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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2015

Open to Public

Department of the Treasury Internal Revenue Service

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

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

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

be made public. Open to Public Inspection

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				ndar year, or tax year C Name of organization N				o io, and en	unig			er identification n	umber	
E	_	Check if app		C Name of organization N	vebi aska M	unicipal PC	Jwei Pool				_ =pioy			
	_	Address cha	-	Doing business as Number and street (or F	2 O boy if ma	Lio not dolivi	arad to atract address) T Boom	/suite		E Tolophor	47-0575470		
L	_	Name char	Ĭ	•	- O DOXII IIIa	ii is not denvi	ered to street address	s) hoom	/Suite		E Telephone number			
L	_	initial return		8377 Glynoaks Dr		- · · · · · · · · · · · · · · · · · · ·						402-474-4759		
Ļ	_	Final return/te		City or town, state or pi		ry, and ZIP c	or toreign postal code					_		
ŗ	ᆜ.	Amended re		Lincoln NE 68516-630		G Gross re		7,482,841						
L	. لـ	Application		F Name and address of p			Poehling, Executi	ive Director				subordinates? 🔲 Yes		
_				8377 Glynoaks Drive		NE 68516-				4 ' '		s included? Yes		
1		Tax-exempt	t status	501(c)(3)	✓ 501(c) (4) ◀ (in	sert no) 🔲 4947(a)(1) or 527	· 	lf "No	o," attach a	list (see instruction	ons)	
-		Website. 🕨		v nmppenergy org				, 		H(c) Group	exemption	number 🕨		
ŀ				✓ Corporation Trust	Associat	on Other	r >	L Year of for	mation	1975	M State	of legal domicile	NE_	
ı	P		Summ											
		1 B	riefly de	escribe the organizat	ion's missi	on or mos	t significant activ	/ities: Neb	raska	Municipal	Power P	ool provides a	variety of	
	ce	er	nergy-re	lated services to its n	nember con	ımunıtıes,	including the area	as of electr	ıc dıs	tribution e	ficiency	& reliability, uti	lity &	
	nan	bı	ısıness	software managemer	nt, financial	planning c	ost of service/rate	c studies, &	utility	y training 8	k educati	on		
	/eri	2 C	heck th	is box ▶ 🗌 if the org	janization d	liscontinu	ed its operations	or dispose	ed of i	more than	25% of	its net assets.		
ቧ	Governance	3 N	umber (of voting members o	of the gover	ning body	/ (Part VI, line 1a)				_3		16	
Q(N)?	≪ ರ	4 N	umber (of independent votin	g member:	s of the go	overning body (Pa	art VI, line 1	lb) .		4		16	
, _ ,≔1	ties	5 To	otal nun	nber of individuals e	mployed in	calendar	year 2015 (Part \	V, line 2a)			5		65	
€®	Activities &	6 To	otal nun	nber of volunteers (e	stimate if r	ecessary)					6		C	
. <u>.5</u>	Ä	7a To	otal unr	elated business reve	enue from F	art VIII, co	olumn (C), line 12	2			7a		C	
AUG				lated business taxab							7b		c	
-							RECE	VED		Prior Ye	ar	Current Y		
	d)	8 C	ontribu	tions and grants (Pa	rt VIII, line	ih)		· · · ·	dT		277,624		292,220	
Z	Ž	م ہا	roaram	sanuca ravanua (Pa	rt VIII. line i	201	89	. 2016.			,112,566		1,104,357	
ويوجي	Revenue	10 In	vestme	ent income (Part VIII,	column (A)	. lines 3.	sand 7d) Uu	2 2016			1,256	-	2,070	
SCAMMED	ď	11 0	ther rev	enue (Part VIII, colu	mn (A). line	s 5. 6d. 8	0. 9c. 10c. and 1	1e)	약		,432,330		6,070,711	
O				enue—add lines 8 thr					, H		,823,776		7,469,358	
-				nd similar amounts p				<u> </u>			01		13,000	
		l .		paid to or for memb	=						0		10,000	
	w			other compensation, employee benefits (Part IX, column (A), lines 5–10)									738,393	
	Expenses			onal fundraising fees		•	• •				836,475			
	per	l		draising expenses (F	-		•			- ,	·	et a cur to yet		
	Δ			penses (Part IX, colu					+		,947,187	4 1 2	6,586,479	
				penses. Add lines 13				 ine 25)			5,783,662		7,337,872	
		1	•	less expenses. Sub		-	· · ·	inc 20) .	\vdash		40,114			
	- 2		<u>overiue</u>	1035 experioes. Out	tract line 1	<u> </u>			Be	ginning of Cu		End of Y	131,486	
	ance ance	20 T	otal acc	sets (Part X, line 16)					1					
	Net Assets or Fund Balances	21 T		oilities (Part X, line 26					-		,474,635	<u></u>	1,512,455	
	E S	22 N		ets or fund balances.	,	· · · ·	 n line 20		-		,354,674		1,261,008	
1				ture Block	Subtract II	116 21 1101					119,961	L	251,447	
								L	4 - 4					
				iry, I declare that I have ex lete. Declaration of prepar								my knowledge an	id belief, it is	
			<u> </u>	<u> </u>	tohnom							8, 2016		
	Sig	an	Sign	nature of officer	יייטייון					L Da		0, 2010		
	He	· I	, -	mie L. Johnson	Directo	r of Fina	nce & Accour	ntina		50				
				e or print name and title	Directo	OI I IIIa	ince & Accoun	itilig						
			,	/pe preparer's name		Preparer's s	eignature		Date			PTIN		
	Pa		' ''''	The property of rights			g. 14141 9		Jale	•	Check	<u> </u>		
		Preparer							L		self-em	pioyea		
	Us	se Only					·				n's EIN ▶			
	140	v the IDC		address >	Droporo	hour ob	2 (000 instrum	tions)		Pho	one no			
	_			s this return with the			_ -		<u> </u>	<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>		es 🗌 No	
	FOI	Paperwo	ork Redu	uction Act Notice, see	the separa	te instruct	ions.	C	at No.	11282Y		Form	990 (2015	

Form 9	90 (2015) Page 2
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	None
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
	and total expenses, and revenue, if any, ter each program control repaired.
4a	(Code:) (Expenses \$ 594,705 including grants of \$ 0) (Revenue \$ 651,205)
	Provide computer software programs to approximately 170 municipalities with populations ranging from 80 to 10,300. The computer
	software programs include a complete financial billing package, or the packages can be purchased individually, depending on the
	needs of the community The packages include general ledger, utility billing, inventory control, accounts payable, payroll, accounts receivable, bank reconciliation, time sheet, and service orders. New user workshops and annual "refresher" workshops are held.
	throughout the NMPP service area
	anoughout the time viscovice died
4b	(Code:) (Expenses \$ 499,471 including grants of \$0) (Revenue \$ 453,152)
	Provide electric distribution related services which include
	Cost of service/rate design studies/financial plans to aid decision makers in the understanding of system costs and assistance in
	determining customer rates, mutual aid to assist member communities in the event of a natural disaster or emergency, electric distribution services to assist in the maintenance of member distribution systems, infrared scanning services to identify abnormal
	heat in electrical and mechanical systems to predict equipment trouble and potential revenue loss, create community newsletters,
	utility brochures and logos to promote community services and image
	77 cost of service, financial planning & rate design studies are in place for electric, water, sewer, natural gas & refuse
	46 reports were completed for 22 participants as part of U.S. Energy Information Administration reporting service
	42 utilities participated in NMPP's Electric Distribution services program
4c	(Code:) (Expenses \$ 33,105 including grants of \$ 13,000) (Revenue \$ 34,002)
	Provide grants paid through the Energy Research & Development Fund (ERDF) which allows individual Nebraska Municipal Power
	Pool members who contribute to the ERDF fund to apply for grants to help finance the member's energy-innovative project
4d	Other program services (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0) Total program service expenses ▶ 1.127.281

Form 99	0 (2015)			Page 3
Part	V Checklist of Required Schedules		V	l Ma
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1		✓_
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			ļ
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </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	√	
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		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	-	1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		/
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		/
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI and XII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	·	1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14 a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
	——————————————————————————————————————	For	m 99 0	(2015)

Form 99	00 (2015)		1	Page 4
Part	Checklist of Required Schedules (continued)			
			Yes	No
_	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		/
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		/
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
24a	employees? If "Yes," complete Schedule J	23 24a	/	✓
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28b 28c	1	✓
29	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		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<u>,</u>
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		▼
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			
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		_	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
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	/	
		Forr	990	(2015)

Form 99	0 (2015)			Page
Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	.,.	<u>.</u> .
4			Y	es No
1a		15		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
·	reportable gaming (gambling) winnings to prize winners?	10		_
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			صد اس
		65		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2k	, /	<i>,</i>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	38	<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	3t	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financia	J		
_	account)?	46	1	_ ✓
b	If "Yes," enter the name of the foreign country:	-	ı İ	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	3		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	58		√
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5t	\neg	- ✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50	$\overline{}$	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		+	+
	organization solicit any contributions that were not tax deductible as charitable contributions?	68	a 🗸	<i>'</i>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	r		
	gifts were not tax deductible?	6t	<u>, </u>	✓
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	78	-	_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	, 7t	'	_
С	required to file Form 8282?	70		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	76	<u> </u>	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	71	-	1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	70	,	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7ł	<u>. </u>	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the)		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	98		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	91	<u> </u>	سر حد
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	а	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13	a	
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
J	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
Casti	Check if Schedule O contains a response or note to any line in this Part VI		<u></u>	V
Secti	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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?	4 5 6 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?	7b	i	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	8a		
a b 9	The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8b	▼	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O on B. Policies (This Section B requests information about policies not required by the Internal Reven	9	ode	<u> </u>
Secu	on B. Policies (This Section B requests information about policies not required by the internal never	iue Ci	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b 11a		-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	7,7,7	STATE S	\$ 1:
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	√	A
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13 14 15	Did the organization have a written whistleblower policy?	13	✓	173 173 173
a b 16a	The organization's CEO, Executive Director, or top management official	15a 15b	✓	
	with a taxable entity during the year?	16a	ALLENS CONTROL	✓
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	terest	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	: ▶	
	James Johnson, Dir. of Finance and Accounting, 8377 Glynoaks Drive, Lincoln NF 65816-6304 #402 474 4759			

Dago	7
raye	•

Part VII	Compensation of Officers, Directors,	Trustees, Key Employees,	Highest Compens	ated Employees, and
	Independent Contractors			

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

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

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

☐ Check this box if neither the organization	tion nor any relate	d org	anız			ompe	nsa	ited any currer	t officer, director	r, or trustee
	İ				C)					
(A)	(B)	(do n			ition more	e than o	one	(D)	(E)	(F)
Name and Title	Average hours per	box,	box, unless person is both an officer and a director/trustee)					Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any		1 1					from	related	other
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	팔호	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	recto	utio	er.	mg	est c	ब्	(W-2/1099-MISC)		organization
	below dotted line)	੧ ਵ	nal t		o Ve	www	ļ			and related organizations
	""e,	stee	rust		٥	ens				Organizations
			ee			Highest compensated employee				
(4) An dean Davida										
(1) Andrew Devine Director	1	1						0	0	0
(2) Chris Anderson	1	 								
Director		1						0	0	0
(3) Ron Doggett	1	Ė	1	-			i	 		
Director		1					ļ	0	0	o
(4) George Michael	1									
Director		✓						0	0	0
(5) Shelley Sahling-Zart	1									
Director		✓						0	0	0
(6) Jim Hawks	1									
Director		✓	L					0	0	0
(7) Randy Woldt	1									
Director		✓				<u> </u>	_	0	0	0
(8) Aaron Lincoln	11									
Director		✓	<u> </u>		<u> </u>			0	0	0
(9) Mike Palmer	11									
Director		✓			_			0	0	0
(10) Marlene Johnson	11									
Director		/	<u> </u>		<u> </u>		┡	0	0	0
(11) Vacancy as of March 31, 2016	1									_
Director		✓	-	-	-		├	0	0	0
(12) Vacancy as of March 31, 2016	1	,						_	_	_
Director Control Control		✓	\vdash	<u> </u>	\vdash	_	+-	- 0	0	0
(13) Vacancy as of March 31, 2016	11	/							_	_
Director (4.4)		 	\vdash		-	├	+	0	0	0
(14) Tim Luchsinger				1						
Director, President					1	ــــــــــــــــــــــــــــــــــــــ	<u> </u>	0	0	Form 990 (2015)

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (co	ntınue	ed)		
					(0	C)		-						
	(A) Name and title	(B) Average			neck		than o		(D) Reportable	(E) Reportable			(F) nated	
		hours per week (list any hours for related organizations below dotted line)	office of lndividua or directo				Highest compensated or employee		compensation from the organization (W-2/1099-MISC)	compensation fi related organizations (W-2/1099-MIS	5	of compe fror organ and i	unt of ther ensation the nization related ization	on n l
(15) Le	eroy Frana	1			\vdash				-		+			
	or, Vice President		✓		✓				0		0			0
(16) M	arvın Schultes	11												
	or, Secretary/Treasurer		✓	ļ	✓			<u> </u>	0		0			0
	obert Poehling	2			١,	1								
	tive Director		-		✓			-	204,560		0			20,387
	mie L Johnson	2			/				105.000					14077
	or of Finance & Accounting	16			V				165,220		0			14,377
	ndrew Ross or of Retail Utility Svcs & Member Relations	110	-		/				118,033		o			31,738
	Gary Stauffer	2			Ϊ́				110,033		-	-	•	,1,750
	tive Director	• • • • • • • • • • • • • • • • • • •			✓				148,918		0		2	26,907
	m Sutherland	0												
Direct	or of Wholesale Electric Operations						✓		168,165		0			3 <u>3,158</u>
(22) C	nrıs Dıbbern	11]					ļ						
	al Counsel					L.	✓	ļ	150,595		0 35,25		<u>35,252</u>	
	ohn Harms	<u> </u>	ŀ					l			_ [
	or of Risk Management & Compliance				-		-	-	143,678		0 34,313		34,313	
	rad Hans	00	1				/		150,875	ļ	0			35,065
	Director of Wholesale Electric Operations Brah Jones	5			1		-		150,675		-		,	33,003
	or of Enterprise Business Support	† -	1				1		129,164	1	0			32,915
1b	Sub-total			٠.	٠.	•		┢	1,379,208		0		-	64,112
С	Total from continuation sheets to Part	VII, Sectio	n A						0		0			0
d	Total (add lines 1b and 1c)								1,379,208		0		20	64, <u>11</u> 2
2	Total number of individuals (including bur reportable compensation from the organization)			ose	e list	ted	above	e) w	ho received m	ore than \$100	0,000	of		
	reportable compensation from the organ	ization > 1	5										Voc	No
3	Did the organization list any former of	ficer, direc	tor. c	or tr	ruste	ee.	kev e	emp	olovee, or high	nest compens	sated	[162	100
_	employee on line 1a? If "Yes," complete									'		3		1
4	For any individual listed on line 1a, is the	sum of re	portal	ble	con	npei	nsatio	on a	and other comp	pensation from	m the			
	organization and related organizations	greater th	an \$1	150,	,000	? /	f "Ye	s,"	complete Sch	nedule J for	such			
												4	✓	<u>.</u>
5	Did any person listed on line 1a receive of											1		ļ
	for services rendered to the organization	? IT "Yes," c	compi	ete	Scr	neau	Jie J i	or s	sucn person			5		✓
Section 1	on B. Independent Contractors Complete this table for your five highest		od in	don	ond	ont	contr	oot.	ore that recent	ad mara than	\$100	000 of		
•	compensation from the organization. Repyear.													ax
	(A) Name and business add	Iress							(B) Description of s	services	c	(C) Compens	ation	
			_					_						
	Total number of independent contractor	rs (includi	na bi	ıt n	not	lımıt	ed to	\	nose listed ah	ove) who				
~	received more than \$100,000 of compens							, li	OSE IISTED AD	STO, WITO				

Form **990** (2015)

FEIR	VIII	Check if Schedule C		ponse or note to	any line in this	Part VIII		🔽
		Chook in Contection of	2001,14111110 4 100		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	s 1a	0				
iza our	b	Membership dues .	1b	258,218				
S, C	С	Fundraising events .	<u> </u>	0				
ia i	d	Related organizations		0				
ıs,	е	Government grants (cor		34,002	+			
er S	f	All other contributions, g						
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts not inc	L	0	1			
ᅙ	9	Noncash contributions include						
	<u>h</u>	Total. Add lines 1a-1	<u> </u>	Business Code	292,220			
Ĕ	20	Computer coffware an	d cuppert	<u> </u>	651.205	651 205		
Şeve	2a b	Computer software an Electric distribution se		541519 541900	651,205 453,152	651,205	0	
e E	C			541900	453,152	453,152	<u> </u>	
ΘŽ	ď							
SE	e							<u>-</u>
Program Service Revenue	f	All other program ser					=	
P	g	Total. Add lines 2a-2	?f	▶	1,104,357	•		
	3	Investment income	(including divid	ends, interest,				
	ŀ	and other similar amo	ounts) .	▶	2,070	0	0	2,070
	4	Income from investmen	nt of tax-exempt be	ond proceeds ►	0	0	0	
	5	Royalties		•	0	0	0	
	_	_	(ı) Real	(ii) Personal				
	6a	Gross rents	0					
	b	Less. rental expenses	0		•			
	C	Rental income or (loss) Net rental income or	(1000)	0				
	d 7a	Gross amount from sales of	(i) Securities	(ii) Other	0	0	0	
	'	assets other than inventory	0	 				
	ь	Less cost or other basis			į			
		and sales expenses .	l .	o				
	С	Gain or (loss)	0	+				
	d	Net gain or (loss) .		▶	0	0	0	(
une	8a	Gross income from fu						
Other Revenue		events (not including \$ of contributions report See Part IV, line 18 .	ed on line 1c).		i			
the	ь	Less: direct expenses	_					
0	6	Net income or (loss) f			0	ŀ	0	<u> </u>
		Gross income from gasee Part IV, line 19	aming activities.					
	ь	Less: direct expenses						
	C	Net income or (loss) f			0	0	0	(
	4	Gross sales of ir				Ť		
		returns and allowanc	es a	37,263				
	b	Less: cost of goods s	sold b	13,483				
	С	Net income or (loss) t			23,780	23,780	0	(
		Miscellaneous F		Business Code				
	11a			900099	6,046,592	6,046,592	0	
	b	Misc administrative s	ervices	900099	339	339	0	<u> </u>
	C	All address serves						
	d	All other revenue Total. Add lines 11a-			0.010.005			
	12	Total revenue See			6,046,931			

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	is must complete co	lumn (A).
	Check if Schedule O contains a respon-	se or note to any lir	ne in this Part IX .	· · · · · ·	🗆
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	13,000	13,000		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members .	0	0		
5	Compensation of current officers, directors, trustees, and key employees	64 120	53,027	11 102	
6	Compensation not included above, to disqualified	64,130	53,021	11,103	
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				_
7	Other salaries and wages	497,048	0 410,992	0_ 86,056	<u>C</u>
8	Pension plan accruals and contributions (include	497,046	410,992	80,036	
	section 401(k) and 403(b) employer contributions)	44,304	36,633	7,671	C
9	Other employee benefits	95,991	79,372	16,619	
10	Payroll taxes	36,920	30,527	6,393	C
11	Fees for services (non-employees):	·			
а	Management	0	0	0	
b	Legal	410	404	6	
C	Accounting	17,150	13,869	3,281	С
d	Lobbying	0	0	0	<u>C</u>
e	Professional fundraising services. See Part IV, line 17	0			
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column		0	0	
9	(A) amount, list line 11g expenses on Schedule O.)	9,996	8,043	1,923	ſ
12	Advertising and promotion	9,045	8,432	613	
13	Office expenses	59,897	53,608	6,289	
14	Information technology	8,551	6,821	1,730	C
15	Royalties	321,359	321,359	0	
16	Occupancy	43,392	34,681	8,711	
17	Travel	44,095	42,733	1,362	(
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	o	C
19	Conferences, conventions, and meetings .	15,929	5,603	10,326	(
20	Interest	0	. 0	0	(
21	Payments to affiliates	. 0	0	0	
22	Depreciation, depletion, and amortization .	0	0	0	C
23	Insurance	10,093	8,177	1,916	
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.)				<u> </u>
а	Reimbursed salary costs	6,046,592	0	6,046,592	(
b					
c d					
u e	All other expenses	0	0	0	
25	Total functional expenses. Add lines 1 through 24e	7,337,872	1,127,281	6,210,591	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	1,007,072	1,127,201	0,210,031	

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	ırt X		🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	635,760	1	543,983
	2	Savings and temporary cash investments	175,000	2	135,000
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	315,252	4	416,241
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
S	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0		0
As	8	Inventories for sale or use	7,296		7,319
	9	Prepaid expenses and deferred charges	305,327	9	409,912
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 14,193			
	b	Less: accumulated depreciation 10b 14,193	0	10c	0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	1,474,635	16	1,512,455
	17	Accounts payable and accrued expenses	664,015	17	651,930
	18	Grants payable	0	_	0
	19	Deferred revenue	690,659		609,078
	20	Tax-exempt bond liabilities	. 0		0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
Lia	23	Secured mortgages and notes payable to unrelated third parties	0	_	0
	24	Unsecured notes and loans payable to unrelated third parties	0		0
	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	0	25	0
	26	Total liabilities. Add lines 17 through 25	1,354,674	26	1,261,008
l sec		Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	(40,849)	27	69,635
Bal	28	Temporarily restricted net assets	160,810	28	181,812
Þ	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund .		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	119,961		251,447
	34	Total liabilities and net assets/fund balances	1,474,635	34	1,512,455
					Form 990 (2015)

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,46	9,358
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,33	7,872
3	Revenue less expenses. Subtract line 2 from line 1	3		13	1,486
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		11	9,961
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule 0)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		25	1,447
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u>,</u>	1	
1	Accounting method used to prepare the Form 990. Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both:		2a		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	√	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	ed on a			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for of the audit, review, or compilation of its financial statements and selection of an independent according to the compilation of its financial statements.		2c	1	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O	kplain in			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		3a		-
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			Forn	n 990	(2015)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-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

	organization answered "Yes see separate instructions), tl	s," on Form 990, Part IV, line 5 (Proxy	Tax) (see separate	e instructions) or Form 990	-EZ, Part V, line 35c (Proxy
	ection 501(c)(4), (5), or (6) orga				
	of organization	anizations Complete Fait III.		Employer ider	ntification number
Nebras	ska Municipal Power Pool				47-0575470
Part		e organization is exempt und	er section 501(c		
1		the organization's direct and indire			<u></u>
2				-	;
3	Volunteer hours				
Part	I-B Complete if the	e organization is exempt und	er section 501(c	c)(3).	
1	Enter the amount of any	excise tax incurred by the organiza	tion under section	n 4955 ▶ \$, , , , , , , , , , , , , , , , , , , ,
2	Enter the amount of any	excise tax incurred by organization	managers under	section 4955 ▶ \$)
3	If the organization incurre	ed a section 4955 tax, did it file Foi	m 4720 for this ye	ear?	Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt und			(c)(3).
1	Enter the amount direct	ly expended by the filing organiz	ation for section	527 exempt function	
				· · · · · · · · · · · · · · · · · · ·	
2		filing organization's funds contribution	uted to other org	anizations for section	
3			 Enter here and	on Form 1100 DOI	
3		expenditures. Add lines 1 and 2.	Enter here and		
4	Did the filing organization	file Form 1120-POL for this year'			Yes No
5	Enter the names, address	ses and employer identification nur	nber (EIN) of all se	ection 527 political organi	zations to which the filing
		ents. For each organization listed,			
		ontributions received that were pro-			
	as a separate segregated	fund or a political action committe	e (PAC). If addition	nal space is needed, provi	ide information in Part IV.
-	(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-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

	,					
	II-A Complete if the organization section 501(h)).	-		, , , ,	•	
A (theck ► ☐ if the filing organization beloname, address, EIN, expension					up member's
3 (check 🕨 🗌 if the filing organization che	cked box A	and "limited cont	rol" provisions a	apply.	
	Limits on Lobby				(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amounts	paid or incurred.))	organization's totals	group totals
1a	Total lobbying expenditures to influence	oublic opinion	(grass roots lobby	ıng)		
b	Total lobbying expenditures to influence a	a legislative bo	dy (direct lobbying	g)		
c	Total lobbying expenditures (add lines 1a	and 1b) .				
c	Other exempt purpose expenditures					_
e	Total exempt purpose expenditures (add	lines 1c and 1	d)			_
f	Lobbying nontaxable amount. Enter t					
	columns.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	t is:		
	Not over \$500,000	20% of the an	nount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	· · · · · · · · · · · · · · · · · · ·	10% of the excess			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000.				
Ç	Grassroots nontaxable amount (enter 259	% of line 1f)				
ŀ	Subtract line 1g from line 1a. If zero or les	ss, enter -0-				
i	Subtract line 1f from line 1c If zero or les	s, enter -0-				
j	If there is an amount other than zero	on either line	1h or line 1i, did	the organization	file Form 4720	
	reporting section 4911 tax for this year?	• •				Yes No
	(Some organizations that made a sec See the	tion 501(h) ele separate inst	ructions for lines	e to complete all 2a through 2f.)	of the five column	ns below.
	Lobbying	Expenditures	During 4-Year Av	eraging Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2 a	Lobbying nontaxable amount	-				
t	Lobbying ceiling amount (150% of line 2a, column (e))					
C	Total lobbying expenditures					
C	Grassroots nontaxable amount					
•	Grassroots ceiling amount (150% of line 2d, column (e))	710				
f	Grassroots lobbying expenditures					

Part II-B

	(election under section 501(h)).			
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(6	a) ⊤	(b)
desci	iption of the lobbying activity.	Yes	No	Amount
1	During 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			
а	Volunteers?	:		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u> </u>	
С	Media advertisements?			
d	Mailings to members, legislators, or the public?			-
е	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?		L	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	1/51	05.00	otion
ган	501(c)(6).)(U), '	01 36	Ction
	00.(0)(0)			Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1 /
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 1
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 🗸
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			ection
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C	R (b)	Par	t III-A, line 3, is
	answered "Yes."			
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of		
а	Current year		2a	
b	Carryover from last year		2b	
С	Total		2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	yıng		
_	and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5	
Par			4\. D-	-4-11-A-1
	le the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated gro instructions), and Part II-B, line 1 Also, complete this part for any additional information	up iis	ii); Pa	rt II-A, IInes I and
2 (300	instructions, and rare inst, line in Also, complete this part for any additional information			

_			-	

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

Schedule C (Fo	rm 990 or 990-EZ) 2015	Page 4
Part IV	Supplemental Information (continued)	
		·····

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Nebra:	ska Municipal Power Pool		47-0575470
Pai	t I Organizations Maintaining Donor Adv		
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets I	held in donor advised
	funds are the organization's property, subject to the	ne organization's exclusive legal contr	rol? Yes 🗌 No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that gra	ant funds can be used
	only for charitable purposes and not for the bene	fit of the donor or donor advisor, or	for any other purpose
	conferring impermissible private benefit?		· · · · ·
Par	t II Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7	•
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	Preservation of land for public use (e.g., recrea	tion or education) 🔲 Preservation o	of a historically important land area
	☐ Protection of natural habitat	☐ Preservation of	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contributi	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easemen	ts	2b
С	Number of conservation easements on a certified		
d	Number of conservation easements included in		
			2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or ter	minated by the organization during the
	tax year ►	-	-
4	Number of states where property subject to conse	rvation easement is located >	
5	Does the organization have a written policy re	garding the periodic monitoring, in:	spection, handling of
	violations, and enforcement of the conservation ea	asements it holds?	· · · · · · · Yes · No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year
	•		
7	Amount of expenses incurred in monitoring, inspecti	ng, handling of violations, and enforcing	conservation easements during the year
	▶\$		
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · · Tes 🗌 No
9	In Part XIII, describe how the organization reports	conservation easements in its revenu	e and expense statement, and
	balance sheet, and include, if applicable, the text		
	organization's accounting for conservation easem	ents	
Par	Organizations Maintaining Collection	s of Art, Historical Treasures, o	r Other Similar Assets.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 8).
1a	If the organization elected, as permitted under SF	AS 116 (ASC 958), not to report in it	s revenue statement and balance sheet
	works of art, historical treasures, or other simila	r assets held for public exhibition, e	ducation, or research in furtherance of
	public service, provide, in Part XIII, the text of the	footnote to its financial statements that	at describes these items.
b	If the organization elected, as permitted under 5	SFAS 116 (ASC 958), to report in its	revenue statement and balance shee
	works of art, historical treasures, or other simila		
	public service, provide the following amounts related		
	(i) Revenue included on Form 990, Part VIII, line 1	_	> \$
	(ii) Assets included in Form 990, Part X		\$ ▶ \$
2	If the organization received or held works of art		ar assets for financial dain, provide the
_	following amounts required to be reported under S		<u>-</u> . ,
а	Revenue included on Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·	▶ \$
	Assets included in Form 990. Part X		• • • • • • • • • • • • • • • • • • •

Part	Organizations Maintaining								
3	Using the organization's acquisition, collection items (check all that apply).	accession, and oth	ner records,	check	any of the	follow	ring that are a si	gnificant	use of its
а	☐ Public exhibition		d 🔲 !	Loan	or exchange	progr	ams		
b	☐ Scholarly research		e 🗆 '	Other					
С	☐ Preservation for future generations								
4	Provide a description of the organizat	tion's collections a	nd explain h	ow th	ey further t	he org	anızatıon's exem	pt purpo	se in Part
5	During the year, did the organization assets to be sold to raise funds rather							_	s 🗌 No
Part							-		
	Complete if the organization 990, Part X, line 21.								Form
1a	Is the organization an agent, trustee included on Form 990, Part X?					ons or	other assets no		s 🗌 No
b	If "Yes," explain the arrangement in P	art XIII and comple	te the follow	ıng ta	ble.		Ar	nount	
С	Beginning balance					1c			
d						1d	 		
e	Distributions during the year .					1e			
f	Ending balance					1f			
2a	Did the organization include an amount			for es	scrow or cu			? 🔲 Ye :	s 🗌 No
	If "Yes," explain the arrangement in P								
Par			<u> </u>		. =/				·
	Complete if the organization	answered "Yes"	on Form 9	90, P	art IV, line	10.			
		(a) Current year	(b) Prior ye		(c) Two years		(d) Three years back	(e) Four	years back
1a	Beginning of year balance	160,810	14	4,540	1:	38,127	129,190)	114,133
b	Contributions	34,002		6,270		11,413	17,637		15,057
C	Net investment earnings, gains, and			,					
	losses	l ol		0		ol	(0
d	Grants or scholarships	(13,000)		0		5,000)	(8,700		0
e	Other expenditures for facilities and	.(,							
	programs	0		o		o	(0
f	Administrative expenses	0		0		0			0
g	End of year balance	181,812	16	0,810	1.	44,540	138,127	,	129,190
2	Provide the estimated percentage of t								
a	Board designated or quasi-endowme		0%		, · · · · · · · · · · · · · · · · ·	,			
b	Permanent endowment ▶	0%	· -						
C	Temporarily restricted endowment ▶	100%							
_	The percentages on lines 2a, 2b, and		00%.						
За	Are there endowment funds not in th			on tha	it are held a	and ad	ministered for th	е	
	organization by.		_					Ŀ	Yes No
	(i) unrelated organizations							3a(i)	1
	(ii) related organizations							3a(ii)	√
b	If "Yes" on line 3a(ii), are the related of		as required	on Sc	hedule R?			3b	
4	Describe in Part XIII the intended uses	•	•						
Part	VI Land, Buildings, and Equip	ment.							
	Complete if the organization		on Form 9	90, F	art IV, line	11a.	See Form 990,	Part X, I	ine 10.
	Description of property	(a) Cost or oth	her basis (b)	Cost o	r other basis ther)	(c)	Accumulated epreciation	(d) Book	
1a	Land		0		0				0
b	Buildings		0		0		0		0
c	Leasehold improvements .		0		0		0		0
d	Equipment		0		14,193		14,193	•	0
e	Other		- 0		0		0		0
	Add lines 1a through 1e. (Column (d) r	nust equal Form 99		olumn		c.) .	▶		0
	<u> </u>	·A·		-	•	_			

	Complete if the organization answ	vered "Yes" on Fo	orm 990, Part IV, lir	e 11b. See Form	990, Part X, line 12
	(a) Description of security or category (including name of security)		(b) Book value		thod of valuation I-of-year market value
(1) Financial	derivatives				
	eld equity interests				
	· · ·				
(A)			•		
(B)			-		
(C)		**			
(D)			<u> </u>		
(E)					
(F)			· 		
(G)			-		
(H)			-		
	o) must equal Form 990, Part X, col. (B) line 12.) ▶		-		
Part VIII	Investments – Program Related			I .	.
	Complete if the organization answ		orm 990 Part IV lin	e 11c. See Form	990 Part X line 13
	(a) Description of investment	relea les ellle	(b) Book value	•	thod of valuation
	(a) Description of investment		(b) Book Value		l-of-year market value
(1)					
(2)					
(3)					
(4)					<u></u>
(5)					
(6)					
_(7)	· · · · · · · · · · · · · · · · · · ·				
(8)					
(9)					
	o) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization ansv		orm 990, Part IV, lir	<u>ne 11d. See Form</u>	
	(a)	Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)		· · · · · · · · · · · · · · · · · · ·			
	nn (b) must equal Form 990, Part X, co	l. (B) line 15)	<i>.</i>	<i>.</i> ▶	
Part X	Other Liabilities.				
	Complete if the organization answ	vered "Yes" on Fo	orm 990, Part IV, Iır	ne 11e or 11f. Se	e Form 990, Part X,
	line 25		,		
1.	(a) Description of liability	(b) Book value			
(1) Federal in	come taxes				
(2)					
(3)					
(4)	·				
(5)					
(6)					
(7)					
(8)					
(9)					
	o) must equal Form 990, Part X, col. (B) line 25.) 🕨				
	uncertain tax positions. In Part XIII, provid				
organization's	s liability for uncertain tax positions under	rin 48 (ASC 740). Ch	neck here it the text of t	tne tootnote has bee	en provided in Part XIII 🔃

Part	Complete if the organization answered "Yes" on Form 990,		-	Return.	
1	Total revenue, gains, and other support per audited financial statements			1	1 420 240
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				1,436,249
	Net unrealized gains (losses) on investments	2a	}		
a b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	12.402		
e	And the an On Abrahamb Out		13,483		10.400
3	Subtract line 2e from line 1	•		2e 3	13,483
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i ·		3	1,422,766
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)		C 04C F02		
c			6,046,592	4c	C 04C F03
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		• • • • •	5	6,046,592
Part					7,469,358
rait	Complete if the organization answered "Yes" on Form 990,			n netui	11.
1	Total expenses and losses per audited financial statements			1	1,304,763
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				1,00 1,700
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
C	Other losses	2c		1	
d	Other (Describe in Part XIII)	2d	13.483		
e	Add lines 2a through 2d		13,403	2e	13,483
3	Subtract line 2e from line 1			3	1,291,280
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.				1,201,200
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	6,046,592		
c	Add lines 4a and 4b			4c	6,046,592
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	7,337,872
	XIII Supplemental Information.	 			1,331,612
	le the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	d 4 P	art IV lines 1b and 2b	· Part V	line 4 Part X line
	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part				
	line 4. The temporarily restricted endowment funds held by NMPP are to be u		-		
rait v,	Title 4 The temporarily restricted endowment funds held by NWFF are to be d	iseu iu	r energy research & de	velopinei	it (EKDF) biolects
Mombo	er communities may submit a request for a grant for a project that has the pote	ential t	a raduca anaray usaga	or impro	uo oporou
Membe	si communities may submit a request for a grant for a project that has the pote	eriuai u	o reduce energy usage	or impro	ve energy
officio	ncies The ERDF committee reviews all requests and makes the decision to ap	n n n n n n	or refuse the request		
emciei	icles The ERDF confinitee reviews an requests and makes the decision to ap	prove	or refuse the request		••
Dort VI	9 VII line 2d. Other includes part of goods cold of \$12,402 which is remarked				٠. د.
Pail XI	& XII, line 2d Other includes cost of goods sold of \$13,483 which is reported	as pro	igram/project expense	in the aud)i(
Part XI	& XII, Line 4b Other includes \$6,046,592 in payroll & benefit costs incurred b	<u>y NMP</u>	P for employees assig	ned to the	performance of
manag	ement & administrative services for three other entities. The reimbursement of	of these	costs is reflected in t	he lines n	oted
See Sc	hedule L, Part IV and Schedule O for further explanation				
	•••••				

Schedùle D (For	rm 990) 2015	
Part XIII	Supplemental Information (continued)	

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

2015

OMB No 1545-0047

▶ Attach to Form 990.

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

Open to Public Inspection

Employer identification number

Nebrask	Nebraska Municipal Power Pool	on Grants and	Assistance					47-0575470
-	Does the organization maintain records to substantiate the arthe selection criteria used to award the grants or assistance?	n records to subs	stantiate the amou	int of the grants or	assistance, the gi	rantees' eligibility	he amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and nce?	e, and
2	Sesc	zation's procedur	es for monitoring	the use of grant fu	nds in the United	States.	if the organization and if	weed "Vee" on Form
Par II		sistance to bo	that received mo	ations and born ore than \$5,000.	Part II can be do	uplicated if addit	Grants and Otner Assistance to Domestic Organizations and Domestic Governments. Complete it the Organization ariswered lies of Point 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	
1 (a)	(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) C	(1) City of Aspen 130 S Galena Aspen, CO 81611	84-6000563	N/A	\$13,000	0\$	N/A	N/A	Dist Sys Loss Study
(2)								
6								
(4)								
(2)								
(9)								
(3)								
(8)								
6)								
(10)								
(11)								
(12)								
9 6	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	501(c)(3) and gov ganizations listed	vernment organiza	tions listed in the	ine 1 table			. •
For Pa	For Paperwork Reduction Act Notice, see the Instructions for Form	ee the Instruction	s for Form 990.		Ca	Cat No 50055P		Schedule I (Form 990) (2015)

Page 2

Schedule I (Form 990) (2015)

Part III	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.	mestic Individual	als. Complete if the	organization answe	ered "Yes" on Form 990,	Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
2						
m ⁻						
4						
z,						
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information r	equired in Part I, lin	e 2, Part III, column	(b), and any other additi	onal information.
art 1 Line	eart 1 Line 2 - The following describes NMPP's monitoring of the use of grant funds	g of the use of gran	t funds.			
he Energy	he Energy Research and Development Fund (ERDF) allows individual NMPP members who contribute to the ERDF fund to apply for grants to help finance their energy-innovative projects.	ws individual NMPF	members who contrib	oute to the ERDF fund	o apply for grants to help fin	ance their energy-innovative projects
MPP men	MPP members submit grant requests through an application process which is then presented to the ERDF Managing Committee Is composed of nine	ation process which	ı ıs then presented to t	he ERDF Managing Co	mmittee The ERDF Managir	g Committee is composed of nine
MMPP men	MMPP members who select the projects to be funded. When a project is selected to be funded by the ERDF Managing Committee, a letter is provided to the recipient documenting the terms.	hen a project is sele	cted to be funded by t	he ERDF Managing Co	mmittee, a letter is provided	o the recipient documenting the terms
of the gran	of the grant award including completion of agreed upon deliverables and timeline for completion. NMPP staff follow up periodically by contacting the grantee to determine if the project is	deliverables and tim	eline for completion	NMPP staff follow up p	eriodically by contacting the	grantee to determine if the project is
on schedul	n schedule and progressing in accordance with the documented terms. Grant payments are delivered upon completion of required deliverables and contingencies. Upon completion of	umented terms Gr	ant payments are deliv	ered upon completion	of required deliverables and	contingencies Upon completion of
he project,	he project, the grantee produces a final report for the Managing Committee and NMPP management	inaging Committee	and NMPP managemer	ıt		
1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				

SCHÈDULE J (Form 990)

Compensation Information

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

OMB No. 1545-0047

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

► Attach to Form 990. Department of the Treasury ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service

Open to Public Inspection

Name of the organization

Employer identification number

Nebraska Municipal Power Pool 47-0575470 Part I Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed 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 Payments for business use of personal residence ☐ Travel for companions ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef) ☐ Discretionary spending account **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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract ✓ Independent compensation consultant ✓ Compensation survey or study 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. a Receive a severance payment or change-of-control payment? 4a **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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 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 The organization? 6b 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 not described on lines 5 and 6? If "Yes," describe in Part III 7 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 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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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	200	(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	- All Congress of the A	a, applicable coluin	ו (ט) מווט (ב) מווטטוווג	s lor triat individual.
(A) Name and Title		(i) Base compensation	(II) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
Robert Poehling, Executive	€ €	204,560	0	0	0	20,387	224,947	0
Jamie L. Johnson, Director of 2 Finance & Accounting	€ €	160,220	5,000	0	12,185	2,192	179,597	Ō
J Gary Stauffer, Executive	E E	139,357	0	9,561	13,136	13,771	175.825	0
Tim Sutherland, Director of 4 Wholesale Electric Operations	E E	168,165	0	0	15,573	17,585	201,323	0
5 Chris Dibbern, General Counsel	E E	150,595	0	0	14,237	21,015	185,847	0
John Harms, Director of Risk 6 Management & Compliance	(E)	143,678	0	0	13,406	20,907	177,991	0
Brad Hans, Asst Director of 7 Wholesale Electric Operations	3 E	148,875	2,000	0	14,092	20,973	185,940	0
Sarah Jones, Director of 8 Enterprise Business Support	3 (3)	129,164	0	0	12,167	20,748	162,079	Ō
6	(E)							
10	€ €							
11	E E							
12	€ €							
13	€ €							
14	E E							
15	€ €							
16	E							

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015 Part III Supplemental Information

ured 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
--

Part I Line 3
In accordance with established policy, the compensation for the Executive Director is reviewed and established annually by the Joint Operating Committee which consists
of officers of NMPP and the officers of the other three coalition entities. Position comparability data supplied to them by the Director of Enterprise Business Support is reviewed and used
to establish a pay range for the Executive Director position. The data is taken from independent local and national compensation and industry surveys as well as an independent
compensation consultant. The annual compensation is then selected and approved within the established pay range
Part I Line 6a
NMPP has a profit sharing program which covers all full-time and regular part-time employees, except the Executive Director. Any profit sharing contribution is based on the audited net
revenues (ie net income) of the combined net revenues of the NMPP coalition of companies in excess of budgeted net revenues, as approved by the individual Boards of Directors of the
respective companies for the fiscal year. Any bonus paid to the Executive Director is determined annually by officers of NMPP and the officers of the other three coalition entities, for which
the NMPP Executive Director also serves as Executive Director No payments or accruals were made under the terms of the profit sharing program for the year reported The program was
suspended indefinitely by the Joint Operating Committee starting with the Fiscal Year ended March 31, 2016
Part I Line 7
NMPP's annual payroll budget includes discretionary recognition pay which managers may award to employees based on performance. Written requests including the reason for the
award must be approved by the Executive Director and are subject to an annual cap of 5% of an employee's earnings
Part II Line 3
J Gary Stauffer resigned from his position as Executive Director and was replaced by Robert Poehling During the transition period, both individuals were employed
Schedule J (Form 990) 2015

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number Nebraska Municipal Power Pool 47-0575470

1	(a) Name of disqualified person	(b) Relationship between disqualified person and	(c) Description of transaction	(d) Cor	rected
٠.	(a) Name of disqualified person	organization	(c) bescription of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2		irred by the organization managers or disqual		•	

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fron	an to or the zation?	(e) Onginal principal amount	(f) Balance due	(g) In d	lefault?		ard or	(i) Wi agreei	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)						_						
Total					. •	\$						

Part III **Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)		_	·	
(6)				
(7)				
(8)				
(9)			-	
(10)				

Schedule L (Form 990 or 990-EZ) 2015				F	Page 2
Part IV Business Transactions Involving Complete if the organization and	ng Interested Persons. swered "Yes" on Form 990), Part IV, line 28a, 2	28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
				Yes	No
(1) The officer employees & highest	Perform	6,046,592	Reimbursement of		✓
(2) compensated employees on Form 990,	management,		payroll and		
(3) Part VII & other employees of NMPP	administration &		employee		
(4) perform services for 3 other entities	operational		benefits		
(5) that pay NMPP as common paying agent	services				
(6) for their services					
(7)					
(8)					
(9)					
(10)					
Part V Supplemental Information Provide additional information for	or responses to questions	on Schedule L (see	instructions).		
Part II As part of NMPP's benefit package for for computer or software not to exceed \$2,500 nor repaid through payroll deductions over a special amount immediately becomes due and payable currently no outstanding loans Part IV The business transactions are reported.	95% of the purchase price fied time period not to exce in full All loan agreement	Loans are made un ed 36 months Upor s must be approved	der a standard written agreemen n termination of employment the by NMPP's Executive Director T	t and are	<u></u>
					·
		••••			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

20**15**

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Nebraska Municipal Power Pool 47-0575470 Part I, Line 5, Part V, Line 2a and Part VII, Line 2 The Nebraska Municipal Power Pool (NMPP) provides personnel to a coalition of entities referred to by the trade name of NMPP Energy This coalition consists of NMPP, Municipal Energy Agency of Nebraska (MEAN), National Public Gas Agency (NPGA), and Public Alliance for Community Energy (ACE) This coalition of entities provides electric and natural gas services to member and nonmember participants while sharing facilities and personnel. The allocation of staff compensation is based on estimated time incurred by each staff member in the support of the activites of each entity. This allocation is reviewed and approved annually by Board representatives from each of the entities NMPP is reimbursed from the other coalition members as payroll expense is incurred. None of the full-time employees of NMPP have 100% of their time allocated to NMPP operations Part V, Line 3a NMPP did not engage in any activity that would be identified as an unrelated trade or business as defined by IRS Pub. 598. Any product sold by NMPP is in support of the activities described in Part III, Statement of Program Services and further described in Part III, Lines 4a and 4b Part V, Lines 6a and 6b NMPP has annual gross receipts that are normally greater than \$100,000. NMPP does not solicit contributions from public sources to support its activities. Member communities pay annual membership fees. Members pay for those services provided by NMPP as described in Part III. Members may make voluntary contributions to the Energy Research and Development Fund, as shown on Schedule D, Part V Contributions received are from tax-exempt communities Part VI, Line 6 Each member organization of NMPP has the right to participate in the governance of the organization through the Members' Council and to receive a distribution of any assets in the event of dissolution of the organization. The members elect representatives to serve on the NMPP Board of Directors

Schedule O (Form 990 or 990-EZ) (2015)	Page Z
Name of the organization	Employer identification number 47-0575470
Nebraska Municipal Power Pool	47-03/34/0
Part VI, Line 7a	
The Members' Council elects 16 representatives to serve on the Board of Directors Members are divided by	by population class for
voting purposes as follows	
communities with populations of 5,000 or less nominate eight (8) Directors,	
communities with populations of 5,001 to 20,000 nominate four (4) Directors, and	••••••
communities with populations with 20,001 and above nominate four (4) Directors	
Each Director has the same voting rights regardless of the population class they represent	
	·
Part VI, Line 11a and 11b	
The Form 990 is completed internally with assistance related to specific sections provided by tax specialis	ts from the accounting firm that
performs the organization's independent audit when needed. The draft Form 990 and required schedules a	are sent to and reviewed by the
NMPP Officers prior to finalizing and filing of the Form 990 and required schedules. The finalized docume	nt is sent to and reviewed with the
NMPP Board of Directors at the next scheduled Board meeting after completion and filing of the Form 990	and required schedules
Part VI, Line 12c	
Annually, each officer and director is required to complete a questionnaire as to any direct or indirect busi	ness relationship
or potential conflict of interest that should be brought to the attention of the Board of Directors for review	and resolution Should an issue
arise, the director would be required to abstain on any vote relating to the issue of potential conflict	
Part VI, Line 15a	
In accordance with established policy, the compensation for the Executive Director is reviewed and establ	ished annually by the Joint
Operating Committee which consists of officers of NMPP and the officers of the other three coalition entiti	es Position comparability
data supplied to them by the Director of Enterprise Business Support is reviewed and used to establish a j	
Director position The data is taken from independent local and national compensation and industry surve	eys as well as an independent
compensation consultant The annual compensation is then selected and approved within the established	d pay range

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Inspection

Employer identification number

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization ► 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.

Nebraska Municipal Power Pool 47-0575470 Part VI, Line 15b The Executive Director is responsible for setting the compensation for NMPP employees The Executive Director reviews position comparability data supplied by the Director of Enterprise Business Support. The data is taken from local and national compensation and industry surveys and databases as well as an independent compensation consultant Part VI, Line 19 The organization's governing documents, conflict of interest policy and financial statements are available to the public upon request NMPP's annual report and the annual audited financial statements are posted on NMPP's website Part VII, Section A, Column (B) - Average hours per week Directors and Director Officers - estimated time to review meeting materials and attend scheduled meetings Employee Officers and Employees - estimated time per annual "hours worked" surveys completed by each employee. The "hours worked" surveys list the employees key job responsibilities and the percent of time the employee performs those responsibilities for each of the four NMPP Energy coalition entities as previously identified Part VII, Section A, Columns (D), (E), and (F) Directors do not receive compensation from NMPP and thus, no W-2's are issued All employees are paid by NMPP, with all reportable compensation reported on NMPP's W-2's. The employees do not receive compensation from any other coalition entity. As previously stated, NMPP provides staff that performs administrative and operational services for the other three NMPP Energy coalition entities. These entities reimburse NMPP for the allocated cost of the employees providing services to them based on the "hours worked" surveys previously described The following are "officers" as per Form 990 instructions The compensation reported in Part VII, Section A, Item D is the amount reported on NMPP's W-2's A portion of these salaries were allocated, as previously described, to the other three NMPP Energy coalition entities J. Gary Stauffer resigned from his position as Executive Director and was replaced by Robert Poehling. During the transition period both individuals were employed by NMPP

Schedule O (Form 990 or 990-EZ) (2015)						Page
Name of the organization					Employer identification number	
Nebraska Municipal Power Pool					47-0575470	
Part VII, Section A, Columns (D), (E),	and (F), contin	iued				-
Jamie L. Johnson serves as Director	of Finance & A	Accounting	for NMPP and	d for each of the fo	ellowing entities	-
Municipal Energy Agency of Nebra	ska (MEAN), a p	political sub	division of th	e State of Nebrask	a, FED ID #47-0641284	
National Public Gas Agency (NGPA), formed unde	r the Interloc	cal Cooperati	on Act of Nebrask	a, FED ID #47-0751794	
Public Alliance for Community Ene	rgy (ACE), form	ned under th	e Interlocal C	Cooperation Act of	Nebraska, FED ID #47-0810044	
Andrew Ross served as the Director	of Retail Utility	Services ar	nd Member R	elations for NMPF	and MEAN (described above)	
Time Allocations	NMPP	MEAN	NPGA	ACE		
Stauffer	5 0%	68 5%	16 0%	10 5%		
Poehling	5 0%	68 5%	16 0%	10 5%		
Johnson	5 0%	64 0%	17 0%	14 0%		
Ross	40 0%	60 0%	0 0%	0 0%		
						.
Of the five employees listed as "High	nly Compensate	ed Employee	es", only the	following employe	es had time allocated to NMPP	
Dibbern, General Counsel	2 0%	77 5%	10 25%	10 25%		
Jones, Dir of Ent Bus Support	12 53%	63 76%	11 64%	12 07%		
Part VII, Section A, Column (A), Line	s 11-13					
		1, 2016 due t	o job change	es & death of a Dir	ector during the year. The positions were	fillec
•••••						