

Horm 990

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Depa Intern	rtment o al Rever	f the Treasury nue Service	, 1			990 for instru		-		-			pection
			ndar year, or tax yea	r beginning	,		, 2017	, and end	ling			, 20	
В	Check if	applicable	C Name of organization	LANE ELE	CTRIC C	OOPERATIVE	INC			D	Employe	er identifica	ton number
	Address	change	Doing business as									93-02091	25
	Name cl	hange	Number and street (or	PO box if m	all is not d	elivered to stree	t address)	Room/	'suite	E	Telephor	ne number	
	nıtıal rei	turn	787 BAILEY HILL RO									541-484-1	151
	Fınal retu	m/terminated	City or town, state or p	province, cou	ntry, and Z	iP or foreign pos	stal code						
	Amende	d return	EUGENE OR 97402							G	Gross re	cerpts \$	26,850,66
	Applicat	ion pending	F Name and address of	onncipal offic	er MAT	THEW J MIC	HEL						Yes 🗹 No
			787 BAILEY HILL RE						) H(b)				]Yes 🗌 No
		mpt status	501(c)(3)	√ 501(c) (	12 ) <	(insert no )	4947(a)(1) o	r 527	2	If "No,"	attach a	list (see inst	tructions)
_	Vebsite		w laneelectric com				<u> </u>		H(c)	Group ex	emption	number 🕨	
_			Corporation Trust	Associa	ation 🔲 O	ther ►	L'	Year of form	nation	1939	M State	of legal dom	icile OR
Pa	rt I	Summ				<del></del> '							
	1		escribe the organiza			_		es:					
ည္		PROVIDE	ELECTRIC SERVICE	TO APPRO	DXIMATE	LY 10,000 ME	MBERS						
Activities & Governance	_												
Š	2		is box ▶☐ if the or	_		•		•		e than 2	1 1	ts net ass	ets
ŏ	3		of voting members of	_	-	• •	•				3		
8	4		of independent votir						D)	•	4		
ŧ	5		nber of individuals e				-				5		4
둥	6		nber of volunteers (e							•	6		
~	7a		elated business reve					· · ·			7a		
$\dashv$	b_	Net unrei	ated business taxab	ole income	from Fe	Mide-abh-i A	18-14)	<del></del>	<del>; ; ;</del>	nor Year	7b		ent Year
- 1		Cantulari	andt. /Da	-4.3700 Jane	0			اد	<b> </b>	nor rear	<del>}</del>	Curre	em 16ai
활	8		tions and grants (Pa			APR. 3.0 2	1040	) 	-	<del></del>	0		
Revenue	9		service revenue (Pa				UID	۲ · ·			26,515		26,533,00
B.	10	Other	nt income (Part VIII,	COIUMN (A	i), lines :	3, 4, and 7d)		<u> </u>			33,719		59,89
l (	11	Total rave	renue (Part VIII, colu	mn (A), iin	es 5, <b>6</b> 0,	G BENG	ane Tie)	1			73,485		257,76
-+	12 13		enue—add lines 8 th					Ine 12)	<del></del>		33,719		26,850,66
	14		nd similar amounts p				(-3)		<b></b>		18,559		23,83
	15		paid to or for memb other compensation,				· · · ·		<b></b>		44,024		2,695,24
Ses	16a		onal fundraising fees			•	, ,.	•	<b> </b>	5	64,562		589,21
Expenses	b		draising expenses (F	•	•						<del>-</del>		
ă	17		penses (Part IX, colu					0			10.541		22.220.00
1			enses. Add lines 13					 25\			13,541		23,238,86
- {	19		less expenses. Sub		-			,			40,686		26,547,14 202.51
<u>- α</u>		Tievende	less expenses. Oub	tract line i	O HOITH	16 12	<del></del>	·-·-·	Beginnin	g of Curre	93,033 nt Year	End	303,51 of Year
Net Assets or Fund Balances	20	Total ass	ets (Part X, line 16)								26,929		67,659,72
ASS BB	21		ılıtıes (Part X, line 26	 3)		•			<del></del>		41,953		37,888,67
훒	22		s or fund balances	•	ne 21 fr	om line 20					84,976		29,771,05
	rt II		ure Block	000		<u> </u>		<del>· - · - ·</del> -	٠	21,0	04,370		23,771,00
			ry, I declare that I have ex	kamined this	return, incl	uding accompar	nvina schedu	iles and sta	tements, a	nd to the i	best of m	v knowleda	e and belief, it
true	, correct	, and compl	ete. Declaration of prepar	er (other than	officer) s	based on all info	rmation of w	hich prepa	rer has any	knowledg	ge	9	=
			11/1/11/11	Mul	CUT					7-	4/2:	3/18	
Sigi	n	Signa	ature of officer	11.						Date			
Her	е		latt how	Mich	el.	Genero	1 Ma	nogo	W				
		Туре	or print name and title					<del></del>					
Pai		Print/Ty	oe preparer's name		Preparer'	s signature			Date		Check [	T If PTIN	
	- pare	r									self-emp		
	Onl	1	ame 🕨							Firm's	EIN ▶		
			ddress ▶							Phone	по		
May	the IF	S discuss	this return with the	preparer	shown a	bove? (see ıı	nstruction	s) .		·		[	]Yes [] No
For F	aperv	vork Redu	ction Act Notice, see	the separa	te instru	ctions.		Cat	No 1128	2Y		F	orm <b>990</b> (201
				•									
	_												

	00 (201		Page Z											
Part	Ш	Statement of Program Service Accomplishments												
		Check if Schedule O contains a response or note to any line in this Part III	<u></u>											
1		fly describe the organization's mission:												
	PRO	VIDE ELECTRICITY TO APPROXIMATELY 10,000 MEMBERS												
		,												
2	Did 1	the organization undertake any significant program services during the year which were not listed on the												
			s 🗹 No											
	If "Y	es," describe these new services on Schedule O.												
3		the organization cease conducting, or make significant changes in how it conducts, any program												
			s 🗹 No											
		es," 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												
		enses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations	s to others,											
	tne t	total expenses, and revenue, if any, for each program service reported.												
	/0	VENDOROR C included and the Alexander C												
4a	(000	de: ) (Expenses \$ including grants of \$ ) (Revenue \$	/											
		VIDED ELECTRIC SERVICE TO APPROXIMATELY 10,000 MEMBERS THROUGH WHOLESALE PURCHASE OF POWER,	•••											
	MAIN	NTENANCE OF TRANSMISSION AND DISTRIBUTION FACILITIES AS WELL AS OVERALL OPERATION ACTIVITIES												
		***************************************												
4b	(Cod	de:) (Expenses \$ including grants of \$) (Revenue \$	)											
		***************************************												
		***************************************												
4c	(Cod	le:) (Expenses \$including grants of \$) (Revenue \$	)											
		***************************************												
		,												
			·											
4d	Othe	er program services (Describe in Schedule O.)												
		enses \$ including grants of \$ ) (Revenue \$ )												
4e	<u> </u>	I program service expenses ▶												

CDIJO

rait	Checklist of nequired Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		1
4	candidates for public office? If "Yes," complete Schedule C, Part I	3	1	-
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
3	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		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, 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>√</b>	
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	1	
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 14 a	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
	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	ո 990	(2017

Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<b>✓</b>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		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	<b>✓</b>	
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		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
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	28c		<b>√</b>
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,	30		<u> </u>
	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		<b>✓</b>
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		1
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			<i>'</i>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		<b>▼</b>
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		<b>-</b>
-	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	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		<del>                                     </del>
	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? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	
		. ~	•	

Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
<b>.</b>	5		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 102 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
·	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	-10	<u> </u>	-
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 47	, ,		,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	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?	3a		1
þ	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	1		1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 1		1
L		4a		<b>—</b>
D	If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	. (		
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>-</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>√</b>
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			1
-	gifts were not tax deductible?	6b		<del> </del>
7 a	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	Ì		
_	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		<u></u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			i
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u></u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<del></del>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<del>-" </del>		
-	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	. !		
a	Initiation fees and capital contributions included on Part VIII, line 12	İ		
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .   Section 501(c)(12) organizations. Enter.		1	
'' a			!	
b	Gross income from members or shareholders			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<del> </del> -
ь	<b>Note.</b> 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			,
ט	the organization is learned to recover evoluted beautiful alone			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
		Forr	n 990	(2017)

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response or note to any line in this Part VI	See in	for a	
Sect	ion 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.	<u>'</u>		
р 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		<b>√</b>
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		<b>√</b>
4 5	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?	<b>4 5</b>		<b>√</b>
6 7a	Did the organization have members or stockholders?	7a	<b>√</b>	
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	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	<b>√</b>	
ь 9	Each committee with authority to act on behalf of the governing body?	8b 9	<b>√</b>	<b>√</b>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode)	_
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 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	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	I I a		<u> </u>
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	<b>√</b>	
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	<b>√</b>	
13 14 15	Did the organization have a written whistleblower policy?	13	<i>J</i>	✓
а	The organization's CEO, Executive Director, or top management official	15a	<b>/</b>	
b	Other officers or key employees of the organization	15b	J	
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		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► OREGON  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.	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 int financial statements available to the public during the tax year.	erest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and received the SCOBLE 787 BAILEY HILL RD EUGENE OR 97402	cords	<b>&gt;</b>	

Form **990** (2017)

Part VII	Compensation of Officers, Directors,	Trustees, Key Employees,	<b>Highest Compensated</b>	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	or any relate	d org	anız	atic	on c	ompe	ensa	ated any currer	t officer, director	r, or trustee.	
				(4	C)						
(A)	(B)	/do n	ot of		sition	e than d		(D)	(E)	(F)	
Name and Title	Average					ıs both		Reportable	Reportable	Estimated	
	hours per week (list any					or/trus		compensation	compensation from related	amount of other	
	hours for related organizations below dotted line)	[ 용료   호		Officer	Key employee	Highest compensated employee	Former	the the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compen sation from the organization and related organizations	
(1) JACK BILLINGS	7										
DIRECTOR		1						15,150			
(2) HUGH BUERMANN	13										
TREASURER		1						17,350			
(3) KATHRYN KEABLE	14								_		
SECRETARY		1		<u>_</u>		<u> </u>		15,550			
(4) JEANETTE I KESSLER	14						l				
DIRECTOR		1		<u> </u>		<u> </u>	<u> </u>	20,500			
(5) SUSAN KNUDSEN OBERMEYER	13				ĺ		i				
VICE PRESIDENT	_	1		_	_	<u> </u>	<u>L</u>	16,925			
(6) CHRISTOPHER SEUBERT						1	İ				
PRESIDENT	_	1	_	<u> </u>	<u> </u>	<u> </u>	<u> </u>	20,225			
(7) GERALD SHOREY	8	,		l	ļ	ļ	l	į			
DIRECTOR	<del> </del>	<b>/</b>	<u> </u>	_	↓_	<u> </u>	├-	14,800			
(8) MATTHEW J MICHEL	47			<b> </b>	١,	<b> </b>	ł	i			
GENERAL MANAGER	<del> </del>		Ь.	<u> </u>	<b>✓</b>		├	199,794		46,164	
(9) DEBORA D WILSON	44	ł			١,	1	1				
MANAGER, OFFICE & STAFF	<del></del>			-	<b>✓</b>	<u> </u>	-	145,824		51,688	
(10) ANTHONY TONCRAY	40	}		1	1	/			]	20.004	
MANAGER, OPERATIONS & ENGINEERING	<del> </del>		├—	-	├	-	├	145,394		38,204	
(11) JEFFREY DAU	49			ĺ		١,				45 540	
JOURNEYMAN LINEMAN	<del></del>			-	├-	<u> </u>	┢	146,014		45,512	
(12) JAMES LINEBAUGH	49	1				/		1.50.5		40.000	
JOURNEYMAN LINEMAN	+		$\vdash$	-	├—	<del>                                     </del>	├	150,045		49,639	
(13) BRIAN MATTIE	48	1		1		1				FC 740	
JOURNEYMAN LINEMAN (14) BRYAN DICKIE	<del></del>		├	-	⊢	<b>-</b> *	┼-	147,129		56,748	
JOURNEYMAN LINEMAN	52	1	l	l		1		152 500		40,360	
DODUME HAIVIN FINEMAIN		<u> </u>		┖	L		ــــــــــــــــــــــــــــــــــــــ	153,500	ــــــــــــــــــــــــــــــــــــــ	40,360	

Form **990** (2017)

ail	(A) Name and title	(B)  Average hours per week (list any hours for	(do n box,	ot ch unles	Pos neck ss pe	ition more rson irecti	on ore than o on is both octor/truste		(D) Reportable compensation from the	(E)  Reportable compensation related organization	from	Est	(F) Estimated amount of other compensation	
		related organizations below dotted line)		Institutional trustee	cer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-M	(SC)	orga and	om the unization related nization	ı
(15)														
(16)								_						
(17)								-						
(18)														
(19)														
(20)				_										
(21)							_	 						
(22)								-						
(23)								_						
(24)								-						
(25)								_						
	Sub-total			•	 ·		•	<b></b>	1,208,200				3	28,315
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)					-		<b>▶</b>	1,208,200				3:	 28,315
2	Total number of individuals (including but reportable compensation from the organi	not limited					above	e) w	ho received mo	ore than \$10	0,000	of		
3	Did the organization list any former of	ficer direc	tor o	r tr	neta	20	kev c	mn		est comper	eated		Yes	No
	employee on line 1a? If "Yes," complete S										. <i>.</i>	3		1
4	For any individual listed on line 1a, is the organization and related organizations													,
	individual						,	-, 				4	1	
5	Did any person listed on line 1a receive of for services rendered to the organization?		•				,			ation or indi		5		<b>J</b>
Section	on B. Independent Contractors							_			_			
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							( <b>B)</b> Description of s	ervices	(	( <b>C</b> ) Compen		
	N'S TREE SERVICE							RO	W MAINTENAN	CE			1,2	19,790
	HYLAND CONSTRUCTION, INC ESSIONAL UNDERGROUND								NSTRUCTION					52,048
CENTI							_	CAVATING ECTRICAL WOF	RKERS				<u>09,005</u> 46,247	
	ILY-LANE COOPERATIVE							ELE	ECTRICAL WOR	RKERS				73,671
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				

Pal	LVIII	Check if Schedule (		ponse or note to	any line in this l	Part VIII		
			3 00 man 10 a 700		(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 campaign	s 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1b					
S, G	С	Fundraising events .	1c					i
ar.	ď	Related organizations	s 1d					
S, E	е	Government grants (cor						;
tion	f	All other contributions, g	jifts, grants,					1
춁		and similar amounts not inc	cluded above 1f					
<b>E</b> 9	g	Noncash contributions inclu	ded in lines 1a-1f. \$					
g G	h	Total. Add lines 1a-1	f	<u>.</u> ▶				i i
9			_	Business Code				
Program Service Revenue	2a	ELECTRIC REVENUE		221000	26,453,862	26,453,862		
8	b	POLE RENTAL		221000	79,138			79,138
<u>3</u> 2	c							
Sen	d							
Ē	е				ľ			
g	f	All other program ser						
<u> </u>	g	Total. Add lines 2a-2	!f	▶	26,533,000			
	3	Investment income	•					-
		and other similar amo	ounts)	▶ [	37,613			37,613
	4	Income from investmen	t of tax-exempt be	ond proceeds ►				
	5	Royalties	<u> </u>	<u>.                                    </u>				
			(i) Real	(ii) Personal				l.
	6a	Gross rents	500			1		ĺ
	b	Less: rental expenses						
	С	Rental income or (loss)	500					
	d	Net rental income or	<del></del>	<u></u> . ▶	500			500
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory		24,392				
	b	Less: cost or other basis						1
		and sales expenses .		(2,111)				
	C	Gain or (loss)		22,281				
	d	Net gain or (loss) .		▶	22,281			22,281
Other Revenue	8a	Gross income from fuevents (not including \$ of contributions reporte See Part IV, line 18	ed on line 1c).					
ţ	ь	Less: direct expenses	-			·		,
0		Net income or (loss) f		events . ▶		-		
		Gross income from ga		events .				
		See Part IV, line 19 .						
	ь	Less: direct expenses						'
	c	Net income or (loss) f		vities .				
	_	Gross sales of in						
	-	returns and allowance				ł		ĺ
	ь	Less: cost of goods s						
	С	Net income or (loss) f		entory >				
		Miscellaneous R		Business Code				
	11a	SALT CREEK TUNNEL		221000	2,425	2,425		
	b	PATRONAGE DIVIDEN		221000	244,344	244,344	<del></del> -	
	c			221000	244,344	274,344		
	ď	All other revenue		221000	10,500	10,500		
	е	Total. Add lines 11a-			257,269	10,300		
	12	Total revenue. See in			26,850,663	26,711,131		139,532
				<del></del>	20,030,003	<u> </u>		Form <b>990</b> (2017)

'DIV	Obstance and of Frenchismal	<u> </u>
Partix	Statement of Functional	Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any lir		<u> </u>	
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	23,830			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	2,695,242 563,970			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	333,33			
7 8	Other salaries and wages				
9	Other employee benefits				
10	Payroll taxes	25,243			<del></del>
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying	*			
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)		<u> </u>		<u></u>
12	Advertising and promotion				
13	Office expenses				
14	Information technology		<del></del>		
15	Royalties				
16	Occupancy				
17	Travel	-			<del>-</del> -
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	1,285,767			
21	Payments to affiliates		_		<u> </u>
22 23	Depreciation, depletion, and amortization . Insurance	2,560,392			
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	10,069,236			
b	TRANSMISSION AND DISTRIBUTION	4,586,526			
C	CUSTOMER AND MEMBER SERVICE	1,842,424			
d	TAX EXPENSE	846,216			
е	All other expenses	2,048,303			
<u> 25</u>	Total functional expenses. Add lines 1 through 24e	26,547,149			
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)				

P	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Par	t X		<u></u> . <u></u>
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	58,862	1	(30,889)
	2	Savings and temporary cash investments	214,754	2	443,144
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	4,478,834	4	3,641,115
	5	Loans and other receivables from current and former officers, directors,			1
	1	trustees, key employees, and highest compensated employees.			
	1	Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
	ļ	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		_	
ė	,	Notes and loans receivable, net		7	
Assets	7	Inventories for sale or use	1 000 500	<del></del>	000.016
•	9	Prepaid expenses and deferred charges	1,002,590 446,508		956,916 538,651
	10a	Land, buildings, and equipment: cost or	440,300	-	338,031
	1	other basis Complete Part VI of Schedule D 10a 83,686,938		}	
	ь	Less. accumulated depreciation 10b (26,004,487)	56,478,835	10c	57,682,451
	11	Investments—publicly traded securities	00,110,000	11	9,179,51,55
	12	Investments—other securities. See Part IV, line 11	3,641,779	12	3,794,592
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	504,767	15	633,746
	16	Total assets. Add lines 1 through 15 (must equal line 34)	66,826,929		67,659,726
	17	Accounts payable and accrued expenses	6,216,142		5,486,601
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
<b>/A</b>	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
≣	ļ	disqualified persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	31,795,897	23	31,135,272
	24	Unsecured notes and loans payable to unrelated third parties		24	3 1,133,272
	25	Other liabilities (including federal income tax, payables to related third			
	]	parties, and other liabilities not included on lines 17-24). Complete Part X		1	
	1	of Schedule D	1,129,914	25	1,266,800
	26	Total liabilities. Add lines 17 through 25	39,141,953		37,888,673
S	1	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
Sce	_	complete lines 27 through 29, and lines 33 and 34.			
lar	27	Unrestricted net assets		27	
ä	28	Temporarily restricted net assets		28	
ב	29	Permanently restricted net assets		29	<del></del>
Ē		complete lines 30 through 34.		- {	ŀ
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	7,863,806	30	7,669,018
set	31	Paid-in or capital surplus, or land, building, or equipment fund	7,003,000	31	7,003,010
As	32	Retained earnings, endowment, accumulated income, or other funds .	19,821,170		22,102,035
Net	33	Total net assets or fund balances	27,684,976		29,771,053
_	34	Total liabilities and net assets/fund balances	66,826,929		67,659,726
					Form <b>990</b> (2017)

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

2c

За

3b

Form **990** (2017)

## **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 2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

Tax) (see separate instructions),		y rax, (see separat	e instructions) or rottings	o-cz, ran v, mie ooc (rioxy
• Section 501(c)(4), (5), or (6) or	ganizations: Complete Part III.		<del></del>	
Name of organization			Employer Ide	entification number
LANE ELECTRIC COOPERATIVE			<u> </u>	93-0209125
	he organization is exempt und		<del></del>	
definition of "political ca	of the organization's direct and in ampaign activities") vity expenditures (see instructions)			rt IV. (see instructions for \$ 3000
	itical campaign activities (see instru			0
	he organization is exempt und			
	y excise tax incurred by the organization			\$
	y excise tax incurred by organization			\$
	rred a section 4955 tax, did it file Fo	•		Yes No
4a Was a correction made	•			Yes No
b If "Yes," describe in Pa				
	he organization is exempt und	er section 5016	c), except section 50	1(c)(3).
1 Enter the amount dire	ctly expended by the filing organiz	zation for section	527 exempt function	\$
2 Enter the amount of th	e filing organization's funds contrib	outed to other org	anizations for section	\$ 3000
lıne 17b				\$ 3000
4 Did the filing organization	on file <b>Form 1120-POL</b> for this year	?		🗸 Yes 🔝 No
organization made payr the amount of political of	sses and employer identification numents. For each organization listed, contributions received that were produced fund or a political action committed.	enter the amount mptly and directly	paid from the filing organ delivered to a separate	nization's funds. Also enter political organization, such
(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) OR Action Committee for Rural Electrification	1750 Liberty Street, SE Salem, OR 97302	47-0861601	3,00	00
(2)				
(3)				
(4)				
(5)				
(6)				

Sche	dule C (Form 990 or 990-EZ) 2017					Page <b>2</b>
	rt II-A Complete if the organizat section 501(h)).			• • • •		ction under
A	Check ► ☐ if the filing organization bel address, EIN, expenses, ar				lliated group memb	er's name,
B	Check   if the filing organization che	ecked box A and	"limited control" p	rovisions apply.		
	Limits on Lo (The term "expenditures"	bbying Expendition		.)	(a) Filing organization's totals	(b) Affiliated group totals
18	Total lobbying expenditures to influen	ce public opinior	(grass roots lobb	yıng)		
ı	b Total lobbying expenditures to influen	ce a legislative b	ody (direct lobbyin	ig)		
•	Total lobbying expenditures (add lines	1a and 1b) .				
•	d Other exempt purpose expenditures					
•	Total exempt purpose expenditures (a	idd lines 1c and	ld)			
1						
	If the amount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amour	nt is:		l
	Not over \$500,000	20% of the a	mount on line 1e.			
	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 of	over \$1,500,000		
	Over \$17,000,000	\$1,000,000.				
(	g Grassroots nontaxable amount (enter	25% of line 1f)				
ł	<ul> <li>Subtract line 1g from line 1a. If zero or</li> </ul>	r less, enter -0-				
i	Subtract line 1f from line 1c If zero or	less, enter -0-				<u>_</u>
j	If there is an amount other than ze reporting section 4911 tax for this year	_		d the organization		Yes No
	4- (Some organizations that made a	Year Averaging section 501(h) el	Period Under see	ction 501(h) ve to complete all		s below.
_	Lobbyi	ng Expenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	( <b>d)</b> 2017	(e) Total
28	Lobbying nontaxable amount					
k	Lobbying ceiling amount (150% of line 2a, column (e))					
	Total lobbying expenditures					
	Grassroots nontaxable amount					
-	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 fi (election under section 501(h)).	led	Form	5768		
For a	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(8	a)		(b)	
	antina of the tablesing poticity	Yes	No	A	moun	t
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)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?	$\overline{}$				
е	Publications, or published or broadcast statements?	$\neg \neg$				
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					
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					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6).	5), o	r sec	tion		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Part	Did the organization agree to carry over lobbying and political campaign activity expenditures from the p			3_		
	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," OR answered "Yes."	э), о l (b)	r sec Part	ili-A,	line	3, is
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 the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyii	- 1-				
5	and political expenditure next year?	.  -	4			
Part	Taxable amount of lobbying and political expenditures (see instructions)	· 1	5			
Provid	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II-B, line 1. Also, complete this part for any additional information.	p list)	, Pari	II-A, lı	nes 1	and
Part I-/	Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congress	ssion	al car	didate	who	
share	ublic policy goals consistent with the mission of member owned electric cooperatives.		<b></b> -			
						<b></b>

chedule C (Form 990 or 990-EZ) 2017 Page <b>4</b>					
Part IV	Supplemental Information (continued				
		***************************************			
		***************************************			
· · · · · · · · · · · · · · · · · · ·					
<del></del>					

## **SCHEDULE D** (Form 990)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

lame o	f the organization	į	Employer identification number
ANE	ELECTRIC COOPERATIVE, INC		93-0209125
Par		ised Funds or Other Similar Fun	ds or Accounts.
_	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		<del> </del>
		<del></del>	
2	Aggregate value of contributions to (during year)	<u> </u>	
3	Aggregate value of grants from (during year)	<del></del>	<del> </del>
4	Aggregate value at end of year	<u> </u>	<del></del>
5	Did the organization inform all donors and donor	<del>-</del>	
	funds are the organization's property, subject to the	- · ·	<b>—</b> · · · · <b>—</b> · · ·
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?	<u> </u>	· · · · · · <u>·                         </u>
Par	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 of	f a historically important land area
	☐ Protection of natural habitat	•	f a certified historic structure
	Preservation of open space	- <del></del>	
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	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 easement		
c	Number of conservation easements on a certified it		
d	Number of conservation easements included in		
•		· · · · · · · · · · · · · · · · · · ·	
3	Number of conservation easements modified, trans		
•	tax year ►	sterred, released, extinguished, or terri	minated by the organization daring the
4	Number of states where property subject to conse	nyation easement is located	
5	Does the organization have a written policy reg		paction handling of
•	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspect		
•	Land volunteer rious devoted to monitoring, inspect	ang, nanding of violations, and emorcing t	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	a handling of violations, and enforcing	consequation easements during the year
•	► \$	g, nationing of violations, and emoleting	conservation casements during the year
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	section 170/h)(4)(R)(i)
-		2(2) 22000 521151) 110 10421101110110	· · · · · · · · · · · · · · · No
9	In Part XIII, describe how the organization reports of		<del>-</del>
•	balance sheet, and include, if applicable, the text of		·
	organization's accounting for conservation easeme	<del>_</del>	ariolal statements that describes the
Part			Other Similar Assets
	Complete if the organization answered '		
1a	If the organization elected, as permitted under SF.		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the f		
b			
D	If the organization elected, as permitted under S works of art, historical treasures, or other similar	ras 116 (ASC 958), to report in its	revenue statement and balance sileel
	public service, provide the following amounts relati		ducation, or research in further ance of
	(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,		
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1		<b>. &gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

Par	t III Organizations Maintaining	Collections of	Art, His	torical *	<b>Freasures</b>	, or Ot	her Similar As	ssets (	conti	nued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and of								
а	☐ Public exhibition		d	□ Loan	or exchang	ge prog	rams			
b	Scholarly research		е	□ Othe	r					
С	☐ Preservation for future generation:									
4	Provide a description of the organiza XIII.		•		-				pose	in Part
5	During the year, did the organization assets to be sold to raise funds rather	solicit or receive r than to be mainta	donation	ns of art, part of th	historical ti e organizat	reasure ion's co	s, or other simil		Yes	□No
Par	t IV Escrow and Custodial Arra			·						
	Complete if the organization 990, Part X, line 21.						·		on Fo	orm
1a	included on Form 990, Part X?					tions or	other assets n		Yes	□ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing t	able:					
						<u> </u>	A	mount		
C	Beginning balance					1c	<del></del>			
d	Additions during the year					1d	<u> </u>			
е	Distributions during the year					1e	<del></del>			
f						1f				
2a	Did the organization include an amou						•			∐ No
	If "Yes," explain the arrangement in P	art XIII. Check her	e if the e	xplanatio	n has been	provide	ed on Part XIII .	<u> </u>	·	<u> Ц</u>
Par	t V Endowment Funds.		"	000 1	5 - 4 D.C. I -	- 40				
	Complete if the organization						(A) There is the	1.00		
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years back	(e) FC	ur yea	rs back
1a	Beginning of year balance		<b> </b>		ļ			<del></del>		
b	Contributions		ļ		ļ			<del></del>		
С	Net investment earnings, gains, and losses									
d	Grants or scholarships							<b></b> _		
е	Other expenditures for facilities and programs							1		
f	Administrative expenses						<del></del>	<del>-                                    </del>		
	End of year balance							<del>- </del> -		
9 2	Provide the estimated percentage of t	the current year on	d bolone	- (line 1e		ld		<del>-1</del>		
a	Board designated or quasi-endowmen	nt 🕨	02	e (iiie 19	i, coluititi (a	i)) Held a	45			
b	Permanent endowment	%	'0							
c	Temporarily restricted endowment ▶	· <sup>70</sup>								
	The percentages on lines 2a, 2b, and		00%							
За	Are there endowment funds not in the			zation the	at are held	and ad	ministered for th	ne		
	organization by:		<b>- 3</b>						Ye	s No
	(i) unrelated organizations							3a(		
	(ii) related organizations							3a(i	_	<b>—</b>
b	If "Yes" on line 3a(ii), are the related o		as requi	red on So	chedule R?			3b	_	-
4	Describe in Part XIII the intended uses							<u> </u>		
Par	VI Land, Buildings, and Equip	ment.								
	Complete if the organization	answered "Yes"	" on For	m 990, f	art IV, line	e 11a. :	See Form 990,	Part X	i, line	10.
	Description of property	(a) Cost or ot (investm	her basis	(b) Cost of	or other basis ther)	(c) /	Accumulated epreciation		ook va	
1a	Land									
b	Buildings			Γ΄						
c	Leasehold improvements									
d	Equipment									
e	Other				83,686,938		26,004,487		57	682,451
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part	X, columr	(B), line 10	Oc.)	•			682,451

Part VII	Investments – Other Securities Complete if the organization ans		90. Part IV. lin	e 11b. See Form	n 990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book value	(c) Me	thod of valuation
(1) Financial					
	neld equity interests	· · · · · · <del>  -</del>	<del></del>		
(O) Oth	, -			<u> </u>	
	TMENTS IN ASSOCIATED ORGANIZATIO	)NS	3,794,592	COST	
(B)	THIENT S AT THE STATE OF THE ST		3,734,032		
(C)					
(D)					
(E)					
(F)					
(G)					
(H)				<del></del>	
	b) must equal Form 990, Part X, col (B) line 12.)		3,794,592		<del></del>
Part VIII	Investments - Program Related		3,734,552	L	
	Complete if the organization ansi		90. Part IV. lin	e 11c. See Form	990. Part X. line 13.
	(a) Description of investment		(b) Book value		thod of valuation
	(c) I soon prior or most more	,	DOOK VAIGE		-of-year market value
(1)					
(2)			<del></del>		
			-		
(4)					
(5)	<del></del>			<del></del>	
(6)					
(7)					
(8)					
(9)	b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.			<u> </u>	
raitix	Complete if the organization answ	wered "Ves" on Form 0	00 Part IV lin	a 11d Saa Farm	000 Part V line 15
<del></del>		) Description	30, raitiv, iii	e i iu. See i dilli	(b) Book value
(1)		, 2000			(5) 5001 14140
(1)	<del> </del>				
(2)					<u></u>
(3)	<del></del>				
(4)					<u> </u>
(5)					
(6)					_ <del></del>
(7)	<del></del>	<del></del>			
(8)	<del></del>			<del></del>	
Total (Colum	mn (b) must equal Form 990, Part X, co	ol (P) lino 15.)			<u></u>
Part X	Other Liabilities.	л. ( <i>D)</i> III е 13.)	<del></del>	<u> ▶</u>	L <u></u>
raitx	Complete if the organization answ	wordd "Voe" on Form O	OO Doct IV lin	0 110 or 116 Co	Form 000 Dort Y
	line 25.	wered tes on ronni 9	90, Part IV, III	e i le or i ii. Se	e ronn 990, ran A,
1.	(a) Description of liability	(b) Book value	<del></del>		<del></del>
(1) Federal in		(b) Book value			
<u> </u>			-{		
	TIREMENT HEALTH	421,699	<b>—</b>		
	ED COMPENSATION PLAN LIABILITY	269,179	_		
	RITEZED GAIN RUS BUYOUT	85,659	_		
	DEFERRED CREDITS	490,263	3		
(6)			4		
(7)			4		
(8)		<del></del>	4		
(9)	a) must aqual Form 000 Dat V and 701		4		
	b) must equal Form 990, Part X, col. (B) line 25.)	1,266,800	<u> </u>	<del>,, -, .</del>	
∠. Liability for	uncertain tax positions. In Part XIII, provi	ae the text of the foothote to	o tne organization	n's tinancial stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

_			
۲	aq	е	4

<sup>^</sup> Part	Reconciliation of Revenue per Audited Finan- Complete if the organization answered "Yes" or		_	Return.	
1	Total revenue, gains, and other support per audited financia			1	26,533,000
2	Amounts included on line 1 but not on Form 990, Part VIII, I			<del> </del>	
a	Net unrealized gains (losses) on investments				
b	Donated services and use of facilities				
	Recoveries of prior year grants	· · · · · · · · · · · · · · · · · · ·	<del></del>		
C	Other (Describe in Part XIII.)				
d	Add lines 2a through 2d			2e	
e				3	
3					<del></del>
4	Amounts included on Form 990, Part VIII, line 12, but not or	1 1			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, III				
b	Other (Describe in Part XIII.)		317,663		
C				4c	317,663
_ 5	Total revenue. Add lines 3 and 4c. (This must equal Form 99			5	26,850,663
Part				r Retur	n.
	Complete if the organization answered "Yes" or		e 12a		
1	Total expenses and losses per audited financial statements			1	23,837,758
2	Amounts included on line 1 but not on Form 990, Part IX, lin	e 25:			
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)		(128)		
е	Add lines 2a through 2d			2e	(128)
3	Subtract line <b>2e</b> from line <b>1</b>			3	23,837,630
4	Amounts included on Form 990, Part IX, line 25, but not on				50,007,500
а	Investment expenses not included on Form 990, Part VIII, lii				
b	Other (Describe in Part XIII )		2,709,519		
	·	<u> </u>		4c	2 700 510
С 5	Add lines <b>4a</b> and <b>4b</b>			5	2,709,519
	XIII Supplemental Information.	990, raiti, line 10./	· · · · ·	3	26,547,149
		It lines to and 4. Dort IV	lines the and Oh	· Dort V	line 4: Dort V. line
	the the descriptions required for Part II, lines 3, 5, and 9; Part I				
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also comp		•		
Part X	Line 2 The Cooperative follows accounting standards generally	accepted in the United S	tates of America	elated to	the recognition of
uncert	ain tax positions The Cooperative recognizes accrued interest	and penalties associated v	with uncertain tax	position	s as part of the
Incom	e tax provision, when applicable. The Cooperative does not have	any uncertain tax positio	ns and there were	no amo	unts accrued
In the	financial statements related to uncertain tax positions in 2017 or	2016 The Cooperative file	es an exempt org	anızatıon	tax return
ın the	U.S. Federal jurisdiction and is no longer subject to examination	by taxing authorities befo	оге 2013		
Dart V	II, Line 2d Tax depreciation less than book \$128				
<u>Fait Ai</u>	ii, Lilie 20 Tax depreciation less than book \$126				
Part XI	II, Line 4b Amortization of RUS Gain of \$14,277 and Patronage	Allocated to Members \$2,6	95,242		

Schedule D (Form 990) 2017 Page <b>5</b>					
Part XIII	Supplemental Information (continued)				
••••					
••••••		*			
<b></b>					

# SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Part I

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.

▶ Attach to Form 990.

2017	Open to Public Inspection
------	---------------------------

Employer identification number

93-0209125

**%** □

√
Yes

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ▶ Go to www.irs.gov/Form990 for the latest information. the selection criteria used to award the grants or assistance? General Information on Grants and Assistance ANE ELECTRIC COOPERATIVE, INC.

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

	L			n		orance:		
Part	_	ssistance to Do or any recipient	mestic Organiz that received m	ations and Domore than \$5,000.	lestic Governm Part II can be d	ents. Complete r uplicated if additi	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ered "Yes" on Form
~	1 (a) Name and address of organization or government	(e)	(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 noncash assistance	(h) Purpose of grant or assistance
Ξ								
(2)								
(6)								
€								
<b>(2)</b>								
9								
<b>E</b>								
<b>®</b>								
6								
(10)								
(11)								
(12)								
0 W	Enter total number of section 501(c)(3) and government organizat Enter total number of other organizations listed in the line 1 table	501(c)(3) and gov ganizations listed	ernment organization the line 1 table	organizations listed in the line 1 table e 1 table				

Schedule I (Form 990) (2017)

Cat No 50055P

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

_
َ∼
_
o
Q
=
Ō
8
O,
F
Ē
Ö
ᄠ
_
ø
₹
ñ
ŏ
Ě
$\overline{\mathbf{o}}$

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 Individua I space is needed	als. Complete if the	organization answ	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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Educational Grants	6	19,911			
2 NRECA Youth Tour	1	3,919			
က					
4					
rs.					
9					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Educational Grants are budgeted annually and awarded through an interview process by a Scholarship Committee. Recipients are eligible for the awarded	the information retroed	equired in Part I, line	e 2; Part III, columriship Committee. Recip	nation required in Part I, line 2; Part III, column (b); and any other additiona interview process by a Scholarship Committee. Recipients are eligible for the awarded	onal information.
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	ins are made directl	y to the appropriate ins	titution upon verificat	on of enrollment. Unclaimed t	unds are returned to the
cooperative and may or may not be re-awarded at the board's discretion	ard's discretion				
		1	\		
	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;				
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
					Schedule I (Form 990) (2017)

### SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

**Compensation Information** 

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

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

► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017

line 23. Open to Public Inspection

Employer identification number

LANE ELECTRIC COOPERATIVE INC 93-0209125 **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 Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 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 on 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 Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? 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 Any related organization? . . . . . 5b If "Yes" on 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: The organization? 6a Any related 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 nonfixed 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 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2017

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 aren't 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.

Note: The sum of columns (byly him) for each instead invisional most edual title total amount of the second sum of the column of	200	(a) Brookdown o	for equal the total and	Duill Of FOIRIT 990, FA	and the total amount of follows from you, fact vii, section A, line ia, applicable coursm (U) and (E) amounts for that individuals	a, applicable colum	(U) and (E) amount	s for that individual.
		(a) Dicandowii o	וואי-ב מווט/טו ומפט-ואווכ	occumbensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	in column (B) reported as deferred on prior Form 990
MATTHEW J MICHEL	8	192,954	O	6,840	23,875	22,289	245,958	
1GENERAL MANAGER								
DEBORA D WILSON	€ €	133,594	0	12,230	44,270	7,418	197,512	
ZMANAGEK, OFFICE & STAFF		701 664			0,000		000	
ANTHONY TONCRAY  3MANAGER, OPERATIONS & ENG		133,704	004,1	10,230	8//91	71,420	86,581	
JEFFREY DAU	8	145,241	0	773	31,823	13,689	191,526	
4JOURNEYMAN LINEMAN	€							
JAMES LINEBAUGH	€ €	148,893	0	1,152	34,070	15,569	199,684	
SJOURNE YMAIN LINEMAIN	<b>E</b>	146 313			097.36	000	770 606	
6JOURNEYMAN LINEMAN	: E			06/	20/,03	676,07	770,603	
BRVAN DICKIE	ε	147,351	0	6,149	32,246	8,114	193,860	
7 JOURNEYMAN LINEMAN	(ii)							
	8							
8	<b>E</b>							
	8							
6	€							
	8							
10	Ξ							
	8							
11	Ξ							
	8		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
12								
	€							
13	€							
	€							
14	<b>E</b>							
	€							
15	8							
	<b>e</b>							
16	≣							

Schedule J (Form 990) 2017

	al Information
(Form 990) 2017	Supplement
Schedule J	Part III

Part 1. Lune 3. Compensation for the Cooperative's General Manager is set annually by the Board of Directors. This is discretionary based on performance to the extent it fails within the established range. This range is developed and reviewed every year based on averages and compiled from both industry surveys and information obtained from comparable utilities. A written employment contract was created for the new general manager.	the Board of Directors. This is discretionary based on performance to the extent it falls within the sand compiled from both industry surveys and information obtained from comparable

Schedule J (Form 990) 2017

## **SCHEDULE 0** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

> ► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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 thro	
Form 990, Part VI, Section A, Line 7b:	
Pursuant to Lane Electric's governing documents certain major decisions, such as sale of the entity, r	equire member approval
Tanadan to care case in a governing decement decisions, such as such of the chity, i	equite member approvan
Form 990, Part VI, Section B, Line 11b:	
The Form 990, including its supplemental schedules, is reviewed annually during the board meeting in	ı April.
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 situati	
individual, the President of the Board, and the Board as a whole Monitoring and enforcement of comp	
to employees is the responsibility of the Cooperative's General Manager Annually the Cooperative pr	
Board of Directors, officers, key, and highly compensated employees. This provides a means to disclo	
information regarding the individual relationships reportable personnel may have with the Cooperative	
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	
compiled from both industry surveys and information obtained from comparable utilities. Each such re	
of the relevant data. Compensation for managers and key employees is conducted in the same fashior	
by the Cooperative's General Manager	

Schedule O (Form 990 or 990-EZ) (2017)  Name of the organization	Employer identification number
LANE ELECTRIC COOPERATIVE INC	93-0209125
Form 990, Part VI, Section C, Line 19	
The Cooperative makes governing documents, policies, and annual financi	al 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 2017 patronage Members are notified in v	vriting of their allocation. Retirements are made at the
discretion of the Board of Directors. Members are notified in writing of thei	r right to claim their retired patronage in accordance
with the Cooperative's policies and bylaws	
Form 990, Part XI, Line 9:	
Tax Depreciation Less Than Book \$ (12)	3)
Amortization of RUS Buyout 14,27	7
Change in Memberships 39	i
Patronage Retired (926,86	
Patronage Allocated, Benefits Paid to Members 2,695,24	
Total Other Changes to Net Assets \$ 1,782,56	