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Department of the Treasury Internal Revenue Service

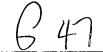
EXTENDED TO NOVEMBER 15, 2016

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A F	or the :	2015 calendar year, or tax year beginning and	ending						
BC	neck if	C Name of organization		D Employer identi	fication number				
	Address change	VALLEY ELECTRIC ASSOCIATION, INC.			_				
]Name change	Doing business as		88-	0089964				
	initial return Final		Room/suite	E Telephone numb					
Ц	termin-	P.O. BOX 237							
_	aled Amendo	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	73,622,859.				
\vdash	Jreturn	PARKUMP, NV 69041	***	H(a) is this a group					
<u></u>	Applica- tion pending			for subordinate					
	SAME AS C ABOVE								
1 7	ax-exer	mpt status 501(c)(3) 501(c)(12) ◀ (insert no.) 4947(a)(1) o	or 527		a list (see instructions)				
		E: ► WWW.VEA.COOP		H(c) Group exempt					
K F	orm of c	organization: X Corporation Trust Association Other	L Year	of formation: 1965	M State of legal domicile: NV				
Pa	rt I	Summary							
	1 E	Briefly describe the organization's mission or most significant activities: ${ m TO}$ P	ROVIDE	QUALITY A	ND RELIABLE				
Governance		ELECTRIC SERVICE TO MEMBERS OF THE COOPE							
E		Check this box 🕨 🔲 if the organization discontinued its operations or dispos			assets.				
Š		Number of voting members of the governing body (Part VI, line 1a)			3 6				
ဒိ	i i	Number of independent voting members of the governing body (Part VI, line 1b)		· · · · -	6				
Activities &		Total number of individuals employed in calendar year 2015 (Part V, line 2a)		·· · · · ⊢	127				
Ë	-			·· ·· · · · · · · · · · · · · · · · ·	6 0				
3		Total number of volunteers (estimate if necessary)		·· · · · · · ·	a 15,925.				
Ac		Total unrelated business revenue from Part VIII, column (C), line 12) -	4				
	ь	Net unrelated business taxable income from Form 990-T, line 34							
	i		ļ	Prior Year	Current Year				
힏	8 (Contributions and grants (Part VIII, line 1h)	· ·	0					
Revenue	9 F	Program service revenue (Part VIII, line 2g)	·	69,949,412					
ě	10 I	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		24,479					
Œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		125,688					
	12 1	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		70,099,579					
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		70,763	74,950.				
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)		4,572,472	2,271,903.				
()		Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,914,207	7,227,267.				
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0	0.				
	L.	Total fundraising expenses (Part IX, column (D), line 25)	0.						
Ã	17	Other expenses (Part IX, column (A), lines Ta, prop (2)		58,542,137	. 63,684,815.				
	18	Total expenses. Add lines 13-17 (must equal Patt-IX column (A), line 200		70,099,579					
	19 8	Revenue less expenses. Subtract line 18 from line 12			<211,487.>				
- Si	<u> </u>	NOV 2 2 ZUTO		eginning of Current Ye					
1 Assets or 1 Balances	·			334,468,173					
88	20	Total assets (Part X, line 16)		292,211,924					
聖	21 7	Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20.		42,256,249					
			<u>-</u>	44,450,443	9. 43,221,203.				
_	art II	Signature Block							
		lties of perjury, I declare that I have examined this return, including accompanying schedule			r my knowledge and belief, it is				
true,	, correct	i, and complete. Declaration of preparer (other than officer) is based on all information of w	hich prepare						
	1	Stagel William			7/16				
Sig	n	Signature of officer		Date	•				
Her	e	DANIEL TILLMAN, CFO							
		Type or print name and title							
	Ţ	Print/Type preparer's name Preparer's signature	6	Date Check	X PTIN				
Paid	1	MATT R. WILLIS MATT R. WILLIS		11/16/16 sessen					
Pres	parer [Firm's name BOLINGER, SEGARS, GILBERT AND M	OSS L	LP Firm's EIN	<u>75-0882037</u>				
Use	Only	Firm's address 8215 NASHVILLE AVENUE							
LUBBOCK, TX 79423 Phone no. (806)747-3806									
May	the IR	S discuss this return with the preparer shown above? (see instructions)		4	X Yes No				
	01 12-16		ions.		Form 990 (2015)				



<u>Form</u>	990 (2015) VALLEY ELECTRIC ASSOCIATION, INC.	88-0089964	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		_
	THE COOPERATIVE'S RESPONSIBILITY AND AIM IS TO PROVIDE		<u>D</u>
	INNOVATIVE CUSTOMER SERVICE AS REFLECTED IN TOP QUALITY	<u> ELECTRIC</u>	
	SERVICE RELIABILITY, AFFORDABLE RATES, EMPLOYEE TEAMWOR	RK AND THE	
	HIGHEST DEGREE OF INTEGRITY IN ALL COOPERATIVE ENDEAVOR		
	Did the organization undertake any significant program services during the year which were not listed on		
_2		[]	(TE)
	the prior Form 990 or 990-EZ?	LYes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	? Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	·	a magazrad by avpapas	
4	Describe the organization's program service accomplishments for each of its three largest program services, a		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ners, the total expenses, a	and
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$) (Reve	anue \$)
	PROVIDING ELECTRIC ENERGY TO OUR MEMBERS - 21,290 ACTIV		т
	YEAR END WERE PROVIDED ELECTRICITY ON A COOPERATIVE BAS	515 THROUGH T	пе
	ALLOCATION OF PATRONAGE CAPITAL.	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·		
			
4b	(Code) (Expenses \$) (Reve	enue \$)
		-	
			-
			
4-			
4c	(Code) (Expenses \$ including grants of \$) (Rev	enue \$,
			
			· · · · · ·
			
		-	
4d	Other program services (Describe in Schedule O.)		
40		`	
	(Expenses \$ including grants of \$) (Revenue \$		
4e	Total program service expenses		

Form **990** (2015)

Form 990 (2015) VALLEY ELECTRIC ASSOCIATION, INC. 88-0089964 Part IV Checklist of Required Schedules

Par	t 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		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2		<u>X</u>
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_	<u>X</u>	
.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	N/	<u>A</u>
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_		_X_
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		X
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		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
	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		X_
	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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	1
	Part VI	11a	<u>X</u>	
	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		.
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
	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		x
	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	110		<u> </u>
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	-1.0		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	x	
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		<u>x</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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		X
	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		X
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	17	<u> </u>	X
	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		X
	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	000	<u>X</u>
		Form	33U	(2015)

Form 990 (2015) VALLEY ELECTRIC ASSOCIATION, INC.

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	_X_	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		ļ	
_	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		į	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
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		ĺ	
	Schedule K. If "No", go to line 25a	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	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	N/	<u>A</u>
þ	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	N/	<u>A</u>
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		<u>X</u>
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			77
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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)			v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		v
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		<u>X</u>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30_		
31	If "Ven " complete School Io N. Port I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ļ <u>.</u>		
	Schedule N, Part II	32		X
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	Х	
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	3 <u>5</u> a	X	
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		<u>x</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	N/	<u>A</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
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	X	<u> </u>
		Form	99U	(2015)

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	<u> </u>	<u> </u>	age o
	Check if Schedule O contains a response or note to any line in this Part V			
	•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	· · · · ·		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming]		
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return . 2a 127]		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		[
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<u> </u>
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	X	
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		X
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).			
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ļ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_5c		
ба	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		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	66		
7	Organizations that may receive deductible contributions under section 170(c). N/A	6b		
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
_	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			<u> </u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A	}		
	sponsoring organization have excess business holdings at any time during the year?	8_	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		ļ
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b	ļ	
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a 59132400.			
a		┨		
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.	.56	†	
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	L	<u>L</u> _	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

VALLEY ELECTRIC ASSOCIATION, INC. Form 990 (2015) 88-0089964 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 6 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 6 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? Each committee with authority to act on behalf of the governing body? X **8**b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X 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 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b 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 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 19 statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: 20

89048

RICK ECKERT - (775) 727-5312 800 E. HWY 372, PAHRUMP, NV (4)

/E\

Form 990 (2015) VALLEY ELECTRIC ASSOCIATION, INC. 88-0 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

 \mathbf{x}

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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."

(D)

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

 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.

10

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(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person		rson	son is both an		compensation	compensation	amount of
	week				10010	174145	100)	from	from related	other
	(list any hours for	藍						the	organizations (W-2/1099-MISC)	compensation from the
	related	60.0	<u>ş</u>			sated	}	organization (W-2/1099-MISC)	(VV-2/1099-IVII3C)	organization
	organizations	Tuste	喜	l	9	mpeu	ľ	(***2/1033*****100)		and related
	below	Individual trustee or director	institutional trustee	_	쥝	stco	=			organizations
	line)	Į.	ast	Officer	Кеу етрюуее	Highest compensated employee	Former			3 · -
(1) JOHN MAURER	14.60									
PRESIDENT	1.00	X		X			<u> </u>	14,500.	0.	0.
(2) RICK JOHNSON	8.50									
VICE PRESIDENT	1.00	X	<u> </u>	X	<u> </u>			14,500.	0.	0.
(3) PETE GAZSY	10.10			ļ		ļ				
TREASURER	1.00	X	_	X			L	14,500.	0.	0.
(4) DAVID DAWSON	10.70				ļ		ŀ			
SECRETARY	1.00	X	<u> </u>	X		ļ	_	14,500.	0.	0.
(5) SHIELA RAU	6.20					İ		4.4		
ASSISTANT SECRETARY	1.00	X		X	<u> </u>		<u> </u>	14,500.	0.	0.
(6) DAVE LOWE	9.50									
DIRECTOR (1/2015 - 5/2015)	1.00	X	<u> </u>	_	-	<u> </u>	_	5,500.	0.	0.
(7) KEN DERSCHAN	6.20	↓			ļ			5 000		
DIRECTOR (8/2015 - 12/2015)	1.00	X	_	┢	-			6,000.	0.	0.
(8) TOM HUSTED	60.00	ł	l			1		265 245	0	150 660
CEO	1.00	ļ		X	ļ	ļ	L	367,845.	0.	159,662.
(9) RICK ECKERT	60.00	ł	Ì			}		060 055	0	261 562
<u>coo</u>	1.00	ļ-	-	X	-	-		260,875.	0.	261,569.
(10) DANIEL TILLMAN	60.00	1		,,	ļ			70 600		0 274
EVP FINANCE	60.00	├		X	-	-	-	70,608.	0.	9,374.
(11) WINTSON G LOW	60.00	-		7.	i.		1	00.555	0.	24 462
EVP FINANCE	60.00	├	-	X	\vdash	-		90,666.		34,463.
(12) PHILIP R LEIBER	60.00	{		x		ļ		4,134.	0.	0.
EVP FINANCE	50.00	-	├	^	-	├	├	4,134.		<u> </u>
(13) CHRISTOPHER TOMCHUK	30.00	1		1	x		1	222,761.	0.	86,921.
EVP ENGINEERING & OPERATING	60.00	├	-	├-	^	╁		222,701.		00,921.
(14) CHRIS BROOKS	80.00	{			X			277,604.	0.	31,444.
EVP ENERGY SERVICES	60.00	├─	-	-	^	-	├	2//,004.		71,333.
(15) BART THURGOOD	80.00	}			\mathbf{x}			184,194.	0.	43,000.
EVP HUMAN RESOURCES	50.00	╁─	-	-	^	├	┝	104,194.		43,000.
(16) CURT LEDFORD	30.00	1				X		142,604.	0.	31,107.
EMPLOYEE - CORPORATE COUNS (17) DANIEL ROGERS	49.00	\vdash	\vdash	+-	\vdash		╁	132,004.	.	<u> </u>
• •	49.00	{		1	1	x	1	150,157.	0.	72,802.
ARE FOREMAN						IA		100,101.		Form 990 (2015)

No line 1a? If "Yes," complete Schedule J for such individual 3 X For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

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
MARTIN HARRIS CONSTRUCTION	BUILDING	
3030 S HIGHLAND DR, LAS VEGAS, NV 89109	CONSTRUCTION	9,880,437.
LASKOWSKI CONSTRUCTION	SOLAR WATER HEATER	
PO BOX 6420, PAHRUMP, NV 89041	INSTALLATIONS	<u>950,667.</u>
MASS MEDIA, 3333E SERENE AVE STE 100,		
HENDERSON, NV 89074	MARKETING SERVICES	811,916.
PAR ELECTRICAL CONTRACTORS, INC.	ELECTRICAL LINE	
PO BOX 846234, DALLAS, TX 75824	CONSTRUCTION	774,456.
CASSIDY & ASSOCIATES		
733 10TH STREET, WASHINGTON , DC 20001	CONSULTING SERVICES	354,798.
2 Total number of independent contractors (including but not limited to those list	ed above) who received more than	
\$100,000 of compensation from the organization		

		Check if Schedule O contains	a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
इ इ	1 a	Federated campaigns	1a					012 011
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
	С		1c					-
	d	. =	1d					
	е							
	f	All other contributions, gifts, grants, an						
		similar amounts not included above	11	Ţ		ļ.		
	g				,			
a S	_	Total. Add lines 1a-1f	·					1
				Business Code				
e .	2 a	ELECTRIC ENERGY SALES		221000	57,674,244,	57,674,244,		
ہ ∑ِ	b			221000	14,302,075.	14,302,075.		
Program Service Revenue	С	PATRONAGE DIVIDENDS		221000	1,071,356,	1.068.593.	2,763,	
E S	đ							
g E	е							
<u> </u>	f	All other program service revenue						
	g	Total. Add lines 2a-2f			73_047_675.			
	3	Investment income (including divid	lends, inter	est, and				
		other similar amounts)		▶	23,668,			23,668,
	4	Income from investment of tax-exe	mpt bond	proceeds >				<u> </u>
	5	Royalties	•	•				
			(i) Real	(ii) Personal				
	6 a	Gross rents	46.394	T				
	b	Less: rental expenses	0	T				
	С	Rental income or (loss)	46,394					
	d				48.762.	2,368.		46,394.
	7 a	· · · · · · · · · · · · · · · · · · ·	Securities	(II) Other				
		assets other than inventory		124,223,				
	b	Less. cost or other basis						
		and sales expenses		260,482.				
	С	Gain or (loss)		<136,259				
		Net gain or (loss)			<136,259.			<136,259,
d)		Gross income from fundraising eve	ents (not					3330, 3330
enne		including \$	of					
eve		contributions reported on line 1c).	— See	1				
Other Reve		Part IV, line 18	a					
the	b	Less: direct expenses	. t	,				
0	С	Net income or (loss) from fundraisi	ng events	>				
	9 a	Gross income from gaming activities	s. See					
		Part IV, line 19	. 8	· []				
	b	Less: direct expenses	Ł	,				Į
	С	Net income or (loss) from gaming a	ctivities	•				
	10 a	Gross sales of inventory, less retur	ns					
		and allowances	. a	225,476,				
	b	Less: cost of goods sold	t	314,929,				
		Net income or (loss) from sales of	nventory	>	<u><89.453.</u>	<102.532.	13 079.	
		Miscellaneous Revenue		Business Code				
	11 a	JOINT POLE RENTAL		221000	152,972,			152,972.
	b			517000	83,		83.	
- 1	С							
l	d	All other revenue						
	е	Total. Add lines 11a-11d		🕨	153,055,			
{	12	Total revenue. See instructions.		>	73 047 448.	72.944.748.	15 925	86,775.

Secu	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A).	X
Do	. Check if Schedule O contains a responder include amounts reported on lines 6b.	(A)	this Part IX (B)	(C)	
	8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	38,264.			
2	Grants and other assistance to domestic			1	
	individuals. See Part IV, line 22	36,686.	_		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1		ì	
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	2,271,903.			
5	Compensation of current officers, directors,				
	trustees, and key employees	2,189,120.			
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	2,374,971.			
8	Pension plan accruals and contributions (include	202 452			
	section 401(k) and 403(b) employer contributions)	892,473.			
9	Other employee benefits	1,454,791.	·		
10	Payroll taxes	315,912.			
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying .			 	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
40	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion Office expenses		 -	 	
13 14	Information technology				<u></u>
15	Royalties		·		
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses			 	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		· · · · · · · · · · · · · · · · · · ·		
20	Interest	11,535,443.			
 21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,618,535.			
23	Insurance				
24	Other expenses, Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				
а	PURCHASED POWER	24,240,153.			
b	TRANSMISSION EXPENSE	10,002,204.			
C	DISTRIBUTION EXPENSE	5,206,534.			
d	ADMIN. & GENERAL EXP	3,092,184.			
е	All other expenses	1,989,762.			
25	Total functional expenses. Add lines 1 through 24e	73,258,935.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined			i	
	educational campaign and fundraising solicitation.]	
	Check here If following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or note to any line in this Part X			
	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	3,400,779.	1	3,141,728.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		_3_	
	-4	Accounts receivable, net	6,450,660.	4	5,638,509.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		_5	
	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			
ets		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	2,772,395.	7	2,526,899.
•	8	Inventories for sale or use	2,691,811.	8	2,793,624.
	9	Prepaid expenses and deferred charges	42,067,153.	9	38,657,886.
	10a	Land, buildings, and equipment: cost or other			
	1	basis Complete Part VI of Schedule D 10a 357, 294, 035.	060 540 050		006 644 804
	l .	Less: accumulated depreciation 10b 70,682,244.	269,748,370.		286,611,791.
	11	Investments - publicly traded securities		_11	
	12	Investments - other securities. See Part IV, line 11	4 550 205	12	F 200 707
	13	Investments - program-related. See Part IV, line 11	4,758,307.	13	5,290,787.
	14	Intangible assets	2 570 600	14	2 706 006
	15	Other assets. See Part IV, line 11	2,578,698. 334,468,173.	15	2,706,996. 347,368,220.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	8,390,141.	16	9,157,994.
	17	Accounts payable and accrued expenses	0,390,141.	17	3,137,334.
	18 19	Grants payable Deferred revenue		18 19	······································
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ro.	22	Loans and other payables to current and former officers, directors, trustees,			
<u>ii</u>		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	277,588,969.	23	289,917,404.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	6,232,814.	25	5,071,613.
	26	Total liabilities. Add lines 17 through 25	292,211,924.	26	304,147,011.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	-		
es		complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets		27	
3ala	28	Temporarily restricted net assets		28	
Ē	29	Permanently restricted net assets .		29	
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here			
ō	Ì	and complete lines 30 through 34.]	
ets	30	Capital stock or trust principal, or current funds	172,290.	30	174,400.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	42,083,959.	32	43,046,809.
~	33	Total net assets or fund balances	42,256,249.	33	43,221,209.
	34_	Total liabilities and net assets/fund balances	334,468,173.	34	347,368,220. Form 990 (2015)

	990 (2015) VALLEY ELECTRIC ASSOCIATION, INC.	<u> 88-</u>	<u>0089</u>	<u>964</u>	Pag	_{le} 12
Pa	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
	·				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,04</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 25		
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>87.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	42	<u>, 25</u>	5,2	<u>49.</u>
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	1	<u>,17</u>	<u>5,4</u>	<u>47.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	ļ				
	column (B))	10	<u>43</u>	,22	1,2	<u>09.</u>
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u>-</u>			
					Yes	No
1	Accounting method used to prepare the Form 990: L Cash X Accrual Cther					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a				2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:				i	
	Separate basis Consolidated basis Both consolidated and separate basis					l
b	Were the organization's financial statements audited by an independent accountant?			2b	_X_	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,	,			ĺ
	consolidated basis, or both:					
	X 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	e audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?			_2c	——	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Au	dıt			
	Act and OMB Circular A-133?		•	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired au	tit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		(0015)
					uun	/004E\

SCHEDULE C (Form 990 or 990-EZ)

epartment of the Treasury

Department of the Treasury Internal Revenue Service

Name of organization

Part I-A

10-05-15

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 www.lrs.gov/form990.

2015

Open to Public Inspection

Employer identification number

88-0089964

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.

VALLEY ELECTRIC ASSOCIATION,

Section 527-organizations: Complete Part-I-A only. -- -

Section 501(c)(4), (5), or (6) organizations: Complete Part III

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-A. 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 II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

2	Provide a description of the organize Political expenditures Volunteer hours	zation's direct and indirect political	campaign activities in	Part IV. ▶\$	16,100.
Pa	rt I-B Complete if the org	ganization is exempt under	section 501(c)(3	<u> </u>	
1		incurred by the organization under		▶\$	
2	Enter the amount of any excise tax	incurred by organization managers	under section 4955	▶ \$	
		on 4955 tax, did it file Form 4720 for		•	Yes No
4a	Was a correction made?		•		Yes No
b	If "Yes," describe in Part IV				
Pa	rt I-C Complete if the or	ganization is exempt under	section $501(c)$,	except section 501(c	>)(3).
1	Enter the amount directly expende	d by the filing organization for section	on 527 exempt function	n activities >\$	
2	Enter the amount of the filing organ	nization's funds contributed to othe	r organizations for sec	tion 527	
	exempt function activities			▶\$	16,100.
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here and	on Form 1120-POL,		
	line 17b			▶\$	16,100.
4	Did the filing organization file Form	1120-POL for this year?			. X Yes . No
5	made payments. For each organization contributions received that were properties of the contributions are contributions.	mployer identification number (EIN) ation listed, enter the amount paid fi romptly and directly delivered to a sandditional space is needed, provide	rom the filing organiza eparate political organ	tion's funds Also enter the sization, such as a separat	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
	SEMBLY DEMOCRATIC				
	UCUS	89128	88-0205213	<u>3,000.</u>	0.
		PO BOX 401508 LAS			
CA	UCUS	VEGAS, NV 89140	88-0468266	3,000.	0.
CL.	ARK COUNTY	LAS VEGAS, NV			
	OMOCRATIC PARTY	89118	88-0457411	1,500.	0.
	MES OSCARSON FOR	PO BOX 1600			
<u>as</u>	SEMBLY	PAHRUMP , NV 8904	49-1563976	<u>2,500.</u>	0.
NΕ	VADA SENATE	LAS VEGAS, NV			
	MOCRATS	89118	88-0316606	3,000.	0.
	NATE REPUBLICAN	PO BOX 51211			
LE.	ADERSHIP CONFER	SPARKS, NV 89435	88-0468043	3,000.	0.
For	Paperwork Reduction Act Notice,	see the Instructions for Form 990		- · · · · · · · · · · · · · · · · · · ·	(Form 990 or 990-EZ) 2015
LHA		SEE PART IV F	OR CONTINUA	TION	

Schedule C (Form 990 or 990-EZ) 2015 Part II-A Complete if the org	VALLE'	Y ELEC	TRIC ASSOCI	ATION, INC.		0089964 Page 2
section 501(h)).	ailizatio) II IS GXGI	iipt uiider sectio	it 50 i(c)(s) and me	ore into the	siection under
	tion belong	ns to an affi	liated group (and list in	Part IV each affiliated	group member's nan	ne address FIN.
expenses, and shar		_	•	The state of the s	group mombor o na	10, 444,000, 2.14,
		, ,	nd "limited control" pro	visions anniv		
Limi	ts on Lobb	ying Expe	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ntures" m	eans amou	ints paid or incurred.		totals	
1a Total lobbying expenditures to influ	ience pub	lic opinion (grass roots lobbying)	-		
b Total lobbying expenditures to influ	uence a leg	gislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add li	nes 1a and	d 1b)		[
d Other exempt purpose expenditure	es					
e Total exempt purpose expenditure	s (add line	s 1c and 1c	d)			
f Lobbying nontaxable amount. Enter	er the amo	unt from the	e following table in bot	h columns.		
If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e			1
Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5		\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,			00 plus 5% of the exce			1
Over \$17,000,000		\$1,000.	000.			
g Grassroots nontaxable amount (er	ter 25% o	f line 1f)				
h Subtract line 1g from line 1a. If zer			•			
i Subtract line 1f from line 1c. If zero			•			
j If there is an amount other than ze			line 1, did the organiz	ation file Form 4720		<u> </u>
reporting section 4911 tax for this			,			Yes No
			eraging Period Under		of the five polyment	halam
(Some organizations t			ate instructions for li		or the live columns	below.
			nditures During 4-Ye	 	<u> </u>	
	LODI	bying Expe	Tiditures During 4- re	Averaging Period		T
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))						
(10070 of mile 24, column(c))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
(
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015 VALLEY ELECTRIC ASSOCIATION, INC. 88-0089964 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 Dung the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Makings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1: 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization mourred a section 4912 tax did the Form 4720 for this year? Part III-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR answered "Yes," 1 Dues, assessments and smillar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures from the prior year? 1 Dues, assessments and smillar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) Transfer amount of lobbying and political expenditures (see instructions) 5 Taxable amount of lobbying and po		(b)
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c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filling organization incurred a section 4912 tax, did if file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A instructions), and Part II-B, line 1. Also, complete this part for any additional information. PART I-A, LINE 1: CONTRIBUTIONS TO CANDIDATES RUNNING FOR STATE OFFICES WHO AF SUPPORTERS OF ELECTRIC COOPERATIVES.		
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PART I-A, LINE 1: CONTRIBUTIONS TO CANDIDATES RUNNING FOR STATE OFFICES WHO AF SUPPORTERS OF ELECTRIC COOPERATIVES.	, , , , , , , , , , , , , , , , , , ,	4110 2 (000
CONTRIBUTIONS TO CANDIDATES RUNNING FOR STATE OFFICES WHO ASSUPPORTERS OF ELECTRIC COOPERATIVES.		
SUPPORTERS OF ELECTRIC COOPERATIVES.		
	RE	
PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION		
PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION		
	ON:	
ASSEMBLY DEMOCRATIC CAUCUS		m 990 or 990-EZ)

Schedule C (Form 990 or 990-EZ) 2015 VALLEY ELECTRIC ASSOCIATION, INC. Part IV Supplemental Information (continued)	88-0089964	Page 4
2251 N RAMPART BLVD #341 LAS VEGAS, NV 89128		
CLARK COUNTY DEOMOCRATIC PARTY	7	
6233 DEAN MARTIN DR LAS VEGAS, NV 89118		
NEVADA SENATE DEMOCRATS		
6233 DEAN MARTIN DR LAS VEGAS, NV 89118	<u> </u>	
PART I-C CONTINUATION:		
PAHRUMP VALLEY REPUBLICAN WOMEN		
PO BOX 21 PAHRUMP , NV 89041		 -
EIN: 88-0295771 COL (D) AMOUNT: 100. COL (E) AMOUNT:	0.	
	·	
		
		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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.

► Attach to Form 990.

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

2015
Open to Public Inspection

Name of the organization

Employer identification number

VALLEY ELECTRIC ASSOCIATION, 88-0089964 INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. 2a Total number of conservation easements Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure 2d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		ELECTRIC A							<u>89964</u>	
Par	t III Organizations Maintaining C	collections of A	rt, Hist	orical Tre	easures, o	r Othe	<u>er Simil</u>	ar Asse	ts(continue	e <i>d</i>)
3	Using the organization's acquisition, accession	on, and other record	is, check	any of the	following that	are a s	ignificant	use of its	collection r	tems
	(check all that apply):									
а	Public exhibition	d	ı 🔲 i	_oan or excl	hange progra	ms				
b	Scholarly research	е	. 🖂	Other	_					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ev further th	ne organizatio	n's exe	mpt purp	ose ın Par	t XIII	
5	During the year, did the organization solicit o	·		-						
	to be sold to raise funds rather than to be ma								Yes	☐ No
Par	t IV Escrow and Custodial Arran					Yes" on	Form 99	0. Part IV.		
	reported an amount on Form 990, Par			organizatio	.,	100 0.		o, . a,		
12	is the organization an agent, trustee, custodi		diany for	contribution	s or other as	sets not	included			
14	on Form 990, Part X?	an or other intermet	Jiaiy ioi i	COMMIDATION	is of other as	3613 1101	moladea		Yes	☐ No
	•			Jahlar	•	•		. L	_ res	L NO
D	If "Yes," explain the arrangement in Part XIII	and complete the to	pilowing t	able:			Γ		A	
									Amount	
C	Beginning balance	•		•	•		1c			
	Additions during the year					•	1d			
е	Distributions during the year	-					1e			
f	Ending balance .						1f	L		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for 6	escrow or cu	ustodial acco	unt liabi	lity?	L	_ Yes	∐ No
	If "Yes," explain the arrangement in Part XIII									
Pai	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" on Fo	rm 990, Part	IV, line	10			
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance				<u> </u>				<u> </u>	
b	Contributions .				L				L	
С	Net investment earnings, gains, and losses		}							
d	Grants or scholarships									
е	Other expenditures for facilities				1					
	and programs		1							
f	Administrative expenses		† 							
g	End of year balance								1	
2	Provide the estimated percentage of the cur	rent year end halan	ce (line 1	a column (a	all held as:					
a	Board designated or quasi-endowment	Tone your one balan	0. 	9, 00.4 (a), Hold do					
a	Permanent endowment	%								
		% %								
С	Temporarily restricted endowment									
_	The percentages on lines 2a, 2b, and 2c sho	•								
3a	Are there endowment funds not in the posse	ession of the organia	zation the	at are neid a	ina aarministe	irea ior	ine organ	ization	<u></u>	· · · · ·
	by.									res No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
þ		-			•				3b	
4	Describe in Part XIII the intended uses of the		owment	funds.						
Pa	rt VI									
	Complete if the organization answere	d "Yes" on Form 99	0, Part I), Part X	, line 10.			
	Description of property	(a) Cost or	other		t or other		Accumula		(d) Book	value
		basis (invest	ment)	 	(other)	de	preciatio	n		
1a	Land			6,96	5,503.					,503.
ь	Buildings				4,686.	3,	476,2	257.	17,078	,429.
c	Leasehold improvements									
d	Equipment			314,51	9,721.	67.	205,9	87.2	47,313	,734.
e					4,125.				15,254	,125.
	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990. Par	t X. colui						36,611	

Schedule D (Form 990) 2015 VALLEY ELECT Part VIII Investments - Other Securities.	TRIC ASSOCI	ATION, INC.	88-	0089964	Page 3
Complete if the organization answered "Yes" of	on Form 000. Dort IV	ine 11h See Form 900 Bart V	lino 10		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio		if-vear market v	alue
(1) Financial derivatives	(b) Dook value	(o) Monios of Valuation	oost or one c	your marrier v	
(2) Closely held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11c. See Form 990, Part X	, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation	n. Cost or end-	of-year market v	/alue
(1)					
(2)					
(3)					
_(4)					
(5)					
(6)					
(7)					
(8)					
(9)			<u>.</u>	·	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11d See Form 990, Part X	, line 15.		
(a) (Description			(b) Book v	alue
(1)	· ·				
(2)	·				
(3)					
(4)					
(5)					
(6)				 _	
					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15)				
Part X Other Liabilities.			5		
Complete if the organization answered "Yes"	on Form 990, Part IV		Part X, line 25.		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes		600 607			
(2) CONSUMER DEPOSITS		608,687.			
(3) DEFERRED CREDIT - CONSUME		1 571 306			
(4) ADVANCES FOR LINE CONSTRU		1,571,326.			
(5) ACCUMULATED PROVISION FOR		2 901 600			
(6) POST-RETIREMENT HEALTH BE	NEFITS	2,891,600.			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

5,071,613.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

X

(8)

Sche	dule D (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION	[, I	NC.		0089964	Page 4
Par	•	nts W	ith Revenue per R	eturr	1.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			т т		
1	Total revenue, gains, and other support per audited financial statements			1	73,035	, <u>554.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ـ ا				
a b	Net unrealized gains (losses) on investments Donated services and use of facilities	2a 2b		1 1		
0	Recoveries of prior year grants	2c		1		
d	Other (Describe in Part XIII.)	2d	 :	1 1		
e	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	73,035	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	•	•			4
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1		
b	Other (Describe in Part XIII.)	4b	11,894.]		
c	Add lines 4a and 4b			4c		<u>,894.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	73,047	<u>,448.</u>
Pai	t XII Reconciliation of Expenses per Audited Financial Statement	ents V	With Expenses per	Retu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a					
1	Total expenses and losses per audited financial statements			1	70,975	<u>,138.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	ı	1			
a	Donated services and use of facilities	2a	 	-		
b	Prior year adjustments .	2b	 	4		
C	Other losses	2c	 	-		
d	Other (Describe in Part XIII.) Add lines 2a through 2d	<u>2</u> d		30		n
е 3	Subtract line 2e from line 1			2e	70,975	138
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			<u> </u>	10,515	, 150.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	2,283,797.		İ	
c	Add lines 4a and 4b			4c	2,283	,797.
_ 5_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u> </u>		5	73,258	,935.
Pa	rt XIII Supplemental Information.					
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	V, lines	s 1b and 2b; Part V, line	4; Parl	t X, line 2, Part	XI,
lines	2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional and 4b; and	tional ii	nformation.			
			 			
PAI	RT X, LINE 2:					
<i>-</i>	A ACCOUNTANTON IN A ADODMED MINE BYDICEDMATN MY	. 32 T	OGTATONA DI	- OTT	CTONC O	T.
.T.H.1	E ASSOCIATION HAS ADOPTED THE "UNCERTAIN TA	TV F	OSTITIONS PI	KOVI	STONS O	<u>r</u>
A C/	COUNTING PRINCIPLES GENERALLY ACCEPTED IN S	מנות	ותביים כיים ייונים	79 0	TGRMA R	CΣ
ACI	CONTING PRINCIPLES GENERALLI ACCEPTED IN .	<u> IIIE</u>	ONTIED SIRII	<u> </u>	r AMERI	CA.
יואיזי	PRIMARY TAX POSITION OF THE ASSOCIATION	rs t	TS FILING ST	וזידאיו	IS AS A	TAX
	- Indiana Indi				<u></u>	
EXI	EMPT ENTITY. THE ASSOCIATION DETERMINED THE	T.	T IS MORE L	IKEL	Y THAN	TOM
						
TH	AT THEIR TAX POSITION WILL BE SUSTAINED UPO	ON E	EXAMINATION I	BY T	HE INTE	RNAL
RE	VENUE SERVICE (IRS), OR OTHER STATE TAXING	LUA	HORITY AND	<u>rahı</u>	' ALL TA	X
BEI	NEFITS ARE LIKELY TO BE REALIZED UPON SETT	LEME	ENT WITH TAX	ING		
AU'	THORITIES.					
יגם	OM YT IIND AD _ OMUDD AD THOMADAMO.					
FA	RT XI, LINE 4B - OTHER ADJUSTMENTS:					
NO	NOPERATING REVENUE RECLASSED TO EXPENSE				11	,894.
53205 09-21	4			Sche	edule D (Form	

Schedule D (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION, INC. 8 Part XIII Supplemental Information (continued)	8-0089964	Page 5
•		
PART XII, LINE 4B - OTHER ADJUSTMENTS:		
PATRONAGE CAPITAL ASSIGNED	2,271,	903.
NONOPERATING REVENUE RECLASSED TO EXPENSE	11,	894.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	2,283,	797.
SCHEDULE D		
PART VIII		
THE AMOUNT OF INVESTMENTS - PROGRAM RELATED ON FORM 990, PAGE	11, PART	х,
LINE 13 DOES NOT EQUAL OR EXCEED 5 PERCENT OF THE TOTAL ASSET	S ON FORM	
990, PAGE 11, PART X, LINE 16, COLUMN B. CONSEQUENTLY IN ACCO	RDANCE WIT	гн
IRS INSTRUCTIONS SCHEDULE D, PART VIII HAS BEEN LEFT BLANK		
PART IX		
THE AMOUNT OF OTHER ASSETS ON FORM 990, PAGE 11, PART X, LINE	15 DOES 1	TON
EQUAL OR EXCEED 5 PERCENT OF THE TOTAL ASSETS ON FORM 990, PA	GE 11, PAI	RT
X, LINE 16, COLUMN B. CONSEQUENTLY IN ACCORDANCE WITH IRS INS	TRUCTIONS	
SCHEDULE D, PART IX HAS BEEN LEFT BLANK.		
,		
	- 	

Employer identification number å 88-0089964 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant INC. (c) IRC section if applicable VALLEY ELECTRIC ASSOCIATION, General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government PIONEER TERRITORY CASA Name of the organization Department of the Treasury Internal Revenue Service **SCHEDULE 1** (Form 990) Part Part

Schedule 1 (Form 990) (2015) CONATION ö 6,500 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) Enter total number of other organizations listed in the line 1 table 27-3404125 1321 S HIGHWAY 160 STE 9 PAHRUMP, NV 89048

532 101 10-28-15

Page 2 Schedule I (Form 990) (2015) (f) Description of non-cash assistance 88-0089964 (e) Method of valuation (book, FMV, appraisal, other) ASKED THE FOLLOWING: A) WHAT ARE THE UNUSUAL CIRCUMSTANCES THAT REQUIRE YOU APPLICANTS WILL BE TO SEEK ASSISTANCE? B) IF YOU RECEIVE ASSISTANCE, WILL YOU BE ABLE TO KEEP CURRENT ON FUTURE UTILITY BILLS? C) DO YOU LIVE IN ANY FORM OF SUBSIDIZED Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. COOPERATIVE? E) HAVE YOU APPLIED FOR ASSISTANCE FROM ANY OTHER STATE OR HOUSING? D) HAVE YOU ENTERED INTO A BILL PAYMENT ARRANGEMENT WITH THE FEDERAL LOW INCOME ENERGY ASSISTANCE PROGRAM BEFORE APPLYING HERE? INDIVIDUALS SEEKING ASSISTANCE WITH ELECTRIC BILLS MUST SUBMIT AN (d) Amount of non-cash assistance o. ö APPLICATION FORM TO THEIR LOCAL SOCIAL SERVICE AGENCY. INC. 28,686 8,000 (c) Amount of cash grant VALLEY ELECTRIC ASSOCIATION, 250 (b) Number of recipients TO ASSIST INDIVIDUALS IN NEED WITH THEIR ELECTRIC SECONDARY EDUCATION SCHOLARSHIPS FOR COOPERATIVE (a) Type of grant or assistance MEMBERS AND/OR THEIR DEPENDENTS Schedule I (Form 990) (2015) PART I, LINE 2 Part III

532102 10-28-15

Schedule I (Form 990) VALLEY ELECTRIC ASSOCIATION, INC. Part IV Supplemental Information	88-0089964 Page 2
FUNDS MAY BE USED TO PAY PAST DUE BILL OR RESTORE SERVICE	IF SERVICE WAS
TERMINATED. FUNDS MAY NOT BE USED FOR DEPOSITS, RETURNED	CHECK FEES,
DAMAGE CHARGES, ENERGY THEFT CHARGES, FINAL BILLS OR IRRIG	ATION AND GENERAL
SERVICE ACCOUNTS.	
FROM 990, SCHEDULE I, PART IV	
TWO FULL-TIME ACADEMIC, TWO FULL-TIME VOCATIONAL, AND TWO	PART-TIME
CONTINUING EDUCATION SCHOLARSHIPS WILL BE AWARDED ANNUALLY	TO ASSIST
QUALIFIED INDIVIDUALS IN FURTHERING THEIR EDUCATION. TO E	BE ELIGIBLE A
CANDIDATE OR CANDIDATE'S PARENTS OR LEGAL GUARDIAN MUST BE	E AN ACTIVE
MEMBER OF VALLEY ELECTRIC ASSOCIATION. APPLICANT MUST ENG	ROLL OR BE
ENROLLED AT AN ACCREDITED EDUCATIONAL OR TRAINING INSTITUT	CION.
SCHOLARSHIPS WILL BE AWARDED BY THE VOLUNTEER SCHOLARSHIP	COMMITTEE AND
WILL BE BASED ON GRADE POINT AVERAGE, SCHOOL/COMMUNITY INV	OLVEMENT,
SUBMITTED 500 WORD ESSAY AND OTHER MISCELLANEOUS CRITERIA.	FOR MORE
INFORMATION REGARDING THE SCHOLARSHIPS VISIT WWW.VEA.COOP.	
ALL GRANTS, SPONSORSHIPS AND DONATIONS ARE MADE TO NON-PRO	OFIT AND CIVIC
ORGANIZATIONS THAT ARE LOCATED IN THE COOPERATIVE'S SERVICE	CE AREA. ALL
DONATIONS ARE INTENDED TO IMPROVE THE COMMUNITIES IN WHICH	H OUR MEMBERS
RESIDE.	

SCHEDULE J (Form 990)

Part I

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. ▶ Information about Schedule J (Form 990) and its instructions is at www.lrs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

VALLEY ELECTRIC ASSOCIATION.

Employer identification number 88-0089964

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990. Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use X Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b X Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, X trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract X Compensation survey or study Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? 4a X 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a The organization? 5b b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization? 6b b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments 7 not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

For each individual whose compensation must be reported 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)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation		(iii) Other reportable	other deferred compensation	benefits	(D)·()(B)	in column (B) reported as deferred
			compensation	compensation				
(1) TOW HUSTED	8	354,207.	0	13,638.	137,591.	22,071.	527,507.	0
	≘	0	0	0	0.	0.	• 0	0
(2) RICK ECKERT	ε	254,439.	0	6,436.	233,251.	28,318.	522,444.	0.
	E	0	0	0	0	0	0	0
(3) CHRISTOPHER TOMCHUK	Ξ	217,374.	0	5,387.	59,075.	27,846.	309,682.	0.
ы	: <u>E</u>	0	0	0		0		0
	ε	216,740.	0	60,864.	28,175.	3,269.	309,048.	0.
121	(ii)	0	0	0.		- (Ì	0.
1	Θ	180,041.	0	4,153.	33,374.	9,626.	227,194.	0.
12	E	0	0	0.	I			0.
(6) CURT LEDFORD	ε	142,281.	0	323.	14,892.	16,215.	173,711.	0.
3	E	0	0	0.	0.	0		0.
(7) DANIEL ROGERS	ε	145,610.	0	4,547.	46,456.	26,346.	222,959.	
-	Ξ	0	0	0.	0		j	
(8) JAMES ANDERSEN	ε	132,497.	0	8,372.	64,296.	19,774.	224,939.	
	Ξ	0	0	0.	0	0	0	0
(9) BRENT FLAMING	Ξ	147,529.	0	5,192.	55,497.	26,346.	234,56	0.
	E	0	0	0.	0	ſ		0
(10) KRISTIN METTKE	ε	144,057.	0	973.	13,976.	19,739.	178,745.	0.
MANAGER OF ENGINEERING		0	0	0.	0.	0.	0	0
	Ξ							
	Ξ							
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	Ξ							

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

Part III | Supplemental Information

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

FORM 990. SCHEDULE I. PART II. COLIMN C	
IT IS THE	VALUE OF BENEFITS
PAYABLE UNDER A DEFINED BENEFIT RETIREMENT PLAN. TH	THE CONTRIBUTION RATE
FOR PARTICIPANTS IN THE NRECA RES DEFINED BENEFIT PE	BENEFIT PENSION PLAN ARE THE
SAME FOR ALL INDIVIDUALS IN THIS MULTI-EMPLOYER PLAN.	I. THE CHANGE IN
ACTUARIAL VALUE FOR EACH PARTICIPANT, HOWEVER, VARIES WITH AGE.	S WITH AGE. IN
OTHER WORDS, THE OLDER A PLAN PARTICIPANT IS, THE GR	THE GREATER THE INCREASE
IN THAT INDIVIDUAL'S CHANGE IN ACTUARIAL VALUE, ALL OTHER THINGS BEING	OTHER THINGS BEING
EQUAL. BECAUSE THIS RELATES TO A MULTI-EMPLOYER PLAN, CASH CONTRIBUTION	I, CASH CONTRIBUTION
TO THE PLAN IN LIEU OF THE ACTUARIAL INCREASE ARE EXPENSED IN THE	PENSED IN THE
FINANCIAL STATEMENTS.	
TOM HUSTED	
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN	\$137,591
401(K) EMPLOYER MATCH	-0-
TOTAL COLUMN C:	\$137,591

LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN:

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION, INC.	88-0089964	Page 3
or descriptions required for Part I, lines 1a,	1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	natión.
ADD: CASH CONTRIBUTION TO DEFINED BENEFIT PLAN:	135,433	
EXPENSE TO THE COOPERATIVE	\$135,433	
RICK ECKERT		
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN	\$233,251	
401(K) EMPLOYER MATCH	-0-	
TOTAL COLUMN C:	\$233,251	
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN:	(233,251)	
ADD: CASH CONTRIBUTION TO DEFINED BENEFIT PLAN:	96,802	
EXPENSE TO THE COOPERATIVE	\$96,802	
CHRISTOPHER TOMCHUK		
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN	\$56,575	
401(K) EMPLOYER MATCH	2,500	
TOTAL COLUMN C:	\$59,075 Schedule J	Schedule J (Form 990) 2015
620413		

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Schedule J (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION, INC.	88-0089964 Page 3
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6l	1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information.
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN:	(56,575)
ADD: CASH CONTRIBUTION TO DEFINED BENEFIT PLAN:	83,173
EXEPENSE TO THE COOPERATIVE	\$85,673
CHRISTOPHER BROOKS	
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN	\$25,675
401(K) EMPLOYER MATCH	2,500
TOTAL COLUMN C:	\$28,175
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN:	(25,675)
٥	82,934
ļ	
RXEDNSE TO THE COOPERATIVE	\$85,434
BART THURGOOD	Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION, INC.	88-0089964 Page 3
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and 9.	3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information.
	•
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$30,874	7.4
401(K) EMPLOYER MATCH	00
TOTAL COLUMN C:	74
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN: (30,874)	74)
ADD: CASH CONTRIBUTION TO DEFINED BENEFIT PLAN: 47,827	27
EXPENSE TO THE COOPERATIVE \$50,327	2.7
BRENT FLAMING	
	76
гсн	.500
TOTAL COLUMN C: \$55,4	497
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN: (52,997)	97)
40,097	
	Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION, INC.	88-0089964 Page 3
ormation and escriptions required for Part I, lines 1a,	1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
EXPENSE TO THE COOPERATIVE	\$42,597
CURT LEDFORD	
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN	\$12,392
401(K) EMPLOYER MATCH	2,500
	*14 000)
TOTAL COLUMN C:	7.07#T¢
+ ACCOUNTABLAT INCREASE IN DEFINED BENEFIT PLAN:	(12,392)
CASH COMMETRIMION TO DEFINED BENEF	71,022
EXPENSE TO THE COOPERATIVE	\$73,522
JAMES ANDERSEN	
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN	\$61,796
401(K) EMPLOYER MATCH	2,500
TOTAL COLUMN C:	\$64,296 Schedule J (Form 990) 2015
532113 10-14-15	

Schedule J (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION, INC.	88-0089964 Page 3
or descriptions required for Part I, lines 1a, 1	b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN: (61,796)	(96)
ADD: CASH CONTRIBUTION TO DEFINED BENEFIT PLAN: 49,399	6
EXPENSE TO THE COOPERATIVE \$51,899	6
DANIEL ROGERS	
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$43,956	9
401(K) EMPLOYER MATCH	0
TOTAL COLUMN C:	9
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN: (43,956)	(9
ADD: CASH CONTRIBUTION TO DEFINED BENEFIT PLAN: 40,097	7
EXPENSE TO THE COOPERATIVE \$42,597	7
KRISTIN METTKE	
ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$11,476	9
	Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION, INC.	88-0089964 Page 3
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	7, and 8, and for Part II. Also complete this part for any additional information.
401(K) EMPLOYER MATCH	2,500
TOTAL COLUMN C:	\$13,976
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN:	(11,476)
OF NOTHIBIBINE TO	55,120
MO MUS COODEDAMIXE	\$57,620
THE COOLEGE TAX	
	Schedule J (Form 990) 2015
532113 10-14-15	

SCHEDULF O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

532211 09-02-15

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. OMB No 1545-0047 Open to Public

Schedule O (Form 990 or 990-EZ) (2015)

Inspection

Name of the organization **Employer identification number** VALLEY ELECTRIC ASSOCIATION, INC. 88-0089964 FORM 990, PART VI, SECTION A, LINE 6: THE COOPERATIVE WAS FORMED BY THE MEMBERS TO PROVIDE ELECTRIC SERVICE AT COST ON A COOPERATIVE BASIS. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE COOPERATIVE VOTE ON THE BOARD OF DIRECTORS. ELECTIONS ARE DONE ON A ONE MEMBER ONE VOTE BASIS. FORM 990, PART VI, SECTION A, LINE 7B: THE FOLLOWING ACTS REQUIRE APPROVAL OF THE MEMBERS OF THE COOPERATIVE. DISSOLUTION/LIQUIDATION OF THE COOPERATIVE. MERGER OR CONSOLIDATION OF THE COOPERATIVE WITH ANOTHER ORGANIZATION. THE DISPOSAL OF A SUBSTANTIAL PORTION OF THE COOPERATIVE'S ASSETS. AMENDMENT TO THE ARTICLES OF INCORPORATION. AMENDMENT TO THE BYLAWS. 5. FORM 990, PART VI, SECTION B, LINE 11: MANAGEMENT PRESENTED A COPY OF THE FORM 990 TO THE BOARD FOR DISCUSSION, REVIEW AND APPROVAL PRIOR TO FILING. THE DISCUSSION AND REVIEW WAS PERFORMED AT THE BOARD MEETING IMMEDIATELY BEFORE FILING THE FORM 990. FORM 990, PART VI, SECTION B, LINE 12C: DIRECTORS AND OFFICERS ARE REQUIRED TO REVIEW AND BE FAMILIAR WITH THE POLICIES OUTLINED IN THE COOPERATIVE'S CONFLICT OF INTEREST POLICY. THE

CONFLICT OF INTEREST POLICY IS EXPLAINED TO ALL NEW DIRECTORS COMING ON THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990 EZ) (2015) Page 2 Name of the organization **Employer identification number** VALLEY ELECTRIC ASSOCIATION, INC. 88-0089964 BOARD. DIRECTORS AND OFFICERS ARE REQUIRED TO DISCLOSE ANY ACTION OR ${ t SITUATION}$ THAT MIGHT VIOLATE THE POLICY TO THE FULL BOARD OF DIRECTORS AS SOON AS POSSIBLE. BOARD MINUTES ARE NOTED WHEN A DIRECTOR HAS A CONFLICT OF INTEREST. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS USE A COMPENSATION SURVEY WHEN DETERMINING THE COMPENSATION OF THE CEO. THE SURVEY SHOWS COMPARATIVE SALARIES FOR CEO'S FROM COOPERATIVES LOCATED IN NEVADA AND THE NATION. THE BOARD AND CEO USE A COMPENSATION SURVEY WHEN DETERMINING THE COMPENSATION OF THE COOPERATIVE'S OTHER EMPLOYEES MEETING THE DEFINITION OF OFFICER AND KEY EMPLOYEES, IF ANY. THE SURVEY INCLUDES SALARIES FROM SIMILAR COOPERATIVES THROUGHOUT NEVADA AND THE NATION. FORM 990, PART VI, SECTION C, LINE 19: THE COOPERATIVE PROVIDES A SUMMARIZED COPY OF THE AUDITED FINANCIAL STATEMENTS TO THE MEMBERS OF THE COOPERATIVE AT THE ANNUAL MEETING. THE COOPERATIVE'S BYLAWS, ARTICLES OF INCORPORATION AND SEVERAL YEARS OF ANNUAL REPORTS ARE ALSO AVAILABLE ON THE COOPERATIVE'S WEBSITE. THE COOPERATIVE WILL PROVIDE A COMPLETE COPY OF THE AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, OR GOVERNING DOCUMENTS TO ANY MEMBER WHO REQUESTS A COPY. FORM 990, PART VII, COLUMN F IN ORDER TO PROVIDE RETIREMENT BENEFITS TO ITS EMPLOYEES, THE COOPERATIVE HAS ESTABLISHED A DEFINED CONTRIBUTION PLAN UNDER SECTION ___

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Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization VALLEY ELECTRIC ASSOCIATION, INC.	Employer identification number 88-0089964
PLAN ARE MADE PURSUANT TO THE PLAN DOCUMENT. ADDITIONALL	Y, THE
COOPERATIVE PARTICIPATES IN A MULTI-EMPLOYER DEFINED BENE	FIT PLAN.
CONTRIBUTIONS TO THIS PLAN ARE BASED ON THE FULL FUNDING	LIMITATION OF
SUCH PLAN. EMPLOYER CONTRIBUTIONS FOR BOTH PLANS ARE AVA	ILABLE TO
PARTICIPATING EMPLOYEES, INCLUDING OFFICERS, KEY EMPLOYEE	S AND HIGHLY
COMPENSATED EMPLOYEES, MEETING THE ELIGIBILITY REQUIREMEN	TS OF SUCH
PLANS.	
THE COOPERATIVE ALSO PROVIDES HEALTH, DENTAL, VISION AND	LIFE INSURANCE
TO ALL ELIGIBLE EMPLOYEES THROUGH A QUALIFIED PLAN. THE	AMOUNTS
REPORTED ON PART VII, COLUMN (F) FOR THE OFFICERS, KEY EM	IPLOYEES OR
HIGHLY COMPENSATED EMPLOYEES IS COMPRISED OF THE ACTUARIA	L INCREASE IN
THE DEFINED BENEFIT PLAN, THE TOTAL AMOUNT CONTRIBUTED BY	THE
COOPERATIVE TO THE DEFINED CONTRIBUTION PLAN AND INSURANCE	E PAID ON
BEHALF OF AND FOR THEIR BENEFIT.	
IN ADDITION TO THE ABOVE PENSION PLANS, THE COOPERATIVE A	LSO PROVIDES
POST-RETIREMENT HEALTH INSURANCE BENEFITS THROUGH AN UNFU	NDED WELFARE
BENEFIT PLAN. THE VALUE OF THESE BENEFITS HAS NOT BEEN E	STIMATED.
FORM 990, PART VIII, LINE 2	
PATRONAGE DIVIDENDS RESULT FROM THE PAYMENT OF INTEREST I	ROM
COOPERATIVE BANKS AND THE PURCHASE OF SUPPLIES AND SERVICE	CES FROM OTHER
COOPERATIVE ORGANIZATIONS. THE EXPENSES ASSOCIATED WITH	PURCHASES FROM
AND PAYMENTS TO SUCH COOPERATIVE ORGANIZATIONS ARE A DIRE	CT COMPONENT
OF COST OF THE ELECTRIC SERVICE PROVIDED BY THE COOPERATION	IVE TO ITS

Schedule O (Form 990 or 990·EZ) (2015)	Page 2
Name of the organizationVALLEY_ELECTRIC_ASSOCIATION, INC.	Employer identification number 88-0089964
•	1 00 0003304
MEMBERS.	
FORM 990, PART IX	
THE ACCOUNTING RECORDS OF THE COOPERATIVE ARE MAINTAINED	IN ACCORDANCE
WITH THE RUS UNIFORM SYSTEM OF ACCOUNTS AS PRESCRIBED FOR	RELECTRIC
BORROWERS OF THE RURAL UTILITIES SERVICES (RUS). THE UNIF	FORM SYSTEM OF
ACCOUNTS DOES NOT RECORD EXPENSES IN THE GENERAL EXPENSE	CATEGORIES
PROVIDED ON PART IX LINES 1 - 23. THE COOPERATIVE SEPARA	ATELY SALARIES
AND WAGES, EMPLOYEE BENEFITS AND PAYROLL TAXES THAT ARE A	ALLOCATED IN
ACCORDANCE WITH THEIR ACCOUNTING SYSTEM, BUT OTHER EXPENS	SES THAT ARE
DESCRIBED IN LINES 1 - 23 ARE REPORTED ON LINE 24 UNDER T	THE EXPENSE
CATEGORIES REQUIRED BY THE UNIFORM SYSTEM OF ACCOUNTS.	
FORM 990, PART IX, LINE 4	
PURSUANT TO THE FORM 990 INSTRUCTIONS, THE AMOUNT OF PATE	RONAGE
DIVIDENDS PAID TO THE MEMBERS (HEREINAFTER REFERRED TO AS	S "PATRONS")
SHOULD BE REPORTED ON PART IX, LINE 4. THE PHRASE "PATRO	ONAGE DIVIDENDS
PAID" REFERS TO THE PROCESS, SUBSEQUENT TO YEAR-END, BY	WHICH THE
COOPERATIVE ALLOCATES PATRONAGE CAPITAL TO AND, THEREFORE	E, OPERATES AT
COST WITH ITS PATRONS.	
THE COOPERATIVE'S TAX EXEMPT PURPOSE IS TO PROVIDE ELECT	RICITY TO ITS
PATRONS AND TO DO SO ON A COOPERATIVE BASIS. TAX LAW DE	FINES
"OPERATING ON A COOPERATIVE BASIS" AS SUBORDINATION OF C	APITAL,

THE COOPERATIVE OPERATES AT

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization VALLEY ELECTRIC ASSOCIATION, INC.	Employer identification number 88-0089964												
COST THROUGH THE ALLOCATION OF TRUE PATRONAGE DIVIDENDS (ALSO REFERRED												
TO AS ALLOCATIONS OF PATRONAGE CAPITAL) TO ITS PATRONS.	PATRONAGE												
DIVIDENDS ARE CONSIDERED PAID IF THE ALLOCATION IS MADE (1) PURSUANT TO												
A PRE-EXISTING OBLIGATION, (2) FROM THE MARGINS PRODUCED	FROM THE												
TRANSACTIONS DONE WITH OR FOR PATRONS, AND (3) IN A FAIR	AND EQUITABLE												
MANNER ON THE BASIS OF PATRONAGE (I.E. PURCHASES). ADDIT	CIONALLY, THE												
ALLOCATION OF PATRONAGE DIVIDENDS SHOULD BE MADE WITHIN A REASONABLE													
TIME PERIOD AFTER THE CLOSE OF THE COOPERATIVE'S YEAR-END	OF DECEMBER												
31. EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE	DIVIDEND IS												
PROVIDED FOR IN THE NON-PROFIT OPERATION ARTICLE OF THE C	COOPERATIVE'S												
BYLAWS.													
THE AMOUNT REPORTED ON PART IX, LINE 4 REPRESENTS THE AMO	OUNT OF												
PATRONAGE CAPITAL THAT IS EITHER ALLOCATED OR TO BE ALLOC	CATED TO THE												
PATRONS RESULTING FROM THEIR PURCHASE OF ELECTRICITY FROM	M THE												
COOPERATIVE FOR THE 2015 CALENDAR YEAR. BECAUSE PATRONAC	GE DIVIDENDS												
ARE THE PROCESS BY WHICH THE COOPERATIVE OPERATES AT COST	r with its												
PATRONS AND THEREBY A KEY COMPONENT TO ACCOMPLISHING ITS	EXEMPT												
PURPOSE, THE COOPERATIVE HAS REPORTED SUCH AMOUNTS AS AN	EXPENSE FOR												
FORM 990 REPORTING. PATRONAGE DIVIDENDS ARE NOT AN EXPENS	SE FOR												
FINANCIAL STATEMENTS PREPARED IN ACCORDANCE WITH GENERAL	LY ACCEPTED												
ACCOUNTING PRINCIPLES, HOWEVER.													
FORM 990, PART IX, LINES 5-7													
SALARIES AND WAGES ARE ALLOCATED TO ASSET, LIABILITY, AND	D EXPENSE												
ACCOUNTS BASED ON THE ACCOUNTING SYSTEM DESCRIBED ABOVE.	THE FOLLOWING												

TOTAL ADMINISTRATIVE AND GENERAL EXPENSE PER 990

MAINTENANCE OF GENERAL PLANT

MISCELLANEOUS GENERAL EXPENSE

VETA ADMINISTRATIVE AND GENERAL

<u>\$ 3,092,184</u>

1,606,990

4,097

241,536

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
NET INCREASE IN MEMBERSHIPS	2,110.
NET INCREASE IN DONATED CAPITAL	437,134.
RETIREMENT OF CAPITAL CREDITS	-2,006,289.
OTHER COMPREHENSIVE INCOME ADJUSTMENT FOR POST-RETIREMENT	
BENEFITS	379,700.
PATRONAGE CAPITAL ASSIGNABLE	2,271,903.
GAIN ON RETIRED CAPITAL CREDITS	74,075.
NET CHANGE IN OTHER EQUITIES	17,814.
TOTAL TO FORM 990, PART XI, LINE 9	1,176,447.

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization VALLEY ELECTRIC ASSOCIATION, INC.	Employer identification number 88-0089964
THE COOPERATIVE PREVIOUSLY INCLUDED ACCRUED EXPENSES COMP	PRISED OF
ACCRUED COMPENSATED ABSCENCES AND OTHER CURRENT AND ACCRU	JED LIABILITIES
AS COMPONENTS OF OTHER LIABILITIES ON LINE 25 OF PART X.	HOWEVER, FOR
THE 2015 CALENDAR YEAR, THE COOPERATIVE BEGAN REPORTING T	HESE AMOUNTS
ON LINE 17 IN ACCORDANCE WITH FORM 990 INSTRUCTIONS. TO	INCREASE
CONSISTENCY, ACCRUED EXPENSES IN THE AMOUNT OF \$2,182,126	5 FOR THE 2014
CALENDAR YEAR HAVE BEEN RECLASSIFIED FROM LINE 25 TO LINE	
FORM 990, PART XII, LINE 2C	
THE BOARD AS A WHOLE IS RESPONSIBLE FOR OVERSEEING THE FI	INANCIAL
STATEMENT AUDIT AND SELECTING THE INDEPENDENT FINANCIAL S	STATEMENT
AUDITOR. PROCEDURAL CHANGES DID NOT OCCUR DURING THE YEA	

532212 09-02-15

Schedule O (Form 990 or 990-EZ) (2015)

SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

Partl

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

2015 Open to Public Inspection

OMB No 1545-0047

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

Employer identification number 88-0089964 INC. VALLEY ELECTRIC ASSOCIATION,

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
ATION					- Clomboto Sotter
800 E HIGHWAY 372,	TRANSMISSION OF	S. C. S. C.	20 980 987	128 876 547	VALLE ELECTRIC 128 876 547 ASSOCIATION INC.
VALLEY FIECTRIC RNERGY SERVICES LLC -	procintain.	W. C.			
47-1001205 800 E HIGHWAY 372 PAHRUMP NV				<u>, , , , , , , , , , , , , , , , , , , </u>	VALLEY ELECTRIC
	INACTIVE	NEVADA	0	0	0. ASSOCIATION, INC.
Y ELECTRIC UTILITY SERVICES, LLC -					
47-1012241, 800 E HIGHWAY 372, PAHRUMP, NV				2.	VALLEY ELECTRIC
89041	INACTIVE	NEVADA	0	0	O. ASSOCIATION, INC.
VALLEY COMMUNICATIONS ASSOCIATION, LLC -	·				
47-4018997, 800 E HIGHWAY 372, PAHRUMP, NV	TO PROVIDE BROADBAND				VALLEY ELECTRIC
89041	SERVICES	NEVADA	0.	0	0. ASSOCIATION INC.
Part II Identification of Related Tax-Exempt Organizations Complete organizations during the tax year.	ations Complete if the organization ans	if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt	t IV, line 34 because	it had one or more r	elated tax-exempt

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	12(b)(13)
				501(c)(3))		Yes	8
VALLEY ELECTRIC CHARITABLE FOUNDATION -	TO PROVIDE SCHOLARSHIPS				-		
26-3157116, 800 E HIGHWAY 372, PAHRUMP, NV	AND GRANTS TO MEMBERS OF				VALLEY ELECTRIC	;	
89041	THE COOPERATIVE'S AREA.	NEVADA	501(C)(3)	LINE 7	ASSOCIATION, INC.	×	
VEA PAC - 27-4721243	LOBBYING AT STATE AND						
PO BOX 237	FEDERAL LEVELS FOR RURAL				VALLEY ELECTRIC		
PAHRIMP NV 89041		NEVADA	527		ASSOCIATION, INC.	×	
A 646.00 To 10.00 To							
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2015

532161 09-08-15 LHA

Page 2 88-0089964

> INC. VALLEY ELECTRIC ASSOCIATION,

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Schedule R (Form 990) 2015 Part III

S	General or Rercentage managing ownership																	related		Section	512(b)(13) controlled	+-1	Yes			+				 -		_	+				Schedule R (Form 990) 2015
9																		e or more		<u> </u>	Percentage								_								R (Form
<u>.</u>	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	יאון יישווין ואמילי			_									-		- =		because it had or			-	assets					 -	-		 - -	_						Schedule
Ξ	ortionate tions?																	4 IV Ine 34					1	-			 					_					
(a)	Share of end-of-year assets										-						•	ng Ogo ma			Share of total															j	
										-								Vec" on Fo		(e)	e of entity	or trust)															
ε	Share of total income																	" parawone	alisweiga			2	-			-				 							
		2-314)																prospization	olganization	(Q	Direct controlling	enury															
(e)	Predominant income (related, unrelated, excluded from tax under eachore 512-514)	Sections 3																poloto if the	ולופום וו חופ	(c)		(state of foreign	country)				_							-			
ত্ত	trolling y																oration or Trust Coll.	(a)	activity				_				•					_					
9	Legal domicile (state or foreign	country)																	as a Corpo		Primary																
(Q)	Primary activity																		janizations laxable a poration or trust durii		z																
(a)	Name, address, and EiN of related organization																	The strangation answered "Vec" on Form 990 Part IV line 34 because it had one or more related	Part IV Identification of Helated Organizations Laxable as a Corporation organizations treated as a corporation or trust during the tax year.	(a)	Name, address, and EIN	of related organizatior															532162 08-08-15

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88-0089964

Page 4

Schedule R (Form 990) 2015 VALLEY ELECTRIC ASSOCIATION, INC.

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

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

	(4)	(3)		9	(5)	4	9	6	18
Name, address, and EIN of entity	Primary activity	흜	Predomi (related excluded f		Share of end-of-year	Dispropor- tionate allocations?	Disproportion (Code V-UBI General or Percentage Bloadens) of Schedule K-1 parner?	General of managin partner	Percentage g ownership
		country)	sections 512-514) Yes No	No	assets	Yes	(Form 1065)	Yes	
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							Schedule	R (For	Schedule R (Form 990) 2015

Part VII	Supplemental Information	88-0089964 Page 5
	Provide additional information for responses to questions on Schedule R (see instructions).	
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