION OF ELECTRIC ENERGY) (B) THE MARGINS FROM THE REPOSISION OF ELECTRIC ENERGY) IN EXCESS OF OPERATING COSTS AND EXPRESSES PROPERLY CHARGEABLE AGAINST SUCH SERVICES (IE MARGINS FROM THE UNDERSTANDING THAT THEY ARE PURPOSED TO THE CAPITAL ACCOUNT FOR EACH MEMBERS AS CAPITAL (C) THE COOPERATIVE SOBLIGATED TO PAY BY CREDITS TO A CAPITAL ACCOUNT FOR EACH MEMBERS AS CAPITAL (C) THE COOPERATIVE OPERATION OF ELECTRIC ENERGY AND THE PROVISION OF ELECTRIC ENERGY AND THE PROVISION OF ELECTRIC ENERGY AND THE PROVISION OF

Return Reference	Explanation
Form 990, Part XI, line 9	OTHER COMPREHENSIVE INCOME - PROVISION FOR PENSION & BENEFITS -5,700 PATRONAGE CAPITAL RETIRED - 1,929,097 PATRONAGE CAPITAL ASSIGNABLE 1,705,951

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

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2014

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SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

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

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt 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))	(f) Direct controlling entity	(g Section (b)(: contro entit	n 512 13) olled
						Yes	No
Ро́ вох н	PROVIDE SCHOLARSHIPS & EDUCATIONAL OPPORTUNITIES IN THE COOP'S SERVICE AREA	NM	501(c)(3)		SOCORRO ELECTRIC COOPERATIVE INC	Yes	

Yes No

Yes

No

(a) Name, address, and EIN of related organization (b) Primary activity I Legal domicile (state or foreign country) (state or foreign countr	Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 3 because it had one or more related organizations treated as a partnership during the tax year.						V, line 34	4			
		Name, address, and EIN of	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-		Share of end-of-year	Disproprtionate allocations?	Code V-UBI amount in box 20 of Schedule K-1	managing	(k) Percentage ownership

Part IV	Identification of Related Organizations Taxable as a Corporation or Trust Complete if 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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

Note Note Complete line 1 fany entity is listed in Parts II, III, or IV of this schedule Image Ima	Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.					
a Receipt of (1) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Idail, grant, or capital contribution to related organization(s) No b (5) Gift, grant, or capital contribution from related organization(s) Idail No c (5) Gift, grant, or capital contribution from related organization(s) Idail No c (6) Loans or loan guarantees to or for related organization(s) Idail No c (7) Dividends from related organization(s) Idail No d (8) Purchase of assets to related organization(s) Idail No d (8) Purchase of assets with related organization(s) Idail No d (8) Purchase of assets with related organization(s) Idail No d (8) Purchase of assets with related organization(s) Idail No d (8) Purchase of facilities, equipment, or other assets to related organization(s) Idail No d (8) Purchase of facilities, equipment, or other assets from related organization(s) Idail No d (8) Purchase of services or membership or fundraising solicitations for related organization(s) Idail No d (8) Purchase of services or membership or fundraising solicitations by related organization(s) Idail No d (8) Purchase of services or membership or fundraising solicitations by related organization(s) Idail No d (8) Purchase of services or membership or fundraising solicitations by related organization(s)	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					
b Gift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) d Coans or loan guarantees to or for related organization(s) d Coans or loan guarantees by related organization(s) d Dividends from related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) f Exchange of assets from related organization(s) g Lease of facilities, equipment, or other assets to related organization(s) g Lease of facilities, equipment, or other assets from related organization(s) g Performance of services or membership or fundraising solicitations for related organization(s) g Paring of facilities, equipment, and indiresting solicitations by related organization(s) g Sharing of paid employees with related organization(s) g Reimbursement paid to related organization(s) for expenses g Reimbursement paid to related organization(s) for expenses g Reimbursement paid by related organization(s) for expenses g Cother transfer of cash or property to related organization(s) g Cother transfer of cash or property to related organization(s) g Cother transfer of cash or property to related organization(s)	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) d Loans or loan guarantees by related organization(s) f Dividends from related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) h Purchase of assets from related organization(s) h Purchase of assets with related organization(s) f Lease of facilities, equipment, or other assets to related organization(s) h Lease of facilities, equipment, or other assets from related organization(s) h Performance of services or membership or fundraising solicitations for related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations by related organization(s) h Performance of services or membership or fundraising solicitations for related organization(s) h Performance of services or membership or fundraising solicitations for related organization(s) h Performance	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No		
d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees to or for related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) f Purchase of assets from related organization(s) i Exchange of assets with related organization(s) ii No ii Performance of services or membership or fundraising solicitations for related organization(s) in Performance of services or membership or fundraising solicitations by related organization(s) in Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) in Sharing of paid employees with related organization(s) in Sharing of paid employees with related organization(s) in No Reimbursement paid to related organization(s) for expenses in No in Reimbursement paid by related organization(s) for expenses in No in N	b Gift, grant, or capital contribution to related organization(s)	1b		No		
Lease of facilities, equipment, or other assets from related organization(s) 1	c Gift, grant, or capital contribution from related organization(s)	1c		No		
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m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses 1p No q Reimbursement paid by related organization(s) for expenses 1q Yes 1 No	k Lease of facilities, equipment, or other assets from related organization(s)	1k		No		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s)	I Performance of services or membership or fundraising solicitations for related organization(s)	11		No		
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q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s)	• Sharing of paid employees with related organization(s)	10		No		
q Reimbursement paid by related organization(s) for expenses r Other transfer of cash or property to related organization(s)						
r Other transfer of cash or property to related organization(s) 1 No	p Reimbursement paid to related organization(s) for expenses	1p		No		
	q Reimbursement paid by related organization(s) for expenses	1q	Yes			
s Other transfer of cash or property from related organization(s)	r Other transfer of cash or property to related organization(s)	1r		No		
	s Other transfer of cash or property from related organization(s)	1s		No		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SOCORRO ELECTRIC FOUNDATION - NA LESS THAN 50000	N		
(2) SOCORRO ELECTRIC FOUNDATION - NA LESS THAN 50000	Q		

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	(c) (d) Legal Predominant Income (state or foreign country) (sextended 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) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managıng partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No		Yes	No	
									\Box	1			

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Part VII Supplemental Information

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

Return Reference Explanation

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