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DLN: 93493182001106

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 <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2015

Open to Public Inspection

| | r + b | 2015.00 | lendar year, or tax year beginnii | ng 01-01-2015 , and ending 12-31-201 | · E | | | | |
|--------------------------------|--|--------------------------------|---|---|--------------------------------------|----------------------------|---------------------|----------------------------|--|
| | | e 2015 Ca applicable | C Name of organization | ig 01-01-2015 , and ending 12-31-201 | .5 | D Empl | oyer ide | entification number | |
| | | change | Michigan Electric Cooperative Association | | 38-2214287 | | | | |
| ┌ Nar | | _ | Doing business as | | | | | | |
| Initi | | _ | Soring Dubinicas da | | | | | | |
| Fina | al | | | nail is not delivered to street address) Room/su | ıte | E Teleph | one nun | nber | |
| retu | ırn/teı | rmınated | 201 Townsend St No 900 | | | (517 |) 351-6 | 5322 | |
| M Am | ended | l return | City or town, state or province, cou Lansing, MI 48933 | ntry, and ZIP or foreign postal code | | | | | |
| Application pending | | | Lansing, MT 40933 | G Gross | G Gross receipts \$ 3,228,750 | | | | |
| | | | F Name and address of pri | ncıpal officer | H(a) I | s this a grou | p returr | | |
| | | | Craig Borr 201 Townsend St No 900 | | | subordinates? | | ΓYes ΓNο | |
| | | | Lansing, MI 48933 | | | Are all subord ncluded? | linates | □ Yes □ No | |
| | | | | | I | f "No," attac | h a lıst | (see instructions) | |
| I Tax | (-exer | mpt status | 501(c)(3) 501(c)(6) | (insert no) 4947(a)(1) or 527 | H(c) | Group exemp | tıon nu | mber ► | |
| J W | ebsit | e: ► ww | w meca coop | | | | | | |
| K Forn | n of o | rganızatıor | Corporation Trust Association | on Other 🕨 | L Year | of formation 1 | 978 M | State of legal domicile Mi | |
| Pa | rt I | Sum | ımary | | • | | | | |
| | | • | scribe the organization's mission | _ | | | | | |
| | <u>T</u> | o promo | te and serve the needs of the me | ember cooperatives | | | | | |
| Governance | <u>-</u> | | | | | | | | |
| EII | _ | | | | | | | | |
| ove. | 2 | Check th | nis box 🔰 if the organization di | scontinued its operations or disposed o | f more th | an 25% of its | net as | sets | |
| | 3 | Number | of voting members of the govern | ing body (Part VI, line 1a) | | | 3 | 22 | |
| න ගු | | | | of the governing body (Part VI, line 1b) | | | 4 | 22 | |
| Ĕ, | | | · - | calendar year 2015 (Part V, line 2a) | | | 5 | 6 | |
| Activities & | | | | ecessary) | | | 6 | 25 | |
| a. | | | | art VIII, column (C), line 12 | | | 7a | 90,701 | |
| | ьΝ | let unrel | ated business taxable income fro | om Form 990-T, line 34 | | | 7b | -29,746 | |
| | | | | | | Prior Year | | Current Year | |
| | 8 | Contr | butions and grants (Part VIII, I | ne 1h) | | | 0 | 0 | |
| ule | 9 | Progr | am service revenue (Part VIII, I | | 2,948 | ,480 | 3,225,474 | | |
| Revenue | 10 | Inves | tment income (Part VIII, columi | n (A), lines 3, 4, and 7d) | | 1 | ,526 | -13,335 | |
| | 11 | | | lines 5, 6d, 8c, 9c, 10c, and 11e) | | | | | |
| | 12 | Total 12) | revenue—add lines 8 through 11 | (must equal Part VIII, column (A), lin | e | 2,950 | ,006 | 3,212,139 | |
| | 13 | | s and similar amounts haid (Part | : IX, column (A), lines 1-3) | | 1 | ,500 | 0 | |
| | 14 | | | IX, column (A), line 4) | | | 0 | 0 | |
| | 15 | | | ee benefits (Part IX, column (A), lines | ' | 0.2.4 | 100 | | |
| \$ | | 5-10 | | (| 934 | ,189 | 939,818 | | |
| Expenses | 16a | Profe | ssional fundraising fees (Part IX | , column (A), line 11e) | | | 0 | 0 | |
| ਤੂ ਤ | b | Total fo | ındraısıng expenses (Part IX, column (D | 9), line 25) • 0 | | | | | |
| | 17 | | | lines 11a-11d, 11f-24e) | | | | 2,269,077 | |
| | 18 | | | st equal Part IX, column (A), line 25) | | 2,930,347 3,208 | | | |
| . 07 | 19 | Rever | nue less expenses Subtract line | • | 19 | ,659 | 3,244 | | |
| 200 200 | | | | | Beginn | ing of Current | Year | End of Year | |
| Not Assets or Fund Balances | 20 | Total | assets (Part X, line 16) | | | 2,482 | ,521 | 1,251,320 | |
| MA | 21 Total liabilities (Part X, line 26) | | | | | 2,139 | ,507 | 905,062 | |
| žÏ | 22 | Neta | ssets or fund balances Subtract | line 21 from line 20 | | 343 | ,014 | 346,258 | |
| Par | | | ature Block | | | | | | |
| | | | | amıned thıs return, ıncludıng accompan nplete Declaratıon of preparer (other tl | | | | | |
| | | | nowledge | | | | | | |
| | | *** | *** | | | 2016-06-02 | | | |
| Sign | | I . | ature of officer | | | Date | | | |
| Here | | Crau | g Borr President/CEO | | | | | | |
| | | | e or print name and title | | | | | | |
| | | | Print/Type preparer's name JSA CHAFFEE CPA | | oate 016-06-02 | Check I if | PTIN P0019 | 2/152 | |
| Paic | i | | | LISA CHAIT LE CPA | 010-00-02 | 3CII CITIPIOYCU | | | |
| Pre | pare | er ⊢ | Firm's name FIDE BAILLY LLP | OV 2545 | | | 's EIN ► 45-0250958 | | |
| | _ | . 1' | Firm's address 🟲 4310 17TH AVE S PO B | NUX 2045 | | Phone no (70 | 1) 239-8 | 5500 | |

FARGO, ND 581082545
May the IRS discuss this return with the preparer shown above? (see instructions)

Use Only

. ✓ Yes ☐ No

| Form | 990 (2015) | | | | Page : |
|------------|--|--|---|---|--------------------------|
| Par | t IIII Stateme | ent of Program Service | Accomplishments | | |
| | Check if S | chedule O contains a respons | e or note to any line in this Part III | | 고 |
| 1 | Briefly describe | the organization's mission | · | | |
| <u>Тор</u> | romote and serve t | he needs of the member coope | eratives | | |
| _ | | | | | |
| 2 | Did the organizat the prior Form 99 | | program services during the year whi | | Yes 🗸 No |
| | If "Yes," describe | e these new services on Scheo | lule O | | |
| 3 | _ | ion cease conducting, or make | e significant changes in how it conduction. | | Yes ▼No |
| | If "Yes," describe | e these changes on Schedule (| 0 | | |
| 4 | expenses Sectio | | complishments for each of its three l ganizations are required to report the h program service reported | | |
| 4a | (Code |) (Expenses \$ | ıncludıng grants of \$ |) (Revenue \$ |) |
| | | lative and regulatory interests of Mich y to member-consumers | nigan's electric cooperatives with a unified me | essage that ensures their ability to prov | vide safe, reliable, and |
| 4b | (Code |) (Expenses \$ | including grants of \$ |) (Revenue \$ |) |
| | Assist Michigan's ele engagement | ectric cooperatives with the developm | ent and implementation of strategic commun | nications that advance their priorities a | nd member-consumer |
| 4c | (Code |) (Expenses \$ | including grants of \$ |) (Revenue \$ |) |
| | Empower the safety | y culture of Michigan's electric cooper | atives and utility partners through a compreh | ensive safety program | |
| | See Additional [| Data | | | |
| | | | | | |

) (Revenue \$

Other program services (Describe in Schedule O)

Total program service expenses ▶

including grants of \$

4d

(Expenses \$

| Form 990 (2 | 2015) | | |
|-------------|---------------------|----------|-----------|
| 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 | | 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 | Yes | |
| 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 | 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, VIII, VIII, IX, or X as applicable | | | |
| a | 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 | | No |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | No |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | No |
| 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 | |
| | 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? If "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? If "Yes," complete Schedule G, Part II | 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 | | N o |
| 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 IV | | | |
| | | 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 |
| 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? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | | N o |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | Νο |
| 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 | | No |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| b | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <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 | |
| | | F | orm 990 | (2015) |

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|-----|--|----------|-----|------|
| Pai | Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | | Yes | No |
| | Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 20 | | | |
| | Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0 | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | Yes | |
| 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 | | | |
| b | 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 | Yes | |
| 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 | Yes | |
| 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 |
| b | If "Yes," enter the name of the foreign country ►_ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | No |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | 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 | | |
| f | 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 | 7g | | |
| h | required? | 79 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 | 7.11 | | |
| | 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 | | | |
| D | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| 11 | Section 501(c)(12) organizations. Enter | | | |
| а | 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) | | | |
| 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. | | | |
| 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 in which the organization is licensed to issue qualified health plans | | | |
| c | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | No |
| h | If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O | 14b | | |

| | ection A. Governing Body and Management | | | 1 |
|--|--|--------------------------------------|-------------------|----------|
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 22 | | | |
| | 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 1b 22 | | | |
| 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 | Yes | |
| 3 | | 3 | Yes | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | Yes | |
| 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 | | | |
| b | more members of the governing body? | 7a 7b | Yes Yes | |
| | or persons other than the governing body? | ,,, | 1 03 | |
| | year by the following | | | |
| | The governing body? | 8a | Yes | <u> </u> |
| | Each committee with authority to act on behalf of the governing body? | 8b | | No |
| | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
| Se | ection B. Policies (This Section B requests information about policies not required by the Internal R | even | | |
| | | | Yes | No |
| | Did the organization have local chapters, branches, or affiliates? | 10a | | No |
| | 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 | | |
| 11- | | | | |
| ша | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Yes | |
| | | | Yes | |
| b 12a | the form? | | Y es Y es | |
| b 12a | the form? | 11a | | |
| b 12a b | the form? | 11a 12a | Yes | |
| b 12a b c | the form? | 11a 12a 12b | Yes | |
| b 12a b c | the form? | 11a 12a 12b | Yes Yes | |
| b 12a b c 13 | the form? | 11a 12a 12b 12c 13 | Yes Yes Yes | |
| b 12a b c 13 14 | the form? | 11a 12a 12b 12c 13 | Yes Yes Yes | No |
| b 12a b c 13 14 | the form? | 11a 12a 12b 12c 13 14 | Yes Yes Yes | No No |
| b 12a b c 13 14 | the form? | 11a 12a 12b 12c 13 14 | Yes Yes Yes | |
| b 12a b c 13 14 15 a b | the form? | 11a 12a 12b 12c 13 14 | Yes Yes Yes | |
| b 112a b c 113 114 115 a b | the form? | 11a 12a 12b 12c 13 14 15a 15b | Yes Yes Yes | No |
| b 12a b c 13 14 15 a b | the form? | 11a 12a 12b 12c 13 14 15a 15b 16a | Yes Yes Yes | No |
| b 12a b c 13 14 15 a b | 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 16a | Yes Yes Yes | No |
| b 12a b c 13 14 15 a b | the form? | 11a 12a 12b 12c 13 14 15a 15b 16a | Yes Yes Yes | No |

State the name, address, and telephone number of the person who possesses the organization's books and records Homeworks Tri-County Electric Cooperative 7973 E Grand River Avenue Portland, MI 48875 (517) 647-7554 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

| organizations 충료 휴 풀 👂 [흡률 호 MISC) rel | r) mated of other ensation n the |
|--|--|
| See Additional Data Table | ation and ated Izations |
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| | 90 (2015) |

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

| (A) Name and Title | me and Title A verage hours per week (list any hours | | tion (han d n is | ne b both | oox, an d | heck unless officer stee) | 1 | (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 |
| See Additional Data Table | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| 1b Sub-Total | | | | | | • | | | | |
| c Total from continuation sheetd Total (add lines 1b and 1c) . | s to Part VII, S | | | <u>.</u> | | | | 461,957 | 0 | 148,299 |
| 2 Total number of individuals (in \$100,000 of reportable compe | | | | | | d abov | e) wl | no received more th | an | |

| | | | Yes | יו |
|---|---|---|-----|----|
| 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 | | N |
| 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 I 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? If "Yes," complete Schedule I for such person | 5 | | N |

| | Yes | No |
|---|-----|----|
| | | |
| 3 | | No |
| | | |
| | | |
| 4 | Yes | |
| | | |
| 5 | | No |

Section B. Independent Contractors

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 |
|--|-----------------------------------|---------------------|
| Wolverine Power Supply Cooperative Inc | Management Services | 364,000 |
| 10125 W Watergate Rd Cadıllac, MI 49601 | | |
| Rogers Printing | Printing/Publishing Country Lines | 190,606 |
| PO Box 215 Ravenna, MI 49451 | | |
| Dykema-Gossett PLLC | Law Firm | 186,827 |
| 201 Townsend St Ste 900 Lansing, MI 48933 | | |
| Freeport Press | Printing/Publishing | 126,592 |
| PO Box 198 Freeport, OH 43973 | | |
| Ciessa Design | Design for Publication | 105,232 |
| 200 E Grand River Ave Lansing, MI 48906 | | |

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 \blacktriangleright 5

| Part V | / 🛊 🛊 1 | Statement of Revenue | | | | | _ |
|---------------------------------------|---------|--|------------------------|-------------------|--|---|--|
| | | Check if Schedule O contains a respor | nse or note to any lin | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| s છ | 1a | Federated campaigns 1a | | | | | |
| Grants mounts | ь | Membership dues 1b | | | | | |
| Gr. | c | Fundraising events 1c | | | | | |
| ons, Gifts, Grants Similar Amounts | d | Related organizations 1d | | | | | |
| , Gi | l e | Government grants (contributions) 1e | | | | | |
| ons Sir | ۔ ا | All other contributions, gifts, grants, and 1f | | | | | |
| iuti her | ' | sımılar amounts not ıncluded above | | | | | |
| Contributions, and Other Sim | g | Noncash contributions included in lines 1a-1f \$ | | | | | |
| Cor | h | Total. Add lines 1a-1f | | | | | |
| | | | Business Code | | | | |
| enu. | 2a | Membership Dues | 900099 | 1,493,016 | 1,493,016 | | |
| ₽e | ь | Publications | 511120 | 1,133,562 | 1,042,861 | 90,701 | |
| e2 | c | Safety/Loss Services | 900099 | 507,342 | 507,342 | | |
| že. M | d | Education Training | 611710 | 75,963 | 75,963 | | |
| Program Serwoe Revenue | e | Other Supporting Reven | 900099 | 15,591 | 15,591 | | |
| ogra | f | All other program service revenue | | | | | |
| Ğ | g | Total. Add lines 2a-2f | | 3,225,474 | | | |
| | 3 | Investment income (including dividendand other similar amounts) | | 2,421 | | | 2,421 |
| | 4 | Income from investment of tax-exempt bond | <u> </u> | | | | |
| | 5 | Royalties | 🕨 | | | | |
| | 6a | (1) Real Gross rents | (II) Personal | | | | |
| | ь | Less rental | | | | | |
| | _ | expenses Rental income | | | | | |
| | d | or (loss) Net rental income or (loss) | | | | | |
| | " | (i) Securities | (II) Other | | | | |
| | 7a | Gross amount from sales of assets other than inventory | 855 | | | | |
| | ь | Less cost or | 15.511 | | | | |
| | | other basis and sales expenses | 16,611 | | | | |
| | C | Gain or (loss) Net gain or (loss) | -15,756 | -15,756 | | | -15,756 |
| Other Revenue | 8a | Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 | | 20,100 | | | 37, 33 |
| Jer | | a | | | | | |
| ₹ | | Less direct expenses b | | | | | |
| | | Net income or (loss) from fundraising Gross income from gaming activities See Part IV, line 19 | events Þ- | | | | |
| | ь | Less direct expenses b | | | | | |
| | | Net income or (loss) from gaming acti | | | | | |
| | 10a | Gross sales of inventory, less returns and allowances | · | | | | |
| | | Less cost of goods sold b Net income or (loss) from sales of invo | entory 🛌 | | | | |
| | | Miscellaneous Revenue | Business Code | | | | |
| | 11a | | | | | | |
| | b | | | | | | |
| | C | A II a bla a u uu | | | | | |
| | d e | All other revenue Total. Add lines 11a-11d | 🕨 | | | | |
| | | | · . | | | | |
| | 12 | Total revenue. See Instructions . | · · · · • | 3,212,139 | 3,134,773 | 90,701 | -13,335 |

| | Statement of Functional Expenses | | | | 1 age 20 |
|---------|---|-----------------------|---|---|---------------------------------------|
| Section | on 501(c)(3) and 501(c)(4) organizations must complete all columns | All other organiza | ations must con | nplete column (A) | |
| | Check if Schedule O contains a response or note to any line in t | his Part IX | | | |
| | ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 | | | | |
| 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 | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | | | | |
| 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 | 939,818 | | | |
| 8 | Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | | | | |
| b | Legal | 132,025 | | | |
| С | Accounting | 46,360 | | | |
| d | Lobbying | 102,094 | | | |
| е | 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) | 649,315 | | | |
| 12 | Advertising and promotion | 500 | | | |
| 13 | Office expenses | 831,922 | | | |
| 14 | Information technology | 20,601 | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 39,714 | | | |
| 17 | Travel | 117,364 | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 60,148 | | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 22,246 | | | |
| 23 | Insurance | 13,181 | | | |
| 24 | Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) | | | | |
| а | Workshops | 97,717 | | | |
| b | Youth Programs | 46,261 | | | |
| c | Membership Dues | 43,315 | | | |
| d | | | | | |
| e | All other expenses | 46,314 | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 3,208,895 | | | |
| 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 (2015) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 1 2 1.271.812 2 862.106 Savings and temporary cash investments . . . Pledges and grants receivable, net 3 3 753.417 4 4 19.507 5 Loans and other receivables from current and former officers, directors, trustees. key employees, and highest compensated employees. Complete Part II of 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 7 Notes and loans receivable, net 44,798 8 8 354.242 341.937 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 116,464 10a Complete Part VI of Schedule D b 10b 96.561 51,244 10c 19,903 Less accumulated depreciation 11 11 12 12 Investments—other securities See Part IV, line 11 7.008 13 7,867 13 Investments—program-related See Part IV, line 11 . 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 2.482.521 16 1,251,320 157,231 17 17 196.353 Accounts payable and accrued expenses 18 18 1,150,311 19 19 20 20 831.965 21 21 708.709 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 2,139,507 26 905.062 26 **Total liabilities.**Add lines 17 through 25 . . . Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete Balance lines 27 through 29, and lines 33 and 34. 343.014 346.258 27 27 28 28 Fund 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Net Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 33 343.014 33 346,258 Total liabilities and net assets/fund balances 2.482.521 1,251,320 34

| Par | t XI 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 | | 3,2 | 212,139 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 3,2 | 208,895 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | | 3,244 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | 343,014 |
| 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 | | | |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | | | 346,258 |
| Par | t XIII Financial Statements and Reporting | <u> </u> | | | • |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | . $ abla$ |
| | | | | 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 | | Νo |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both | wed on | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| ь | Were the organization's financial statements audited by an independent accountant? | | 2b | Yes | |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both | rate | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| c | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Yes | |
| | If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | e | 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 | | |

Additional Data

Software ID: Software Version:

EIN: 38-2214287

Name: Michigan Electric Cooperative

Association

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

| (Code |) (Expenses \$ | including grants of \$ |) (Revenue \$ |) |
|---------------------|---------------------------------------|---|---------------|---|
| Facilitate the coll | aborative implementation of energy in | nitiatives on behalf of Michigan's electric | cooperatives | |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| Compensated Employees, and Ind | | ntracto | ors | | | | | I | 1 | 1 1 |
|--------------------------------|---|-----------------------------------|---------------------------|-------------|--------------|------------------------------|----------|---|---|---|
| (A) Name and Title | (B) Average hours per week (list any hours | Posi more t perso and a | tion (han o n is b | ne b oth | ox,ι an o | ınless fficer | 5 | (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 |
| Bob Kran | 1 00 | x | | x | | | | 0 | 0 | 0 |
| Chair Mark Kappler | 1 00 | | | | | | | | | |
| Mark Kappler Vice Chair | | x | | х | | | | 0 | 0 | 0 |
| Eric Baker | 1 00 | | | | | | | | | |
| Secretary/Treasurer | | X | | Х | | | | 0 | 0 | 0 |
| Tony Anderson | 1 00 | x | | | | | | 0 | 0 | 0 |
| Director | | | | | | | | 0 | 0 | Ů |
| Jon Zickert Director | 1 00 | × | | | | | | 0 | 0 | 0 |
| Louis Wenzlaff | 1 00 | | | | | | | | | |
| Director | | X | | | | | | 0 | 0 | 0 |
| Steve Boeckman | 1 00 | x | | | | | | 0 | 0 | 0 |
| Director | | | | | | | | 0 | 0 | Ů. |
| Dan Dasho | 1 00 | x | | | | | | 0 | 0 | 0 |
| Director Dahari Mila | 1 00 | | | | | | | | | |
| Deborah Miles Director | | x | | | | | | 0 | 0 | 0 |
| Nancy Gardner-Platt | 1 00 | х | | | | | | 0 | 0 | 0 |
| Director Pohent Hanne | 1 00 | | | | | | | | | |
| Robert Hance Director | | × | | | | | | 0 | 0 | 0 |
| Ray Wozniak | 1 00 | X | | | | | | 0 | 0 | 0 |
| Dallas Braun | 1 00 | | | | | | | | | |
| Director | 1.00 | X | | | | | | 0 | 0 | 0 |
| Kimberly Molitor Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| Brian Burns | 1 00 | × | | | | | | 0 | 0 | 0 |
| Director | 1 00 | | | | | | | | | |
| Director | | Х | | | | | | 0 | 0 | 0 |
| Jerry Akers Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| Robert Schallip | 1 00 | | | | | | | | | |
| Director | 1 00 | X | | | | | | 0 | 0 | 0 |
| Fred Turk Director | | x | | | | | | 0 | 0 | 0 |
| Calvin Koski | 1 00 | х | | | | | | 0 | 0 | 0 |
| Director Kimber Hansen | 1 00 | | | | | | \vdash | | | |
| Director | | × | | | | | | 0 | 0 | 0 |
| Richard Walsworth | 1 00 | Х | | | | | | 0 | 0 | 0 |
| Director Tom Harrell | 1 00 | | | | | | _ | | | |
| Director | | Х | | | | | | 0 | 0 | 0 |
| Craig Borr President/CEO | 40 00 | | | х | | | | 0 | 0 | 0 |
| Art Thayer | 50 50 | | | | | | | | _ | |
| Director of Energy Efficie | | | | | | X | | 127,570 | 0 | 52,750 |
| | | | | | | | | | | |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per week (list any hours | Posit more th persoi and a | ion (nan o n is b | ne b oth | ox, u an of | ınless fficer | : | (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 trustae or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |
| Doug Snitgen Executive Vice President | 44 80 | | | | | х | | 117,655 | 0 | 34,804 |
| Jerrold McElroy Director of Safety & Loss | 54 60 | | | | | х | | 109,620 | 0 | 39,484 |
| Casey Clark Director of Communications | 49 50 | | | | | х | | 107,112 | 0 | 21,261 |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493182001106

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

►Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

OMB No 1545-0047 2015

Open to Public Inspection

www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-B.

 ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part

| Name of the organization Michigan Electric Cooperative Association 23-2214287 23-11-14 Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 olitical expenditures 2 olitical expenditures 2 | | Section 501(c)(4), (5), or (6) organizations Complete Part III | |
|---|----------------|---|-------------------------------|
| Association 38-2214287 Provide a description of the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 | | me of the organization | mployer identification number |
| Provide a description of the organization's direct and indirect political campaign activities in Part IV all provide a description of the organization's direct and indirect political campaign activities in Part IV all provide a description of the organization's direct and indirect political campaign activities in Part IV art I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities there the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ | | | 8-2214287 |
| ollunteer hours Sert I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No 1 If 'Yes,' describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ | ar | t I-A Complete if the organization is exempt under section 501(c) or is a se | ection 527 organization. |
| ollunteer hours Solumeer hours Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 Tyes No If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," describe in Part IV The amount directly expended by the filing organization for section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities If the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities | 1 | Provide a description of the organization's direct and indirect political campaign activities in Part | IV |
| s olunteer hours Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 | 2 | | |
| art I-B Complete if the organization is exempt under section 501(c)(3). L Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," No If "Yes," describe in Part IV But I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). L Enter the amount directly expended by the filing organization for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ | olıt | ical expenditures | |
| art I-B Complete if the organization is exempt under section 501(c)(3). Lenter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," No If "Yes," describe in Part IV Art I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Lenter the amount directly expended by the filing organization for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Substitute of the filing organization's funds contributed to other organizations for section 527 exempt function activities | _ | | |
| art I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," describe in Part IV art I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ | _ | | * |
| art I-B Complete if the organization is exempt under section 501(c)(3). Lenter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," No If "Yes," describe in Part IV Art I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Lenter the amount directly expended by the filing organization for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Substitute of the filing organization's funds contributed to other organizations for section 527 exempt function activities | 3 | | > |
| art I-B Complete if the organization is exempt under section 501(c)(3). Lenter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If the organization in Part IV B If "Yes," describe in Part IV B If "Yes," describe if the organization is exempt under section 501(c), except section 501(c)(3). Lenter the amount directly expended by the filing organization for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ | | nteer hours | |
| Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," describe in Part IV The organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ | 014 | | |
| Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ | | | |
| Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," describe in Part IV If "Yes," describe in Part IV Inter the amount directly expended by the filing organization for section 501(c), except section 501(c)(3). Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ | 2 1 | + LEC Complete if the organization is exempt under section E01(c)(3) | |
| Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No In a large of the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No In a large of the organization is exempt under section 501(c), except section 501(c)(3). In a large of the organization is exempt under section 501(c), except section 501(c)(3). In a large of the organization is exempt under section 527 exempt function activities the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities | | | |
| If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Inter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities | L | Enter the amount of any excise tax incurred by the organization under section 4955 | \$ |
| Vas a correction made? Yes No b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). I Enter the amount directly expended by the filing organization for section 527 exempt function activities The property of the filing organization's funds contributed to other organizations for section 527 exempt function activities The property of the filing organization's funds contributed to other organizations for section 527 exempt function activities The property of the filing organization's funds contributed to other organizations for section 527 exempt function activities The property of the property of the filing organization for section 527 exempt function activities The property of | 2 | Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ | \$ |
| Yes No b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). L Enter the amount directly expended by the filing organization for section 527 exempt function activities The property of the filing organization's funds contributed to other organizations for section 527 exempt function activities The property of the filing organization's funds contributed to other organizations for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities The property of the filing organization organization for section 527 exempt function activities | 3 | If the organization incurred a section 4955 tax, did it file Form 4720 for this year? | ☐ Yes ☐ No |
| Yes No b | l a | | |
| b If "Yes," describe in Part IV art I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). L Enter the amount directly expended by the filing organization for section 527 exempt function activities the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities * * * * * * * * * * * * * | as | a correction made? | |
| Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities nter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities * * * * * * * * * * * * * | - Y | es | |
| Enter the amount directly expended by the filing organization for section 527 exempt function activities the section 527 exempt function activities nter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities the section 527 exempt function activities \$ | b | If "Yes," describe in Part IV | |
| nter the amount of the filing organization's funds contributed to other organizations for section 527 xempt function activities | ar | t I-C Complete if the organization is exempt under section 501(c), except s | section 501(c)(3). |
| nter the amount of the filing organization's funds contributed to other organizations for section 527 xempt function activities • | L | Enter the amount directly expended by the filing organization for section 527 exempt function act | vities \$ |
| xempt function activities • \$ | 2 | | |
| | | | |
| | • | | |
| | _ | | \$ |
| Total exempt function expenditures. Add fines I and 2. Enter here and on Form 1120-POL, line 170 | , | Total exempt function expanditures, Add lines 1 and 2. Enter here and an Form 1120-DOL line 12 | |
| | , | i otal exempt function expenditures. Add lines 1 and 2. Enter nere and on Form 1120-POL, line 1. | \$ |
| 4 | | • | \$ |

| Did the filing org | janization file Form 11 | L20-POL for this year? | | | |
|-------------------------|---|--|--|--|--|
| ┌ Yes ┌ No | | | | | |
| organızatı amount of | on made payments F political contributior | nd employer identification number (For each organization listed, enter t ns received that were promptly and political action committee (PAC) I | he amount paid fro directly delivered | m the filing organization's f to a separate political orga | unds Also enter the nızatıon, such as a |
| (a) |) Name | (b) A ddress | (c) EIN | (d) A mount paid from filing organization's funds If none, enter -0- | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0- |
| | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| For Paperwork Re | duction Act Notice, se | e the instructions for Form 990 or 99 | 00-EZ. | Cat No 50084S Schedule C (F | Form 990 or 990-EZ) 2015 |

| Schedule C (F | Pag | je ∡ |
|---------------|--|------|
| Part II-A | Complete if the organization is exempt under section $501(c)(3)$ and filed Form 5768 (election under section $501(h)$). | ī |
| | | |

A Check ▶ 🗔 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures | (a) Filing | (b) Affiliated |
|---|--------------------------|----------------|
| (The term "expenditures" means amounts paid or incurred.) | organization's totals | group totals |

Total lobbying expenditures to influence public opinion (grass roots

1a lobbying)

- $oldsymbol{b}$ Total lobbying expenditures to influence a legislative body (direct lobbying)
- Total lobbying expenditures (add lines 1a and 1b)
- $oldsymbol{d}$ O ther exempt purpose expenditures
- Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount Enter the amount from the following table in both columns

| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: |
|---|---|
| Not over \$500,000 | 20% of the amount on line 1e |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 |
| Over \$17,000,000 | \$1,000,000 |

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

Subtract line 1f from line 1c If zero or less, enter -0-

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 i reporting section 4911 tax for this year?

Yes 🗆

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

| | Lobbying Expendit | ures During 4 | 4-Year Avera | ging Period | | |
|----|--|-----------------|-----------------|-----------------|-----------------|------------------|
| | Calendar year (or fiscal year beginning in) | (a) 2012 | (b) 2013 | (c) 2014 | (d) 2015 | (e) Total |
| 2a | Lobbying nontaxable amount | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | |
| С | Total lobbying expenditures | | | | | |
| d | Grassroots nontaxable amount | | | | | |
| e | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f | Grassroots lobbying expenditures | | | | | |

| | filed Form 5768 (election under section 501(h)). | (a) | (b) |
|-------------------------------|---|-------------------|------------------|
| For each "Yes" r activity. | response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying | No | Amount |
| legislatio | ne year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or referendum, the use of | Yes | |
| a 'olunteers? | | | |
| | | | |
| b Paid stat | for management (include compensation in expenses reported on lines 1c through 1i)? | | J |
| c 1edıa advertıs | ements? | | |
| | <u> </u> | | |
| d 1aılıngs to me | mbers, legislators, or the public? | | |
| 1 | | | |
| e Publicati | ions, or published or broadcast statements? | | |
| f Grants to | o other organizations for lobbying purposes? | | |
| g Direct co | ontact with legislators, their staffs, government officials, or a legislative body? | | |
| h Rallies, o | demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | |
| i Other activitie | s? | | |
| | - | | |
| j otal Add line | s 1c through 1: | | |
| | | | |
| | activities in line 1 cause the organization to be not described in section 501(c)(3)? | | 4 |
| | enter the amount of any tax incurred under section 4912 enter the amount of any tax incurred by organization managers under section 4912 | | |
| • | ng organization incurred a section 4912 tax, did it file Form 4720 for this year? | | I |
| Part III-A | Complete if the organization is exempt under section 501(c)(4), section | 501(c)(5). | or section |
| | 501(c)(6). | | Yes No |
| 1 Were sub | ostantially all (90% or more) dues received nondeductible by members? | [| 1 Yes |
| 2 Did the o | organization make only in-house lobbying expenditures of \$2,000 or less? | | 2 No |
| 3 Did the o | organization agree to carry over lobbying and political expenditures from the prior year? | | 3 No |
| Part III-B | Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$ and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes." | | |
| 1 Dues, assessn | nents and similar amounts from members | | |
| 1 | | | |
| | 162(e) nondeductible lobbying and political expenditures (do not include amounts of political s for which the section 527(f) tax was paid). | | |
| a Current year | | | |
| 2a | | | |
| b Carryover from | last year | | |
| 2b | , (450, 754) | | |
| с | | | |
| otal 2c | | | |
| 3 Aggrega | te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | 3 | |
| loes the organ | sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess ization agree to carryover to the reasonable estimate of nondeductible lobbying and diture next year? | | |
| | | | |
| 4 | | | |
| 5 Taxable | amount of lobbying and political expenditures (see instructions) | 5 | |
| Part IV | Supplemental Information | | T. A. I. |
| | escriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated groctions), and Part II-B, line 1 Also, complete this part for any additional information | oup list), Part I | 1-A, lines 1 and |
| z (see msera | 1 | | |

DLN: 93493182001106

OMB No 1545-0047

SCHEDULE D

(Form 990)

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

Supplemental Financial Statements

Open to Public Inspection

| Internal Revenue Service | Information about Schedule D (Form 990) and its instructions is at <u>www.irs.gov/form990</u> . | | | | | | |
|---|---|-----------------|-----------------|--|--|--|--|
| Name of the organiz Michigan Electric Cooper | | Employer identi | fication number | | | | |

| sociation | oopeidave | | | 38-2 | 214287 |
|--------------------------|--|----------------------------|---|--------------|---------------------------------|
| | janizations Maintaining Dono nplete if the organization answer | | | unds o | or Accounts. |
| | | (a) Donor advised fur | nds | (b) | Funds and other accounts |
| Total nu | mber at end of year | | | | |
| A ggrega year) | te value of contributions to (during | | | | |
| A ggrega | te value of grants from (during year) | | | | |
| A ggrega | te value at end of year | | | | |
| | anızatıon ınform all donors and donor he organızatıon's property, subject to | | | nor advis | sed Yes No |
| used only t | anization inform all grantees, donors, for charitable purposes and not for the impermissible private benefit? | | | | |
| rt III Coı | nservation Easements. Compl | ete ıf the organızatıo | n answered "Yes" (| on Forn | n 990, Part IV, line 7. |
| Presert Protect Presert | of conservation easements held by the vation of land for public use (e g , recression of natural habitat vation of open space and the organization of the corganization of the organization or the organization of the organization or the organizatio | eation or education) 「「 | Preservation of an Preservation of a | certified | I historic structure |
| easement | on the last day of the tax year | | | | |
| Total numb | per of conservation easements | | | 2a | Held at the End of the Year |
| | age restricted by conservation easem | ents | | 2b | |
| | conservation easements on a certified | | ıded ın (a) | 2c | |
| | conservation easements included in (ructure listed in the National Register | c) acquired after 8/17/0 | 6, and not on a | 2d | |
| | conservation easements modified, tra | nsferred, released, exti | nguished, or terminat | ed by th | e organization during the |
| Number of | states where property subject to cons | ervation easement is lo | cated ► | | |
| | rganization have a written policy rega and enforcement of the conservation | | oring, inspection, han | ıdlıng of | ┌ Yes ┌ No |
| Staff and v year ▶ | olunteer hours devoted to monitoring, | inspecting, handling of | violations, and enforc | ing cons | servation easements during the |
| A mount of ► \$ | expenses incurred in monitoring, insp | ecting, handling of viola | tions, and enforcing c | onserva | ation easements during the year |
| | conservation easement reported on li section 170(h)(4)(B)(ii)? | ne 2(d) above satisfy th | e requirements of se | ction 17 | 0(h)(4) |
| balance sh | I, describe how the organization repore eet, and include, if applicable, the tex eation's accounting for conservation ea | t of the footnote to the o | | | |
| | janizations Maintaining Collection answer mplete if the organization answer | | | or Oth | ner Similar Assets. |
| works of ar | nization elected, as permitted under S t, historical treasures, or other simila ovide, in Part XIII, the text of the foot | r assets held for public | exhibition, education, | orresea | arch in furtherance of public |
| works of ar | nization elected, as permitted under S t, historical treasures, or other simila ovide the following amounts relating to | r assets held for public | | | |
| (i) Revenue | included on Form 990, Part VIII, line | 1 | | ► \$_ | |
| i) Assets ind | cluded in Form 990, Part X | | | ► \$ | |
| If the orga | nization received or held works of art, mounts required to be reported under: | | | | cial gain, provide the |
| Revenue in | icluded on Form 990, Part VIII, line 1 | | | | ▶ - \$ |

b Assets included in Form 990, Part X

| Part | Organiz (continued | ations Maintaining | Collections of A | Art, Hi | storica | l Tre | asures, | or Ot | her Similar | Assets | |
|------------|--------------------------------|---|----------------------|------------|--|----------|---------------|---------------|-----------------------|-----------------|----------------------------|
| 3 | | zation's acquisition, acce (check all that apply) | ession, and other re | cords, c | | | | | | ise of its | |
| а | Public exhibi | ition | | d | Г L | oan or | exchange | prograi | ms | | |
| b | ☐ Scholarly res | search | | е | Г о | ther | | | | | |
| С | ☐ Preservation | for future generations | | | | | | | | | |
| 4 | Provide a descrip Part XIII | otion of the organization's | s collections and ex | plaın ho | ow they fu | ırther 1 | the organız | atıon's | exempt purpos | se in | |
| 5 | During the year, o | did the organization solic | it or receive donati | ons of a | ırt, hıstor | ıcal tre | easures or | others | | | |
| | | to raise funds rather th | | as part | of the or | ganıza | tıon's colle | ction? | Гүе | es No |) |
| Par | | and Custodial Arra e if the organization a ne 21. | | n Form | 990, Pa | rt IV | , line 9, o | r repo | orted an amou | unt on Fo | rm 990, |
| 1a | Is the organization | on an agent, trustee, cus 990, Part X? | todian or other inte | rmediar | y for cont | ributio | ons or othe | rasset | ts not | es 🗸 No | • |
| b | If "Yes," expla | in the arrangement in Pa | art XIII and comple | te the fo | ollowing t | able | | | А | mount | |
| c | Beginning bala | nce | | | | | | 1c | | | |
| d | Addıtıons durır | ng the year | | | | | | 1d | | | |
| e | Distributions d | luring the year | | | | | | 1e | | | |
| f | Ending balance | e | | | | | | 1f | | | |
| 2a | Did the organizat | ion include an amount o | n Form 990, Part X, | line 21 | , for escr | ow or c | custodial a | ccount | liability? 🔽 \Upsilon | es ΓNo | • |
| b | | the arrangement in Part | | | | | | | | | r |
| Pal | t V Endowm | nent Funds. Comple | (a)Current year | | rior year | | TO FORM | | d)Three years back | _ | years back |
| | Beginning of yea | rbalance | (a)carrent year | (2) | nor year | 1 | zyrwo years i | Buck (| ayrinee years back | (C) Cur | y cars back |
| b | Contributions | | | | | | | | | | |
| c | Net investment e losses | earnings, gains, and | | | | | | | | | |
| d | Grants or schola | · | | | | | | | | | |
| е | Other expenditui | res for facilities | | | | | | | | | |
| f | A dministrative e | xpenses | | | | | | | | | |
| g | End of year balar | nce | | | | | | | | | |
| 2 | Provide the estim | nated percentage of the | current year end bal | lance (lı | ne 1g, co | lumn | (a)) held as | ; | | | |
| а | Board designated | d or quasi-endowment ► | | | | | | | | | |
| ь | Permanent endov | vment ► | | | | | | | | | |
| c | • | ricted endowment For on lines 2a, 2b, and 2c | should equal 100% | | | | | | | | |
| За | organization by | ment funds not in the pos | _ | | | held a | ınd admınıs | tered 1 | _ | Yes | s No |
| | | anizations | | | | • | | | <u> </u> | 3a(i) Ba(ii) | + |
| b | | ızatıons , are the related organızı | | | | | | | | 3b | |
| 4 | | XIII the intended uses o | | | | | | | <u>-</u> | | |
| Par | | uildings, and Equip | | | | | | | | _ | _ |
| | | e if the organization a | inswered 'Yes' to | | 990, Par (a) Cost or oth (investm | er basıs | (b |) her bası | Accumulat | ed (d) B | O. Jook value |
| 1a | _and | | | | , . 2001 | | (23) | , | | | |
| b i | Buildings | | | | | | | | 1 | | |
| c 1 | _easehold improve | ements | | . | | | | | | | |
| d I | Equipment | | | . [| | | | 116,464 | 96 | 5,561 | 19,903 |
| | | | | | | | | | | | |
| Total | I. Add lines 1a thro | ough 1e <i>(Column (d) mus</i> | t equal Form 990, Pa | rt X, colu | umn (B), I | ine 10 | (c).) | | | | 19,903 990) 2015 |

| Part VII Investments—Other Securities. See Form 990, Part X, line 12. | Complete if the organ | ization answered 'Ye | s' on Form 990, Part IV, line 11b. |
|---|-----------------------|-------------------------------------|---|
| (a) Description of security or categ (including name of security) | ory | (b)Book value | (c)Method of valuation Cost or end-of-year market value |
| (1)Financial derivatives | | | |
| (2)Closely-held equity interests (3)Other | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| |) - | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12 Part VIII Investments—Program Related |) | | |
| Complete if the organization answe | red 'Yes' on Form 990 |), Part IV, line 11c. _{Se} | |
| (a) Description of investment | | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organiz | | Form 990. Part IV. line | 11d See Form 990. Part X. line 15 |
| | escription | | (b) Book value |
| | | | |
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| Total. (Column (b) must equal Form 990, Part X, col.(B) In | ne 15.) | | |
| Part X Other Liabilities. Complete if the o | | l 'Yes' on Form 990, | Part IV, line 11e or 11f. |
| See Form 990, Part X, line 25. 1. (a) Description of liability | (b) Book value | | |
| Faderal income toyee | | | |
| Federal Income taxes | | | |
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| Par | t XI Reconciliation of Revenue per Audited Financial Statements With Revenue | per Re | turn |
|-----|---|--------|-----------|
| | Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. | | |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 3,227,895 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| а | 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)..............2d | | |
| e | Add lines 2a through 2d | 2e | 0 |
| 3 | Subtract line 2e from line 1 | 3 | 3,227,895 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b . 4a | | |
| b | Other (Describe in Part XIII) | | |
| c | Add lines 4a and 4b | 4c | -15,756 |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | 5 | 3,212,139 |
| Par | Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. | s per | Return. |
| 1 | Total expenses and losses per audited financial statements | 1 | 3,224,651 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| а | Donated services and use of facilities 2a | | |
| b | Prior year adjustments | | |
| c | Other losses | | |
| d | Other (Describe in Part XIII) | | |
| e | Add lines 2a through 2d | 2e | 15,756 |
| 3 | Subtract line 2e from line 1 | 3 | 3,208,895 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b 4a | | |
| b | Other (Describe in Part XIII) | | |
| C | Add lines 4a and 4b | 4c | 0 |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) | 5 | 3,208,895 |

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 | The Association acts as the custodian for funds of members for the purpose of facilitating transactions at the discretion of those members in the amount of \$708,709 for the year ending December 31, 2015. The Association entered into an agreement to act as the billing agent on behalf of members with respect to the Energy Optimization program mandated by Michigan Public Act 295 of 2008. The Association acts strictly in an agency capacity and therefore no revenue or expense is reflected in the financial statements under this program. |
| Part X, Line 2 | A tax-exempt status was granted to the Association by the Internal Revenue Service in 1978 However, under current tax laws, the Association is liable for federal and state income taxes on advertising and other business income unrelated to its exempt status. The Association has net operating losses related to business income unrelated to its exempt purpose. These net operating losses expire from 2018 through 2034. As of December 31, 2015 and 2014, the unrecognized tax benefit accrual was zero. The Association will recognize future accrued interest and penalties related to unrecognized tax benefits in income tax expense if incurred. |
| Part XI, Line 4b - Other Adjustments | Loss on Disposal of Equipment Recorded in Expense on F/S -15,756 |
| Part XII, Line 2d - Other Adjustments | Loss on Disposal of Equipment Recorded in Revenue on 990 15,756 |
| | |

| Part XIII Supplemental Info | ormation (continued) |
|-----------------------------|----------------------|
| Return Reference | Explanation |
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Schedule D (Form 990) 2015

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DLN: 93493182001106

OMB No 1545-0047

Schedule J (Form 990)

Compensation Information

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

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

Open to Public

2015

Department of the Treasury Internal Revenue Service

Name of the organization Michigan Electric Cooperative

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

Inspection **Employer identification number**

| Ass | Association 38-2214287 | | | | | |
|-----|---|-----------|--|----|-----|----|
| Pa | rt I Questions Regarding Compensatio | 'n | <u> </u> | | | |
| | | | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II | | | | | |
| | First-class or charter travel | Г | Housing allowance or residence for personal use | | | |
| | Travel for companions | Γ | Payments for business use of personal residence | | | |
| | Tax idemnification and gross-up payments | Γ | Health or social club dues or initiation fees | | | |
| | Discretionary spending account | Г | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d | | | 1b | | |
| 2 | Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe | | | 2 | | |
| 3 | Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compen | that appl | | | | |
| | Compensation committee | Γ | Written employment contract | | | |
| | ☐ Independent compensation consultant | Γ | Compensation survey or study | | | |
| | Form 990 of other organizations | Г | Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed on Form 990 or a related organization | , Part VI | II, Section A, line 1a with respect to the filing organization | | | |
| а | Receive a severance payment or change-of-control | l paymer | nt? | 4a | | Νo |
| b | Participate in, or receive payment from, a suppleme | ental nor | nqualified retirement plan? | 4b | | No |
| C | Participate in, or receive payment from, an equity-b | based co | ompensation arrangement? | 4c | | Νo |
| | If "Yes" to any of lines 4a-c, list the persons and p | rovide th | he applicable amounts for each item in Part III | | | İ |
| | Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza | | - | | | |
| 5 | For persons listed on Form 990, Part VII, Section A compensation contingent on the revenues of | A, line 1 | a, did the organization pay or accrue any | | | |
| а | The organization? | | | 5a | | |
| b | Any related organization? | | | 5b | | |
| | If "Yes," on line 5a or 5b, describe in Part III | | | | | |
| 6 | For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of | A, line 1 | a, did the organization pay or accrue any | | | |
| а | The organization? | | | 6a | | |
| b | Any related organization? | | | 6b | | |
| | If "Yes," on line 6a or 6b, describe in Part III | | | | | |
| 7 | For persons listed on Form 990, Part VII, Section Appayments not described in lines 5 and 6? If "Yes," | | | 7 | | |
| В | Were any amounts reported on Form 990, Part VII, subject to the initial contract exception described in Part III | | accured pursuant to a contract that was ations section 53 4958-4(a)(3)? If "Yes," describe | 8 | | |
| 9 | If "Yes" on line 8, did the organization also follow the section 53 4958-6(c)? | he rebut | table presumption procedure described in Regulations | 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 on 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 | SC compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation in column(B) reported as deferred on prior Form 990 | |
|--|------|--------------------------|---|---|--------------------------------|----------------|----------------------|---|--|
| | | Base (i) compensation | (ii) Bonus & Incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(ı)-(D) | | |
| Art Thayer Director of Energy Efficie | (i) | 125,948 | 0 | 1,622 | 31,505 | 22,406 | 181,481 | 0 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 2 Doug Snitgen Executive Vice President | (i) | 117,442 | 0 | 213 | 22,120 | 14,986 | 154,761 | 0 | |
| | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 3 Jerrold McElroy Director of Safety & Loss | (i) | 108,976 | 0 | 644 | 19,593 | 21,896 | 151,109 | 0 | |
| · | (ii) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |

Schedule J (Form 990) 2015

Part IIII Supplemental Information

Return Reference

Return Reference

The services of the President/CEO are provided to the Association under a management services agreement with Wolverine Power Cooperative, one of its member cooperatives. The filing organization relies on Wolverine Power Cooperative to determine the compensation for the President/CEO. They use a compensation committee, the written employment contract, compensation survey and approval by the board or compensation committee to determine his compensation.

Schedule J, Part II, Column C, Deferred Compensation

The estimated current year increase in the actuarial value of the defined benefit plan is included in other compensation for employees listed in Part II of Schedule J. These amounts do not represent any current year contributions to the plan. They are estimates of the increase in the actuarial value of the plans received from the NRECA. The current year expense and the increase in actuarial value for each employee are reflected in the statement on the

Schedule O for Form 990, Part VII, Column F

Schedule J (Form 990) 2015

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OMB No 1545-0047

2015

Open to Public Inspection

SCHEDULE O Supp

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ 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
Michigan Electric Cooperative
Association

Behavior identification number

38-2214287

| Return Reference | Explanation |
|---|--|
| Form 990, Part VI, Section A, line 1 | The Executive Committee consists of the Chairman, Vice-Chairman, and Secretary-Treasurer of the Association Although the Bylaws give the authority to the Executive Committee to act on behalf of the full governing Board during intervals between the meetings of the Board, the Executive Committee currently is only providing recommendations to the full Board |

| Return Reference | Explanation |
|--------------------------------------|--|
| Form 990, Part VI, Section A, line 2 | Kımberly Molitor, Eric Baker and Craig Borr have a business relationship |

| Return Reference | Explanation |
|--|--|
| Form 990, Part VI, Section A, line 3 | The services of the President/CEO are provided to the Association under a management services agreement with Wolverine Power Supply Cooperative, Inc, one of its member cooperatives. This annual management services agreement outlines the responsibilities and duties of the President/CEO, as well as the proposed costs for his services to the Association. The President/CEO's compensation is included in the management services figure to Wolverine Power Supply Cooperative, Inc. listed in Part VII, Section B |

| Return Reference | Explanation |
|---|--|
| Form 990, Part VI, Section A, Iine 4 | The bylaws were amended for the following significant changes 1) Updated the activities the organization does for its members * represents cooperatives in legislative and regulatory matters, * acts as a unified voice for Michigan electric cooperatives * promotes and provides safety programs, * assists cooperatives in implementing EO programs, * coordinates education and training, and * engages in other activities for the benefit of Michigan electric cooperatives 2) Eliminated the need for 2/3 Board vote for member admissions 3) Reduces number of member "voting delegates" at member meetings from 2 delegates to 1 delegate per member 4) Each delegate member now only has one voting member with one vote 5) Members can now designate, versus elect, their director to represent them 6) Required CCD credentialing for all directors within one year of designation 7) Provided for vacancies to be filled by the affected member 8) Provided for removal of Directors by the Board for violating duties to the organization or other proper reason 9) Eliminated "first and "second" Vice Chairman for just one Vice Chairman, with no member having more than one officer serving at the same time |

| | Return Reference | Explanation |
|---|--------------------------------------|--|
| I | Form 990, Part VI, Section A, line 6 | The organization has members of which each member has one voting right |

| Return Reference | Explanation |
|--|---|
| Form 990, Part VI, Section A, line 7a | Each corporate member shall be entitled to two representatives on the Board of Directors. Such representatives shall be nominated by the board of the corporate member, subject to election by a majority of the votes cast at the annual meeting of the members. |

| Return Reference | Explanation |
|--|---|
| Form 990, Part VI, Section A, line 7b | At all meetings of the members at which a quorum is present, all questions shall be decided by a vote of a majority of the members delegates voting thereon except as otherwise provided by law, the articles of incorporation or the bylaws. Each member shall be entitled to only two votes upon each matter submitted to a vote at a meeting of the members. |

| Return Reference | Explanation |
|---------------------------------------|---|
| Form 990, Part VI, Section A, line 8b | There are no committees that can act of behalf of the board |

| Return Reference | Explanation |
|--|---|
| Form 990, Part VI, Section B, line 11 | The 990 is received and reviewed for accuracy by the Executive Vice President, Reporting Agent and President/CEO Upon approval, it is provided to the entire Board of Directors for its review and discussion, as needed, at a regularly scheduled meeting. After any concerns presented by the Board of Directors are addressed, the President/CEO signs and files the return. |

| Return Reference | Explanation |
|---|--|
| Form 990, Part VI, Section B, line 12c | The conflict of interest policy is reviewed annually. All directors are required to disclose any conflicts of interest and to notify the Board of any conflicts that may arise throughout the year. The Board will then determine if a conflict does exist and how to proceed. |

| Return Reference | Explanation |
|---|--|
| Form 990, Part VI, Section B, line 15 | The services of the President/CEO are provided to the Association under a management services agreement with one of its member cooperatives. This management services agreement outlines the responsibilities and duties of the President/CEO as well as the proposed costs for his services to the Association for the contract term. The current management services contract was approved by the Association's Board of Directors in June 2015 and runs for a two-year period. As the President/CEO is an employee of one of the association's member cooperatives, salary and related compensation is annually reported on the Form 990 of that member cooperative. The annual salary of the President/CEO is set by the member cooperative based upon survey information provided by the National Rural Electric Cooperative Association (NRECA) for similar association positions throughout the country |

| Return Reference | Explanation |
|---------------------------------------|---|
| Form 990, Part VI, Section C, line 19 | The governing documents, conflict of interest policy, and financial statements are available upon request |

| Return Reference | Explanation |
|---|--|
| Form 990, Part VII, Section A, Column (F) | Included in column "f", estimated amount of other compensation, is the estimated annual increase in the actuarial value of the defined benefit plan. The estimated increase for Art Thayer, Doug Snitgen, Jerrold Mc⊟roy, and Casey Clark were \$28,356, \$19,184, \$16,882, and \$6,028 respectively. This amount is an estimate in the increase of the value of the plan and is not a current year expense of the cooperative. The current year expense for this defined benefit plan was \$20,947 for Art Thayer, \$19,395 for Doug Snitgen, \$17,930 for Jerrold Mc⊟roy, and \$17,585 for Casey Clark. |

| Return Reference | Explanation |
|-----------------------------|--|
| Form 990, Part IX, line 11g | Outside Contractor - General 385,094 Outside Contractor - LC&S 19,540 Outside Contractor - Country Lines 241,200 Outside Contractor - EO 3,481 |