

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Inter	nal Rever	ue Service	► Information ab	out Form 990 and	its instructions is at	www.irs.go	ov/form990)	Inspecti	on	
A	For the	2016 caler	ndar year, or tax year beginn	ning	, 2016, a	nd ending			, 20		
В	Check if	applicable	C Name of organization LANE E	LECTRIC COOPER	RATIVE, INC			D Employer i	dentification nu	mber	
	Address		Doing business as					g	3-0209125		
	Name cl	ľ	Number and street (or P O box	of mail is not delivered	to street address)	Room/suite		E Telephone			
\equiv	Initial ref	, i	787 BAILEY HILL RD		·			541 484 1151			
		rn/terminated	City or town, state or province,	country, and ZIP or for	eign postal code				11 101 1131		
H	Amende		EUGENE OR 97402	_	- · · · · · · · · · · · · · · · · · · ·			G Gross recei	inte \$ 2.4	,858,624	
H		•	F Name and address of principal	officer NAATTUEW	LMICHEL		Lives to the or or		ordinates? Yes		
	Applicat	, , , , , ,	·		J MIICHEL				cluded? Yes	_	
_			787 BAILEY HILL RD EUGE		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				ciuded / 🗀 Yes t. (see instructior		
<u> </u>		mpt status		1(c) (12) ◀ (insert	no) 1 4947(a)(1) or	<u> 527</u>	i			13)	
<u> </u>	Website		v laneelectric com					exemption nui			
				sociation ☐ Other ►	L Yea	ir of formation	1939	M State of	legal domicile	OR	
12	art I	Summa									
	1	-	scribe the organization's n								
õ		PROVIDE	ELECTRIC SERVICE TO AP	PROXIMATELY 10,	000 MEMBERS						
'nai											
Š	2		is box ▶□ if the organizat		-	•		25% of its	net assets.		
Activities & Governance	3		of voting members of the g					3		7	
න් ග	4		of independent voting mem					4		7	
Ë	5	Total num	nber of individuals employe	ed in calendar yea	r 2016 (Part V, line	2a)		5		48	
ξį	6	Total num	nber of volunteers (estimate	e if necessary) .				6			
Ac	7a	Total unre	elated business revenue fro	om Part VIII, colun	nn (C), line 12			7a			
	b	Net unrela	ated business taxable inco	me from Form 99	0-T, line 34	<u> </u>	<u></u>	7b			
							Prior Ye	ar	Current Ye	ar	
Φ	8	Contribut	ions and grants (Part VIII, I	line 1h) . 📗 . 🕟	RECEIVED	. ! 🗀		0			
Ž	9	Program :	service revenue (Part VIII, I	line 2g)		7 <u>0</u>	22	,955,997	24	,626,515	
Revenue	10		nt income (Part VIII, colum		nd\7d)1 .m .2047.			4,380		33,719	
Œ	11		enue (Part VIII, column (A),			280-83	· · · · ·	190,869		173,485	
	12		enue-add lines 8 through 1				23	,151,246	24	,833,719	
	13		nd similar amounts paid (Pa					5,089		18,559	
) (14		paid to or for members (Pa				1	,015,473	2	,144,024	
&⊎ 8	15	-	other compensation, employ		•	5-10)	'	543,850		564,562	
	16a		nal fundraising fees (Part I			· · · · · ·		343,030		304,302	
⇒ E	b		draising expenses (Part IX,			· ·					
- M	17		penses (Part IX, column (A)	• •				405 704		012.541	
	18		enses. Add lines 13–17 (m			√ 		,405,734		,913,541	
	40	•	·		• •	' · ├─	22	,970,146	24	,640,686	
	19	Revenue	less expenses. Subtract lir	ie io iroin line iz	<u> </u>	· · ·	unning of Cu	181,100	End of Yea	193,033	
		T-1-1	-t- (Dt V 1 10)				-				
多sea	20		ets (Part X, line 16) .			· ·		,127,900		,826,929	
4	21		ilities (Part X, line 26)			· ·		,790,369		<u>,141,953</u>	
<u> </u>	22		s or fund balances. Subtra	act line 21 from lin	e 20		25	,337,531	27	<u>,684,97</u> 6	
	irt II		ure Block								
Un	der pena	ities of perjur	ry, I declare that I have examined	this return, including a	companying schedules	and stateme	nts, and to ti	ne best of my	knowledge and	belief, it is	
- 170	e, correc	t, and comple	ete Declaration of preparer (other	than officer) is baseout	on all information of which	on preparer na	s any knowi	eage 			
			<u> </u>	MUS							
Sig		Signa	ature of officer		A /		Da	le _/2/	_		
He	re	<u> </u>	Natt Michel,	General 1	Manager			0/0//			
_		Туре	or print name and title		4						
Pa	id	Print/Typ	pe preparer's name	Preparer's signat	ure	Date		Check	PTIN		
		ا ي						self-employ			
	epare		ame ►				Firm	's EIN ▶			
US	e On	,	ddress ▶					ne no			
Ma	the II		this return with the prepa	rer shown above?	(see instructions)			110	□ Voc		

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2016)

Cat. No 11282Y

	10 (2016)		Page 2
Part			
1	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	<u>. 니</u>
	PROVIDE ELECTRICITY TO APPROXIMATELY 10,000 COOPERATIVE MEMBERS		
2	Did the organization undertake any significant program services during the year which were not listed		
	prior Form 990 or 990-EZ?	· · 🗌 Yes 🖟	No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any pro-	ogram	
	services?	· 🗌 Yes 🖟	7 No
	If "Yes," describe these changes on Schedule O.		_
4	Describe the organization's program service accomplishments for each of its three largest program servenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants are the total expenses, and revenue, if any, for each program service reported.		
4a	(Code.) (Expenses \$including grants of \$) (Revenue \$		
	Provided electric service to approximately 10,000 cooperative members through wholesale purchase of powe transmission and distribution facilities as well as overall operation activities	r, maintenance of	
			·
		·	
		·	
	•••••••••••••••••••••••••••••••••••••••		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$)	
A -1	Other program convector (Decembe in Sales dula C.)		
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)		
4e	Total program service expenses ►		

Part	V Checklist of Required Schedules			
1	In the organization described in section E01(a)(2) or 4047(a)(1) (other than a private foundation)? If "Vec."		Yes	No
•	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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		1
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		1
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, 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	√	
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	1	
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
	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? If "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		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		-
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		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		1
		For	n 990	(2016)

Part	Checklist of Required Schedules (continued)			 -
20 -	Did the organization energies one or more hannital facilities? If "Vee " complete School de U	00-	Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 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		1
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	1	•
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	\	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
	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	24b		
_	to defease any tax-exempt bonds?	24c		
а 25а	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	•	
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230		
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		√
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 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	28a		√
С	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		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		✓
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	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 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	36		<u>-</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			_
	Part VI	37		1
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	√	
		Fort	n 990	(2016)

Part	V Statements Regarding Other IRS Filings and Tax Compliance		<u>·</u>	rage 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 1a 53			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		1	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and]
0-	reportable gaming (gambling) winnings to prize winners?	1c	✓	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 48 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b	/	ļJ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	•	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		/
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		Ť
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		✓
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			
5 -	(FBAR).	F-		
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		√
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
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?	<u>-</u>		J
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		-
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	75		<u> </u>
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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		<u> </u>
h o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		—
8	sponsoring organizations maintaining donor advised funds. Did a dorior advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		ļJ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u>-</u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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	. 1		
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders	.		
	against amounts due or recoved from them \	. }		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		[']
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 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?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	[-
ь	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			i
_	100			i
с 14а	Enter the amount of reserves on hand	14a	-	1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14a	-	_
	, posterior an explanation in concedito o		990	(2016)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,		for a	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response or note to any line in this Part VI			ons.
Section	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 1a 7			
	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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 7 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	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6	✓	<u> </u>
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?	70	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a	•	
	stockholders, or persons other than the governing body?	7b	1	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	✓	
þ	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	_
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b 12a	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	1	
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b	1	 -
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		_	
	describe in Schedule O how this was done	12c	✓	
13	Did the organization have a written whistleblower policy?	13	✓	
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?			
_		15a	√	لــــا
a b	The organization's CEO, Executive Director, or top management official	15a	✓	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		<u> </u>	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓
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?	46h		.
Secti	on C. Disclosure	16b		L
17	List the states with which a copy of this Form 990 is required to be filed ► OREGON			
18	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 for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)	_		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	polic	y, and
20	financial statements available to the public during the tax year.	00-4-		
20	State the name, address, and telephone number of the person who possesses the organization's books and re- CYNTHIA SCOBLE 787 BAILEY HILL RD_EUGENE. OR 97402_541-484-1151	ooi us		

Form 990 (2016)

Part VII	Compensation of Officers,	Directors, 1	Trustees,	Key Employees,	Highest	Compensated	Employees	, and
	Independent Contractors							

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 in	nor any relate	d org	anız	atic	on c	ompe	nsa	ited any curren	t officer, director	, or trustee.
				•	C)					
(A)	(B)	(40.5	not ch		more	e than o	nne	(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week (list any		er and		_	or/trust	<u> </u>	compensation from	compensation from related	amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JACK BILLINGS	7									
DIRECTOR		✓						13,250		
(2) HUGH BUERMANN	21									
SECRETARY		1		Ì				16,350	1	
(3) KATHRYN KEABLE	12									
DIRECTOR		<u> </u>					L	14,600		
(4) JEANETTE I KESSLER	16]		j						
VICE PRESIDENT		✓		ļ				18,600		
(5) SUSAN R KNUDSEN OBERMEYER	11			l						
TREASURER		/	<u> </u>	ļ	ļ	<u> </u>	<u>L</u>	15,425		
(6) CHRISTOPHER SEUBERT	10		ł	l	l	1	1	1		
PRESIDENT		✓	┞.	_	<u> </u>			20,775		
(7) GERALD SHOREY				1						
DIRECTOR		✓	igspace	_	<u> </u>	<u> </u>	<u> </u>	15,850		
(8) MATTHEW J MICHEL	45	1	l	١,	1		l			
GENERAL MANAGER			┝	✓	┝	<u> </u>	ļ	197,528		42,463
(9) DEBORA D WILSON	48			١,						
MANAGER, OFFICE & STAFF		<u> </u>	 	✓	├-	<u> </u>	┝	137,523		48,353
(10) ANTHONY TONCRAY	45	ĺ	ĺ	ĺ	ĺ	,	ĺ		ĺ	
MANAGER, OPERATIONS & ENGINEERING		 	⊢	├	-	✓	-	143,174		34,715
(11) JAMES LINEBAUGH	49	1				/	1			40.747
JOURNEYMAN LINEMAN		├	┢	⊬	┝	 	⊢	148,734		46,717
(12) DARIEL BRADLEY	49	ł				/		139,276		24 070
JOURNEYMAN LINEMAN		╁	┢	-	<u> </u>	Ť	-	139,276		31,879
(13) BRYAN DICKIE JOURNEYMAN LINEMAN	51	1				/		136,690		20 275
(14) JEFFREY DAU	49	\vdash	\vdash	\vdash	\vdash	一	\vdash	130,090		38,275
JOURNEYMAN LINEMAN		1				1		136,679		44,560
2001/14 HAIVIA FILAFIAIVIA		Ц	Ь-	_		<u> </u>		1 130,073	·	44,300

Part VII Section	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
			İ		•	C)					Ì			
	(A)	(B)	(do n	ot ch		more	e than o	one	(D)	(E)	(F)			
Na	ame and title	Average	box,	unles	s pe	rson	ıs both	n an	Reportable	Reportable			mated	
		hours per week (list any				_	or/trus	<u> </u>	compensation from	compensation related	1 from		ount of ther	
		hours for	Individual trustee or director	Institutional trustee	Officer	€	鬱	Former	the	organizatio		compe		n
		related organizations	e à	\$	ĕ	employee	o est	₫	organization (W-2/1099-MISC)	(W-2/1099-M	iisc)		n the nzation	1
		below dotted	Q #	nal		탕	# S		(** 2, 1000 111100)				related	
		line)	uste	켩		8	ben		ĺ			organ	ization	s
			Ď	tee		ĺ	Highest compensated employee							
45		 _	 -		_	┝	<u> </u>	┝	 					
(15)		ļ								•				
(16)	· · · · · · · · · · · · · · · · · · ·	<u> </u>		_	├			├-	 					
(16)			ĺ				ĺ	ĺ	ľ	!	İ			
(17)		 	-		-	\vdash	-	\vdash			-+			
<u>ν</u>		 	1				}	ļ	J]				
(18)		 		\vdash	\vdash	-		1	 		_			
<i>S</i>		†												
(19)						T		-						
		<u> </u>												
(20)														
			i						<u> </u>	, 				
(21)														
					<u>.</u>									
(22)														
							ļ	<u>L</u>	ļ					
(23)	••••••	<u> </u>			j ,			1		ŀ	- 1			
						L		L						
(24)					'									
							L	<u> </u>						
(25)		ļ	ļ			ļ	ĺ							
					<u> </u>		L	Ļ	ļ					
			٠	•					1,154,454				28	36,962
	continuation sheets to Part	•		•	•		•				$-\!\!+\!\!\!-$			
	nes 1b and 1c)							<u> </u>	1,154,454				28	36,962
	r of individuals (including bu		to th	ose	e list	ted .	above	e) w		ore than \$10	00,000	of		
reportable co	ompensation from the organ	ization >			-				21					
3 Did the orga	anization list any former of	fficar direc	tor c	e tr	ueta	00	kov e	mr	olovee or high	est compa	neated		Yes	No
	I line 1a? If "Yes," complete							2111F	sicyce, or riigi	iest compe	isaleu	3		
• •	vidual listed on line 1a, is the								and other comm	onestion fr	om tha	-3-		✓
	and related organizations											1 1		
individual			ω ψ									4	1	
•	on listed on line 1a receive of	or accrue co	nmne	nsai	tion	froi	m anv	un	related organiz	ration or ind	lividual	 	•	
	rendered to the organization											5		1
Section B. Indepen									· · · · · ·					
	is table for your five highest	compensat	ed inc	dep	end	ent	contr	act	ors that receive	ed more tha	n \$100.	000 of		
	on from the organization. Re													ax
year.	· ·	•						•	,		J			
	(A)								(B)			(C)		
	Name and business add	dress							Description of s	ervices	C	compens :	ation	
JOHN HYLAND CONS	STRUCTION							CC	ONSTRUCTION				1,34	2,984
JENSEN'S TREE SER		 -							OW MAINTENAN	ICE	,			2,057
PROFESSIONAL UND									CAVATING					1,832
WRIGHT TREE SERV								$\overline{}$	OW MAINTENAN	ICE				8,743
WESTATES FLAGMA	· · · · · · · · · · · · · · · · · · ·								AGGING					4,173
2 Total number	er of independent contractor									ove) who				
received mor	re than \$100,000 of compens	sation from t	the or	gan	izat	ion	>		6	ŀ				

8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	Part	VIII	Statement of Reve		a roco	oneo or noto to	any lino in this	Dort VIII		П
Supplement Sup			Official in Schedule C	Contains	a resp	orise of flote to		(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under sections
Supplement Sup	nts nts	1a	Federated campaigns	3	1a					
Supplement Sup	irar our	b	Membership dues .		1b			1		
Supplement Sup	S, C	С	Fundraising events .		1c					-
Supplement Sup	Sift	d	Related organizations	·	1d		[i		1
Supplement Sup	ıs, (е			1e		İ			
Supplement Sup	tior er S	f					[
Supplement Sup	ibu Yth		and similar amounts not inc	luded above	1f		İ			
Supplement Sup	on the	g								
3 Investment income (including dividends, interest, and other similar amounts) 36,550		h	Total. Add lines 1a-1	<u>f</u>	· · · ·					
3 Investment income (including dividends, interest, and other similar amounts) 36,550	튑				 -	_ 				
3 Investment income (including dividends, interest, and other similar amounts) 36,550	9.0	,			<u> </u>			24,542,877		
3 Investment income (including dividends, interest, and other similar amounts) 36,550	E.	b	POLE RENTAL			221000	83,638			83,638
3 Investment income (including dividends, interest, and other similar amounts) 36,550	Zic	1.			. _					
3 Investment income (including dividends, interest, and other similar amounts) 36,550	Se	d			-					
3 Investment income (including dividends, interest, and other similar amounts) 36,550	ram	1 -								
3 Investment income (including dividends, interest, and other similar amounts) 36,550	rog									<u> </u>
A			Investment uncome	/poluding	dvudo	nde interest	24,626,515			
4 Income from investment of tax-exempt bond proceeds 5		"					20.550			20.550
Form Form		1				<u> </u>	36,550			36,550
10 Real (ii) Personal					•	· •				
Description Description		•	rioyanico							
Description Description		6a	Gross rents	<u> </u>	500					
C Rental income or (loss) 500				ļ			1			
The standard description The state of the standard description The state of the standard description The standard descri			=		500					
Page 2016 Pag		l .	· ·	(loss) .		▶	500			500
b Less: cost or other basis and sales expenses .		1		<u> </u>						
Description Description		ľ	assets other than inventory			22,074	1	i		1
C Gain or (loss) . (2,831) (2		b	Less: cost or other basis							
d Net gain or (loss)		[and sales expenses .	{	- 1	24,905	Ì			
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		С	Gain or (loss) .			(2,831)				
events (not including \$		d	Net gain or (loss) .		· · <u>.</u>	▶	(2,831)			(2,831)
C Net income or (loss) from fundraising events . ▶ 9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities . ▶ 10a Gross sales of inventory, less returns and allowances a b Less. cost of goods sold b c Net income or (loss) from sales of inventory . ▶ Miscellaneous Revenue Business Code 11a SALT CREEK TUNNEL 221000 1.447 1.447 b PATRONAGE DIVIDENDS 221000 159,838 159,838 c		8a	events (not including \$ of contributions reported	ed on line 1						
C Net income or (loss) from fundraising events . ▶ 9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities . ▶ 10a Gross sales of inventory, less returns and allowances a b Less. cost of goods sold b c Net income or (loss) from sales of inventory . ▶ Miscellaneous Revenue Business Code 11a SALT CREEK TUNNEL 221000 1.447 1.447 b PATRONAGE DIVIDENDS 221000 159,838 159,838 c	¥	Ь					1	Ì		
See Part IV, line 19	J					vents . ►				
c Net income or (loss) from gaming activities . ▶ 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory . ▶ Miscellaneous Revenue Business Code 11a SALT CREEK TUNNEL 221000 1.447 1.447 b PATRONAGE DIVIDENDS 221000 159,838 159,838 c		9a								
10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory . ▶ Miscellaneous Revenue Business Code 11a SALT CREEK TUNNEL 221000 1,447 1,447 b PATRONAGE DIVIDENDS 221000 159,838 159,838 c		b								
returns and allowances a b Less. cost of goods sold b c Net income or (loss) from sales of inventory . ▶ Miscellaneous Revenue Business Code 11a SALT CREEK TUNNEL 221000 1,447 1,447 b PATRONAGE DIVIDENDS 221000 159,838 159,838 c d All other revenue 221000 11,700 11,700 e Total. Add lines 11a-11d ▶ 172,985 12 Total revenue. See instructions ▶ 24,833,719 24,715,862 117,857		_		-	_	ities 🕨				
c Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11a SALT CREEK TUNNEL 221000 1,447 1,447 b PATRONAGE DIVIDENDS 221000 159,838 159,838 c		10a								
Miscellaneous Revenue Business Code 11a SALT CREEK TUNNEL 221000 1,447 1,447 b PATRONAGE DIVIDENDS 221000 159,838 159,838 c d All other revenue 221000 11,700 11,700 e Total. Add lines 11a-11d 172,985 172,985 172,985 12 Total revenue. See instructions. 24,833,719 24,715,862 117,857		b								
11a SALT CREEK TUNNEL 221000 1,447 1,447 b PATRONAGE DIVIDENDS 221000 159,838 159,838 c		<u>c</u> _			of inver					<u> </u>
b PATRONAGE DIVIDENDS 221000 159,838 159,838 c — — — d All other revenue		<u> </u>	Miscellaneous F	levenue		Business Code				
c		ł			-					
d All other revenue 221000 11,700 11,700 e Total. Add lines 11a-11d ▶ 172,985 12 Total revenue. See instructions ▶ 24,833,719 24,715,862 117,857		i	PATRONAGE DIVIDEN	DS	<u> </u>	221000	159,838	159,838		
e Total. Add lines 11a-11d		ł.								
12 Total revenue. See instructions ▶ 24,833,719 24,715,862 117,857				-	L.			11,700		 -
		ł						24.745.000		
		<u> </u>	Total levellue. See II	1311 40110113	,, <u>,</u> ,	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>		Form 990 (2016)

Dart IY	State	mont	of	Functional	Evnancae
raitin	Glate	HICHIL	VI	1 uncuonai	Fyheilaea

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. Al	ll other organizatioi	ns must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lin	e 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			дения охроност	
2	Grants and other assistance to domestic individuals. See Part IV, line 22	10.550			
_		18,559		 -	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	2,144,024			
5	Compensation of current officers, directors, trustees, and key employees		 		
_	· · · · · · · · · · · · · · · · · · ·	540,717			
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	_			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	23,845			
11	Fees for services (non-employees)		-		
а	Management				
þ	Legal				
C	Accounting				
ď	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees				
12	Advertising and promotion				
13	Office expenses			 	
14	Information technology				
15	Royalties				
16	Occupancy			 	·
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	1,268,548			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	2,515,368		_	
23	Insurance				
24	Other expenses. Itemize expenses not covered	}			
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	PURCHASED POWER	8,949,878		 	
b	TRANSMISSION AND DISTRIBUTION	4,480,663			
C	CUSTOMER AND MEMBER SERVICES	1,883,631		 	
d	TAX EXPENSE	794,464		 	
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	2,020,989		 	
25 26	Joint costs. Complete this line only if the	24,640,686		 	-
20	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)				

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year Cash – non-interest-bearing 1 (9,414) 1 58,862 2 2 Savings and temporary cash investments 172,975 214,754 3 3 4 4 4,478,834 3,234,606 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Inventories for sale or use 8 8 983,933 1,002,590 9 9 Prepaid expenses and deferred charges . . 443,121 446,508 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation . . . 10b 10c 24,258,257 55,214,594 56,478,835 Investments-publicly traded securities 11 11 12 Investments—other securities. See Part IV, line 11 . 12 3,506,697 3,641,779 13 Investments—program-related See Part IV, line 11. 13 14 14 15 Other assets. See Part IV, line 11 581,388 15 504,767 16 Total assets. Add lines 1 through 15 (must equal line 34) . 64,127,900 16 66,826,929 Accounts payable and accrued expenses 17 5,513,772 17 6,216,142 18 Grants payable. 18 19 Deferred revenue 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 31,950,392 31,795,897 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 1,326,205 1,129,914 26 Total liabilities. Add lines 17 through 25 . 26 38,790,369 39,141,953 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 28 Temporarily restricted net assets 28 Fund 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34. ō Net Assets Capital stock or trust principal, or current funds 30 5,729,294 30 7,863,806 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 19,608,237 32 19,821,170 33 33 25, **3**37,531 27,684,976 Total liabilities and net assets/fund balances . . 34 64, 1,27,900 66,826,929 Form **990** (2016)

Page	1	2

0	(2010)		_		ige iz
Part	XI Reconciliation of Net Assets				
_	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	<u></u>	V
1	Total revenue (must equal Part VIII, column (A), line 12)	1		24,83	3,719
2	Total expenses (must equal Part IX, column (A), line 25)	24,640,68			0,686
3	Revenue less expenses. Subtract line 2 from line 1	3	_	19	3,033
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		25,33	37 <u>,531</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		2,15	4,412
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
_	33, column (B))	10		27,68	34,946
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			ᆜ
				Yes	No
1	Accounting method used to prepare the Form 990. Cash Accrual Other	-1			
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O	piain in	i		
•					1
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 completed.		2a		_
	reviewed on a separate basis, consolidated basis, or both:	Jileu Oi			
	Separate basis Consolidated basis Both consolidated and separate basis				
L	Were the organization's financial statements audited by an independent accountant?		2b	1	
U	If "Yes," check a box below to indicate whether the financial statements for the year were audited.	d on a	20	-	
	separate basis, consolidated basis, or both:	on a			
	Separate basis Consolidated basis Both consolidated and separate basis				j
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersight			
·	of the audit, review, or compilation of its financial statements and selection of an independent account		2c	1	
	If the organization changed either its oversight process or selection process during the tax year, ex			<u> </u>	
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		За		/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
		 -	For	n 990	(2016)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 20**16**

e Treasury Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. Service ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Internal Revenue Service Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/rorm990. Inspection of 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

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

Tax) (See 3	eparate instructions, t				
		anizations Complete Part III.			
Name of or	ganization			Employer ider	ntification number
LANE ELE	CTRIC COOPERATIVE,	INC		j	93-0209125
Part I-A	Complete if the	e organization is exempt unde	er section 501(c	c) or is a section 527 o	organization.
	ovide a description of finition of "political car	f the organization's direct and incompaign activities")	direct political ca	impaign activities in Part	IV. (see instructions for
2 Po	litical campaign activit	y expenditures (see instructions) .			3,000
		cal campaign activities (see instruc			0
Part I-B		e organization is exempt unde			 -
		excise tax incurred by the organiza			0
	-	excise tax incurred by organization			0
	•	ed a section 4955 tax, did it file For	_		. Yes No
	-		•		Tyes No
	Yes," describe in Part				
Part I-C		e organization is exempt unde	er section 501(c	c), except section 501	(c)(3).
1 En		ly expended by the filing organization			<u>, , , , , , , , , , , , , , , , , , , </u>
act	tivities			. <i>.</i>	0
2 En	ter the amount of the	filing organization's funds contrib	uted to other org	anizations for section	•••••
52	7 exempt function acti	vities		. ▶ \$	3,000
3 To	tal exempt function e	expenditures. Add lines 1 and 2.	Enter here and	on Form 1120-POL,	
line	e 17b				3,000
4 Dic	the filing organization	n file Form 1120-POL for this year?	·		✓ Yes No
		ses and employer identification nur			
		ents. For each organization listed,			
		ontributions received that were pro-			
		fund or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount point from	(a) A
	(a) Name	(b) Address	(C) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
		1		funds If none, enter -0-	promptly and directly
					delivered to a separate political organization if
				}	none, enter -0-
(4) OP Ac	tion Committee for	1750 Liberty Street, SE			
	Electrification	Salem, OR 97302	47-0861601	3.000	
				1	
(2)				1	
(0)				 	
(3)					
44					
(4)				ì	}
<u></u>				 	
(5)		}		1	}
(6)					
(6)		ļ		1	1

n	•
Page	7

Pa	rt II-A Complete if the organization section 501(h)).	is exempt	under section 50	01(c)(3) and file	d Form 5768 (ele	ction under
	Check ► ☐ if the filing organization belo name, address, EIN, expens	es, and sha	are of excess lobb	oyıng expenditui	res).	up member's
<u>B_</u>	Check ▶ ☐ if the filing organization chec			rol" provisions a	apply.	
	Limits on Lobbyi (The term "expenditures" mea				(a) Filing organization's totals	(b) Affiliated group totals
1	a Total lobbying expenditures to influence p	ublic opinior	(grass roots lobby	ing)		
	b Total lobbying expenditures to influence a	legislative b	ody (direct lobbying	g)		
	c Total lobbying expenditures (add lines 1a	and 1b) .				
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (add li					
	f Lobbying nontaxable amount. Enter th columns.	e amount 1	from the following	table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the a	mount on line 1e		ŀ	
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000				
	g Grassroots nontaxable amount (enter 25%)	of line 1f)				
	h Subtract line 1g from line 1a If zero or less					
	i Subtract line 1f from line 1c. If zero or less	•			<u> </u>	
	j If there is an amount other than zero o reporting section 4911 tax for this year?		th or line 1, did	-		☐ Yes ☐ No
	(Some organizations that made a secti	on 501(h) el	Period Under sec lection do not hav tructions for lines	e to complete all	of the five column	s below.
	Lobbying E	xpenditure	S During 4-Year Av	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2	a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(8	3)		(b)	
	iption of the lobbying activity.	Yes	No	Am	ount	:
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)?	 				
c d	Media advertisements?	-				
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 1i	ļ				
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	[
9	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?	<u> </u>				
Part		1/5)	or se	ction		
rait	501(c)(6).	ΛΟ) , () 3¢	Cuon		
	33,44,47			\neg \Box	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	-	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior	year?	3		
Part 1	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes." Dues, assessments and similar amounts from members				ine :	3, is
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			
C	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 lobby					
	and political expenditure next year?		4	<u> </u>	_	
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
	Supplemental Information the the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grounstructions); and Part II-B, line 1. Also, complete this part for any additional information.	up lis	t); Par	t II-A, lır	nes 1	and
Part I-	A Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congr	essio	nal ca	ndidates	who	
share	public policy goals consistent with the mission of member owned electric cooperatives					
					~	

	n 990 or 990-EZ) 2016	Page 4
Part IV	Supplemental Information (continued)
<u></u>		
·		
·		

SCHEDULE D (Form 990)

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
2016

Open to Public

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

LANE ELECTRIC COOPERATIVE, INC 93-0209125 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 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No 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 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 day of the tax year. Held at the End of the Tax Year 2a Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 5 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 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 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. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 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: **b** Assets included in Form 990, Part X

	e D (Form 990) 2016							Page
Part 3	Organizations Maintaining Co Using the organization's acquisition, acc collection items (check all that apply):							
а	Public exhibition			□ Loon	or exchang	ae prod	rame	
b	Scholarly research			Othe				
	☐ Preservation for future generations		E					
4	Provide a description of the organization XIII.	n's collections	and expla	ain how t	hey further	the org	ganızatıon's ex	kempt purpose in Pa
5	During the year, did the organization so assets to be sold to raise funds rather the							
Part								
	Complete if the organization ar 990, Part X, line 21.	swered "Yes					·	
1a	included on Form 990, Part X?							not Yes No
þ	If "Yes," explain the arrangement in Part	XIII and comp	lete the fo	llowing t	able:	_	_	<u>,</u> .
								Amount
C	Beginning balance					10		
q	Additions during the year					10	 	
е	Distributions during the year					16		
f								
2a	Did the organization include an amount of							•
	If "Yes," explain the arrangement in Part	XIII. Check he	re if the ex	xpianatio	n nas been	provide	ed on Part XIII	<u></u>
Par	Endowment Funds.	sowered "Vec	" on For	000 I	Dort IV Iva	- 10		
	Complete if the organization ar	(a) Current year		or year	(c) Two yea		(d) Three years b	oack (e) Four years back
4		- Content year	(0) (1)		(c) Two year	13 Dack	(a) Three years b	der (e) rour years back
1a	Beginning of year balance		 					
b	Net investment earnings, gains, and		-					
С	losses							
_	ļ. <u></u>		 					
	Grants or scholarships		<u> </u>					
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses		<u> </u>					
g	End of year balance				L			
2	Provide the estimated percentage of the	current year e	nd balanc	e (line 1ç	g, column (a	a)) held	as:	
а	Board designated or quasi-endowment		%					
b	Permanent endowment >	%						
С	Temporarily restricted endowment ▶	%						
3a	The percentages on lines 2a, 2b, and 2c Are there endowment funds not in the p	should equal 1		zation th	at are held	and ad	ministered for	· the
	organization by:							Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" on line 3a(ii), are the related orga	inizations listed	d as requi	red on S	chedule R?			. 3b
4	Describe in Part XIII the intended uses of							<u> </u>
Part		ent.	-			e 11a.	See Form 99	00, Part X. line 10.
	Description of property	(a) Cost or o	ther basis	(b) Cost	or other basis other)	(c)	Accumulated epreciation	(d) Book value
	Lond			t —				

Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a	Land					
b	Buildings					
С	Leasehold improvements					
d	Equipment					
е	Other		80,737,092	24,258,257	56,478,835	
otal.	Add lines 1a through 1e (Column (d) must e	equal Form 990, Part 2	X. column (B), line 1t	2c.)	56 478 835	

Part VII	Investments – Other Securities. Complete if the organization answers		rm 990 Part IV i	line 11h Se	e Form	990 Part X line 12
	(a) Description of security or category		(b) Book value	1 10.00		nod of valuation
	(including name of security)		(2) 2001. (4.00	c		of-year market value
(1) Financial	derivatives					
(2) Closely-I	neld equity interests					
(3) Other						
	TMENTS IN ASSOCIATED ORGANIZATION	DNS	3,641,7	79 COST		
(B)						
(C)						
(D)						
(E)			<u> </u>			
(F)						
(G)						
(H)						
	b) must equal Form 990, Part X, col (B) line 12.)		3,641,7	79		
Part VIII	Investments - Program Related		000 5 4 5 4		_	000 D 1 1 1 10
	Complete if the organization ansi	wered "Yes" on Foi		line 11c. Se		
	(a) Description of investment		(b) Book value	С		nod of valuation of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	b) must equal Form 990, Part X, col. (B) line 13.)		L			
Part IX	Other Assets.	1 (0)/ · " - -	000 D+ IV	luan del On		000 D- + V E 45
	Complete if the organization ansi		m 990, Part IV, I	ine i ia. Se	e Form	
	(a) Description				(b) Book value
(1)						
(2)						
(3)					-	
(4)						
(5)					+	
(6)						
(7)						
(8)		. 			-	
(9) Total, (Colu	mn (b) must equal Form 990, Part X, co	ol. (B) line 15.)				
Part X	Other Liabilities.	(-)				
- art A	Complete if the organization ansi	vered "Yes" on Fo	rm 990. Part IV. I	line 11e or	11f. See	Form 990, Part X.
	line 25.		, .			
1.	(a) Description of liability	(b) Book value				
(1) Federal ır						
(2) POST R	ETIREMENT HEALTH	3!	58,168			
	RED COMPENSATION PLAN LIABILITY		94,804			
	RTIZED GAIN RUS BUYOUT		99,936			
	DEFERRED CREDITS		77,006			
(6)	SELENNES GRESSIO	 _	7,000			
(7)						
(8)						
(9)						
	b) must equal Form 990, Part X, col. (B) line 25.) ▶	1.12	29,914			
2. Liability fo	r uncertain tax positions. In Part XIII, provi	de the text of the footn	ote to the organizat			
organization'	s liability for uncertain tax positions under	FIN 48 (ASC 740). Che	eck here if the text o	of the footnote	has bee	n provided in Part XIII

Schedule D (Fo	rm 990) 2016	Page 5
Part XIII	Supplemental Information (continued)	
	•••••••••••••••••••••••••••••••••••••••	***************************************

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

► Attach to Form 990

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

	ı
9	E
Ť	4
0	ĺ
\emptyset	į
	Ŀ

OMB No 1545-0047

Open to Public Inspection

Employer Identification number

° □ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance ☑ Yes 093-020912 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of noncash assistance (e) Amount of non-cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (b) EIN ANE ELECTRIC COOPERATIVE, INC. 1 (a) Name and address of organization or government Part I Part II 6 5 Ξ 3 0 3 9 5 9 5 8

Schedule I (Form 990) (2016)

Cat No 50055P

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2016) Part III Grants and Other Assistance to Domestic		ils. Complete if the	organization answ	ndividuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	Page 2, Part IV, line 22.
Part III can be duplicated if additional space is needed (a) Type of grant or assistance (b) Number of recipients	Space is needed (b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Educational Grant (Lane Community College)	ھ	16,000			SCHOLARSHIPS
2 NRECA Youth Tour	-	2,559			SCHOLARSHIP
8					
4					
22					
9					
7					
Part IV Supplemental Information. Provide the infor		equired in Part I, lin	e 2; Part III, colum	mation required in Part I, line 2; Part III, column (b); and any other additional information.	tional information.
Educational Grants are budgeted annually and awarded through an interview process by a Scholarship Committee. Recipients are eligible for the awarded	through an interview	process by a Scholar	ship Committee Recij	pients are eligible for the aw	irded
funds by enrolling in the designated program. Distributions are made directly to the appropriate institution upon verification of enrollment. Unclaimed funds are returned to the	ons are made directly	to the appropriate ins	titution upon verificat	ion of enrollment. Unclaimed	funds are returned to the
cooperative and may or may not be re-awarded at the board's discr	ard's discretion				
					Schedule I (Form 990) (2018)

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ 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.irs.gov/form990. Inspection Employer identification number Name of the organization

LANE	NE ELECTRIC COOPERATIVE, INC 93-0209125					
Part	Questions Regarding Compensation					
			1		Yes	No
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a. Complete Part III to provide					
	☐ First-class or charter travel ☐ F	Housing allowance or residence f	or personal use			
	_	Payments for business use of per				
		Health or social club dues or initia				
	☐ Discretionary spending account ☐ F	Personal services (such as, maid,	chauffeur, chef)			
b	" " " " " " " " " " " " " " " " " " "					
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to					
	explain			1b		
2	Did the organization require substantiation prior to	reimbursing or allowing exper	ses incurred by all			
-	directors, trustees, and officers, including the CEO/Exe					
	1a?			2		
3	Indicate which, if any, of the following the filing organiza					
	organization's CEO/Executive Director. Check all that a					
	related organization to establish compensation of the C		n in Part III			
		Written employment contract		.		
		Compensation survey or study				
	Form 990 of other organizations	Approval by the board or comper	sation committee			
4	During the year, did any person listed on Form 990, Par organization or a related organization.	t VII, Section A, line 1a, with resp	ect to the filing			
а	Receive a severance payment or change-of-control pay	ment?		4a		✓
b	Participate in, or receive payment from, a supplemental			4b		1
C	Participate in, or receive payment from, an equity-based			4c		1
	If "Yes" to any of lines 4a-c, list the persons and provid					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organ	nizations must complete lines 5	-9.			
5	For persons listed on Form 990, Part VII, Section A, line					
	compensation contingent on the revenues of:		•			i
а	The organization?			5a		
b				5b		
	If "Yes" on line 5a or 5b, describe in Part III.					
•	For persons listed on Form 990, Part VII, Section A, line	a 1a did the organization hav or a	ccrue any			
6	compensation contingent on the net earnings of:	ra, did the organization pay or a	corde arry			
а	The organization?			6a		
b	Any related organization?			6b		-
_	If "Yes" on line 6a or 6b, describe in Part III.					
_						ļ
7	For persons listed on Form 990, Part VII, Section A payments not described on lines 5 and 6? If "Yes," design and the section of the section			7		
8	Were any amounts reported on Form 990, Part VII, paid	or accrued pursuant to a contra	ct that was subject			
-	to the initial contract exception described in Regu					
	ın Part III			8		
9	If "Yes" on line 8, did the organization also follow					
	Regulations section 53.4958-6(c)?			9		

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

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

in column (B) reported as deferred on prior Form 990 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. (F) Compensation 185,876 177,889 174,965 239,991 171,155 181,239 195,451 (E) Total of columns (B)(I)–(D) 6,529 20,189 19,318 13,828 1,225 7,228 13,909 (D) Nontaxable benefits 22,274 41,824 32,889 31,047 30,651 15,397 30,654 (C) Retirement and other deferred compensation 9,303 11,490 11,146 828 859 1,043 10,035 (iii) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII. 1,500 1,500 (ii) Bonus & incentive compensation 188,225 126,655 124,533 130,528 147,906 138,233 135,820 (I) Base compensation EE EE SE $\mathbf{\epsilon}$ EE **E E** EE EE EE EE \equiv EE EE $\mathbf{\epsilon}$ 3 MANAGER, OPERATIONS & ENG 2 MANAGER, OFFICE & STAFF 4 JOURNEYMAN LINEMAN **5 JOURNEYMAN LINEMAN 6 JOURNEYMAN LINEMAN** 7 JOURNEYMAN LINEMAN (A) Name and Title 1 GENERAL MANAGER ANTHONY TONCRAY MATTHEW J MICHEL JAMES LINEBAUGH **DEBORA D WILSON** DARIEL BRADLEY **BRYAN DICKIE** JEFFREY DAU œ 6 5 2 15 13 7 16 F

Schedule J (Form 990) 2016

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

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.

Open to Public Inspection

Employer identification number

LANE ELECTRIC COOPERATIVE, INC	93-0209125				
Form 990, Part VI, Section A, Line 6 and Line 7a					
As a cooperative, Lane Electric is owned by our member/owners who exercise their control by electing a total of seven board members by					
residential district. The seven board members are elected from four board districts to each serve a three-year term.					
Form 990, Part VI, Section A, Line 7b					
Pursuant to Lane Electric's governing documents certain major decisions, such as sale of the entity, re	equire member approval				
Form 990, Part VI, Section B, Line 11b					
The Form 990, including its supplemental schedules, is reviewed annually during the board meeting in	ı Aprıl				
Form 990, Part VI, Section B, Line 12c					
Any potential conflicts of interest including its nature and effects that may exist, shall be declared in a	dvance by the individual in order				
to save him or herself any official action involving the conflict. Monitoring and identifying such situation	ons is the responsibility of the				
individual, the President of the Board, and the Board as a whole. Monitoring and enforcement of comp	liance with policies as they relate				
to employees is the responsibility of the Cooperative's General Manager Annually the Cooperative pr	ovides questionnaires to its				
Board of Directors, officers, key, and highly compensated employees. This provides a means to disclo	se and obtain detailed				
information regarding the individual relationships reportable personnel may have with the Cooperative	e's affiliates giving rise to a potential				
conflict of interest					
Form 990, Part VI, Section B, Line 15a and 15b					
Compensation for the Cooperative's General Manager is set annually by the Board of Directors. This is	s discretionary based on performance				
to the extent it falls within the established range. This range is developed and reviewed every year bas	sed on averages and				
compiled from both industry surveys and information obtained from comparable utilities. Each such re	eview is consistent in its inclusion				
of the relevant data. Compensation for managers and key employees is conducted in the same fashion	n, however, the decision is made				
by the Cooperative's General Manager.					

Schedule O (Form 990 or 990-EZ) (2016)	Page 2
Name of the organization	Employer identification number
LANE ELECTRIC COOPERATIVE, INC	93-0209125
Form 990, Part VI, Section C, Line 19	
TOTAL SSO, Fact VI, Section O, Line 13	
The Cooperative makes governing documents, policies, and annual financial statements available to	members of the Cooperative upon
request	
Form 990, Part IX, Line 4 - Benefits Paid to or for Members	
This represents the allocation of 2016 patronage. Members are notified in writing of their allocation.	Retirements are made at the
discretion of the Board of Directors. Members are notified in writing of their right to claim their retired	d patronage in accordance
with the Cooperative's policies and bylaws	
with the Cooperative 3 poncies and bylaws	······································
Form 990, Part XI, Line 9	
Form 990, Part XI, Line 9	
Tax Depreciation Less Than Book \$ (111)	······································
Amortization of RUS Buyout 14,277	
Amortization of RUS Buyout 14,277	
Change in Memberships 132	
Patropogo Potirod (2.010)	
Patronage Retired (3,910)	***************************************
Patronage Allocated, Benefits Paid to Members 2,144,024	·
Total Other Changes to Net Assets \$ 2,154,412	
Total Other Changes to Net Assets \$ 2,154,412	
······································	
	••••••