DLN: 93493316003419 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable KAY ELECTŘIC COOPERATIVE INC ☐ Address change 73-0308955 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (580) 363-1260 City or town, state or province, country, and ZIP or foreign postal code BLACKWELL, OK $\,$ 746310607 $\,$ G Gross receipts \$ 34,648,228 Name and address of principal officer H(a) Is this a group return for TIM RODRIGUEZ ☐Yes ☑No subordinates? PO BOX 607 H(b) Are all subordinates BLACKWELL, OK 746310607 ☐ Yes ☐No ıncluded? 501(c)(3) **✓** 501(c) (12) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW KAYELECTRIC COOP L Year of formation 1937 M State of legal domicile OK **K** Form of organization lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities TO PROVIDE RELIABLE ELECTRICITY TO OUR MEMBER/OWNERS AT A REASONABLE COST Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 9 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 0 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 111,122 **b** Net unrelated business taxable income from Form 990-T, line 34 10,194 **Current Year Prior Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenua 33,758,166 34,070,154 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 180,599 218,903 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 366,650 342,166 34,305,415 34,631,223 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 11,298 17,287 2,704,376 2,477,819 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3,516,444 3,713,304 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 27,958,173 28,272,036 34,190,291 34,480,446 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 115,124 150,777 Net Assets or Fund Balances Beginning of Current Year End of Year 81,406,718 20 Total assets (Part X, line 16) . 81,573,662 21 Total liabilities (Part X, line 26) . 42,285,620 40,758,021 22 Net assets or fund balances Subtract line 21 from line 20 . 39,288,042 40,648,697 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-11-07 Signature of officer Sign Here TIM RODRIGUEZ CEO Type or print name and title Print/Type preparer's name Preparer's signature Check 🗹 ıf 2019-11-07 P00439459 Paid self-employed Firm's name

BOLINGER SEGARS GILBERT AND MOSS LLP Firm's EIN > 75-0882037 Preparer Use Only Firm's address ▶ 8215 NASHVILLE AVENUE Phone no (806) 747-3806 LUBBOCK, TX 79423 ✓ Yes 🗆 No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Statement of	Broaram Sarvica Acc			
	Program Service Acc	omplishments		
Check if Schedule	O contains a response or	note to any line in this Part III		🗆
y describe the orga	nization's mission			
		RIBUTION COOPERATIVE ORGANIZE E, AND SAFE ELECTRICITY TO OUR I		C COOPERATIVE ACT
ne organization und	ertake any significant prog	ram services during the year which w	were not listed on	
rıor Form 990 or 99	90-EZ?			☐ Yes ☑ No
s," describe these r	new services on Schedule			
ne organization ceas	se conducting, or make sig	nificant changes in how it conducts,	any program	
				☐ Yes ☑ No
rbe the organization on 501(c)(3) and 50	n's program service accom	plishments for each of its three large required to report the amount of gra ervice reported		
) (Expenses \$	including grants of \$) (Revenue \$)
ddıtıonal Data	, (Expenses ¢	mendaming grantes of ϕ	, (,
) (Expenses \$	including grants of \$) (Revenue \$)
) (Expenses \$	including grants of \$) (Revenue \$)
	•			
enses \$	ıncludıng g	rants of \$	(Revenue \$)
r p	ses \$	rogram services (Describe in Schedule O) ses \$ including g	rogram services (Describe in Schedule O) ses \$ including grants of \$)	rogram services (Describe in Schedule O)

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Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I "	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 🥦	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?		Yes	

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Yes 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🛸

11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

12a Nο

b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes

12a Did the organization obtain separate, 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 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Nο

Nο

Nο

Nο

Nο

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Nο

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Nο

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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 14b valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* . . .

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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Pa	tIV Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
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 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Yes

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47

0

1c

1a

1b

No

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . .

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

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

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

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

Nο

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34,080,576

694,354

10a

10b

11a

11b

12b

13b

13c

orm	990 (2018)			Page (
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lınes 🗹
Se	ction 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 9			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b				
2	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		No
Check if Schedule O contains a response or note to any line in this Pairt VI Section A. Governing Body and Management 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 designed broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members and used in line 1a, above, who are independent officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a 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? 2 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 5 Did the organization have members or stockholders? 7 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? 8 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? 9 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Rev		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a		7a	Yes	
b		7 b	Yes	
8				
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9		9		No
Se		e Code	2.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b		10b		
11a		11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in	12c	Yes	
13		\vdash		No
		14	Yes	
	Did the process for determining compensation of the following persons include a review and approval by independent			
а		15a	Yes	
		15b	Yes	
_				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16a		No
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	16b		
Se	ction C. Disclosure			

 \checkmark

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII . Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations

	ns 									
Check this box if neither the organization no (A) Name and Title	r any related or (B) Average hours per week (list any hours for related organizations below dotted line)	Position than o	on (do ne bo	(C ox, u n of tor/t) t chunle: ficer trust	eck moss pers and a ee)	ore son	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) MAX HOHMANN	7 40		t wei	×		sated		33,212	0	(
PRESIDENT				Ĺ				33,212		
(2) VERL BRORSEN VICE PRESIDENT	6 30	Х		x				33,330	0	C
(3) RON SHOFFNER SECRETARY/TREASURER	3 20	Х		x				26,682	0	C
(4) TIM BLANTON TRUSTEE	6 80	Х						33,379	0	(
(5) BRADY HOSTETLER TRUSTEE	5 10	Х						31,111	0	(
(6) MIKE LEBEDA TRUSTEE	4 50	х						26,981	0	C
(7) KENT MCANINCH TRUSTEE	6 10	Х						33,529	0	C
(8) JAKE OLSEN TRUSTEE	6 50	Х						36,665	0	(
(9) CHAD OTTO TRUSTEE	5 60	Х						27,859	0	(
(10) TIM RODRIGUEZ CEO	60 00			х				205,801	0	179,792
(11) JD SOULEK COO	55 00			х				129,308	0	89,170
(12) DOUG WORLEY DIRECTOR OF ENGINEERING	55 00					x		131,168	0	100,653
(13) JIM MAUPIN DIRECTOR OF OPERATIONS	55 00					x		111,433	0	65,983
(14) DAVE CHILDERS DIRECTOR OF ACCOUNTING	50 00					х		123,649	0	60,208
(15) TERRY GRACE LINE FOREMAN	44 00					х		103,554	0	20,398

Form 990 (2018) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation director/trustee) organization (Worganizations (Wfrom the any hours 2/1099-MISC) for related 2/1099-MISC) organization and Individual trustee or director Key employee Highest compensated employee Former organizations Institutional Trustee related below dotted organizations line)

1b Sub-Total										

1b Sub-Total									516,204				
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 6													
3	Did the organization list any former of	officer, director	or trust	ee, k	ev ei	mple	ovee. o	or hic	thest compensa	ted employee on		Yes	No

1b 9	Sub-Total						>							
c T	Total from continuation sheets to Pa	art VII , Section	Α.				▶							
d 7	「otal (add lines 1b and 1c)						>		1,087,661			0		516,204
2	Total number of individuals (including of reportable compensation from the			se list	ed a	bove	e) who	rece	eived more thar	\$100,00	0			
													Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>	•			•		, ,		-	•	•	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such													
	ındıvıdual			•	٠	٠	•					4	Yes	
5	Did any person listed on line 1a receiv	e or accrue co	mpensa	tion f	rom	any	unrela	ated	organization or	ındıvıdual	for		İ	

d 1	Total (add lines 1b and 1c)	0		516,204			
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \blacktriangleright 6						
			Yes	No			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No			
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such						
	ındıvıdual	4	Yes				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No			
Section B. Independent Contractors							

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
Se	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of contractors.	mpensa	ition	

	line 1a ⁷ If "Yes," complete Schedule J for such individual		3		No				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual								
5	services rendered to the organization?If "Yes," complete Schedule J for such person								
Se	ection B. Independent Contractors								
1	Complete this table for your five highest compensated independent contractors that received m from the organization. Report compensation for the calendar year ending with or within the org		pensa	tion					
	(A)	(B)		(C)				
	Name and business address	Description of services		Compen	sation				
KC EI	ECTRIC	WERLINE CONTRACTORS			736,567				

		1 '	1							
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization services rendered to the organization? If "Yes," complete Schedule J for such person			No						
Se	ection B. Independent Contractors			_						
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.									
	(A)	(B)	(C)						
	Name and business address	Description of services	Comper	sation						
KC EI	ECTRIC PC	OWERLINE CONTRACTORS		736,567						
	S VAN BUREN OK 73703									

EN]	D, OK 73703					
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 1						

Form **990** (2018)

		(2016)	Povonuo										Page 9
Part	VIII	Statement of Check if Schedul		resno	onse or no	te to any	line in th	us Part VIII					🗹
		check if Schedul	e o contains t	и тезре	51136 01 110	ice to uny	(/	A) evenue	Re e fu	(B) lated or xempt unction evenue	Uni bu	(C) related siness venue	(D) Revenue excluded from tax under sections 512 - 514
	1:	a Federated campaig	ns	1a					16	venue [312 - 314
nts ints		b Membership dues		1 b									
Sra not		c Fundraising events		1c									
. ₹ }	١,	d Related organizatio	ns l	1d	<u> </u>								
<u> </u>		e Government grants (co	ontributions)	1e									
ns,	١,	f All other contributions,	ا , gıfts, grants,		l								
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts no above	ot included	1f									
혈美		g Noncash contribution	ons included										
Contributions, Gifts, Grants and Other Similar Amounts		in lines 1a - 1f \$											
ة ق		h Total. Add lines 1a	-1f	•		<u> </u>							
÷					_	Business	Code	22.	192,302	22.10	2 202		
หะท		SALES OF ELECTRICITY					221000		817,147	33,19			
Program Service Revenue	b PATRONAGE DIVIDENDS					221000		·		7,147			
MCe	C	SERVICE FEES					221000		60,705		0,705		
Ser	d	i		_	-								
anı	е	•			-								
rogr	f	All other program se	rvice revenue		L	24.0	<u> </u> 070,154						
٩	g	Total. Add lines 2a-2	f		>	34,0	770,134						
		Investment income (ii similar amounts) .			ınterest, a	nd other		188,96	2				188,962
		Income from investme			ond proce	eds 🕨		•					,
						•	·						
			(ı) Real		(п) Ре	ersonal							
	6a	Gross rents				12,460							
	Ŀ	b Less rental expenses				766							
		Dantal manna an				11,694	_						
	•	c Rental income or (loss)				11,694	†						
	c	d Net rental income o	r (loss)			>		11,69	4			11,694	
			(ı) Securit	ies	(11) (Other	1						
	7a	Gross amount from sales of				29,94:	1						
		assets other than inventory											
	Ŀ	b Less cost or					1						
		other basis and sales expenses											
		Gain or (loss)				29,94:	1	20.04					20.041
		d Net gain or (loss) . Gross income from for				<u> </u>		29,94	1				29,941
e Te		(not including \$		of									
Other Revenue		contributions reporte See Part IV, line 18		а	ł								
Zev	Ŀ	b Less direct expense		ь			1						
er	c	c Net income or (loss)	from fundrais	ing ev	ents .	. •							
oth	9 a	Gross income from g See Part IV, line 19	amıng actıvıtı	es									
_		See Fait IV, IIIe 15		а	ľ								
	b	Less direct expense	s	b			1						
	c	c Net income or (loss)	from gaming	activit	ies	>	<u>-</u>						
	10	aGross sales of invent returns and allowand											
				а	1	10,223							
	Ŀ	Less cost of goods s	sold	b		16,239							
	•	Net income or (loss)		ınvent				-6,01	6			-6,016	
	11	Miscellaneous			Busines	221000	1	198,62	,	198,621			
	-11	La GENERATOR INSTAL	LATION			221000	1	130,05	-	130,021			
	L	h			<u> </u>	561000		105,44	4			105,444	
	C	ADMIN & MANAGEM	ENT SERVICES	5		201000		103,44				100,444	
		ELECTRICIAN SERVI	CES			221000		32,42	3	32,423	1		
	•	- LLLCTRICIAN SERVI	CLJ					, 12		02,120			
	,	d All other revenue .					1		+				
		e Total. Add lines 11a				>			+				
		2 Total revenue. See			-			336,48					
		J.ca. i e venuei Jee	2.13c1 decions	• •		• •		34,631,22	3	34,301,198	3	111,122	218,903 Form 990 (2018)
													・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all col	lumns All other orga	nizations must com	plete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	17,287			
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4 Benefits paid to or for members	2,477,819			
5 Compensation of current officers, directors, trustees, and key employees	886,819			
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	1,712,734			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	395,938			
9 Other employee benefits	564,198			
10 Payroll taxes	153,615			
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
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	1,619,525			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,499,700			
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	21,919,308			
b ADMIN & GENERAL EXPENSE	893,707			
c DISTRIBUTION EXPENSE	575,356			
d UNRELATED BUS INC TAX	975			
e All other expenses	763,465			
25 Total functional expenses. Add lines 1 through 24e	34,480,446			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Form 990	(2018)			Page 11
Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part IX .			🗆
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	202,377	1	209,466
2	Savings and temporary cash investments	2,654,628	2	1,002,225
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	2,654,778	4	2,714,967
5	Loans and other receivables from current and former officers, directors,		_	

2 Cash-non-interest-bearing 20,377 1 200,460						Beginning of year		End of year	
3 Pledges and grants recevable, net	-	1	Cash-non-interest-bearing			202,377	1	209,466	
A Accounts receivable, net 2,714,967		2	Savings and temporary cash investments			2,654,628	2	1,002,225	
A Accounts receivable, net 2,714,967		3	Pledges and grants receivable, net		. –		3		
trustees, key employees, and highest compensated employees. Complete Part I of Schedule I Cleans and other receivable from other discualified persons (as defined under section 4958(f(1)), persons described in section 4958(f(1)), persons desc		4				2,654,778	4	2,714,967	
Contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L S44.291 7 415.801			trustees, key employees, and highest compensa Part II of Schedule L	ustees, key employees, and highest compensated employees Complete art II of Schedule L					
Yellow Prepare expenses and deferred charges 1.156,648 9 940,355 10 1.44, 0.014 1.156,648 9 940,355 10 1.05 1.05 10 1.05 10 1.05 10 1.05 10 1.05 1.05 10 1.05 1	S		contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	ontributing employers and sponsoring organizations of section 501(c)(9) oluntary employees' beneficiary organizations (see instructions) Complete art II of Schedule L					
Yellow Prepare expenses and deferred charges 1.156,648 9 940,355 10 1.44, 0.014 1.156,648 9 940,355 10 1.05 1.05 10 1.05 10 1.05 10 1.05 10 1.05 1.05 10 1.05 1	set	7	•		_	•		<u>'</u>	
10a	AS.				•				
basis Complete Part Vi of Schedule D b Less accumulated depreciation 10b 8.085.019 53.805.328 10c 55.266.318 11 Investments—publicly traded securities 4.780.642 11 4.845.684 12 Investments—publicly traded securities 4.780.642 11 4.845.684 13 Investments—program-related See Part IV, line 11 153.155 12 14.57.52 13 Investments—program-related See Part IV, line 11 14.416.366 13 14.872,513 14 Intangible assets 14 15 15 238.639 16 Total assets.Add lines 1 through 15 (must equal line 34) 81.573.662 16 81.408.718 17 Accounts payable and accrued expenses 2.750.671 17 2.661.221 18 Grants payable 19 19 20 Tax-exempt bond liabilities 20 135.570 21 122.141 21 Escrow or custodial account liability Complete Part IV of Schedule D 135.570 21 122.141 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 22 Loans and other payables to unrelated third parties 24 25 4.341,553 23 Secured mortgages and notes payable to unrelated third parties 24 25 4.341,553 24 Unsecured notes and loans payable to unrelated third parties 24 25 4.341,553 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) 26 Total liabilities Add lines 17 through 25 42.285,620 26 40.758,021 27 Unrestricted net assets 28 29 28 Temporarily restricted net assets 29 27 29 Permanently restricted net assets 29 20 20 20 20 20 Total liabilities (and the lines 30 through 34 20 20 20 20 20 20 20 2	_	9	Prepaid expenses and deferred charges			1,156,646	9	940,355	
11 Investments—publicly traded securities		10a		10a	63,351,337				
12 Investments—other securities See Part IV, line 11 153,155 12 145,752 13 Investments—program-related See Part IV, line 11 14,416,366 13 14,872,513 14 Intangible assets 14 15 15 15 15 15 15 15		ь	Less accumulated depreciation	10b	8,085,019	53,805,326	10c	55,266,318	
13 Investments—program-related See Part IV, line 11 14,416,366 13 14,872,513 14 Intangible assets 14		11	Investments—publicly traded securities .		4,780,642	11	4,845,684		
14 Intangible assets 14		12	Investments—other securities See Part IV, line		153,155	12	145,752		
15 Other assets See Part IV, line 11		13	Investments—program-related See Part IV, line		14,416,366	13	14,872,513		
16 Total assets.Add lines 1 through 15 (must equal line 34)		14	Intangible assets	[14			
17		15	Other assets See Part IV, line 11	288,674	15	238,839			
18 18 19 18 19 19 19 19		16	Total assets.Add lines 1 through 15 (must equ	81,573,662	16	81,406,718			
19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 20 20 20 20 20 20 2		17	Accounts payable and accrued expenses	2,750,671	17	2,661,221			
20 Tax-exempt bond liabilities		18	Grants payable		18				
Escrow or custodial account liability Complete Part IV of Schedule D 135,570 21 122,141 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are check here assets Organizations that do not follow SFAS 117 (ASC 958), check here are chec		19	Deferred revenue		19				
22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20	Tax-exempt bond liabilities				20		
24 Unsecured notes and loans payable to unrelated third parties	S	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D	135,570	21	122,141	
24 Unsecured notes and loans payable to unrelated third parties	ilitie	22							
24 Unsecured notes and loans payable to unrelated third parties	æ		persons Complete Part II of Schedule L				22		
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D 26 Total liabilities.Add lines 17 through 25		23	Secured mortgages and notes payable to unrela	ted th	ird parties	34,748,897	23	33,633,106	
and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D 26 Total liabilities.Add lines 17 through 25		24	Unsecured notes and loans payable to unrelated	third	parties		24		
Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34. Capital stock or trust principal, or current funds 220,970 30 223,825 Paid-in or capital surplus, or land, building or equipment fund 39,067,072 32 40,424,872 Retained earnings, endowment, accumulated income, or other funds 39,288,042 33 40,648,697		25	and other liabilities not included on lines 17 - 24		s to related third parties,	4,650,482	25	4,341,553	
29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds		26	Total liabilities.Add lines 17 through 25			42,285,620	26	40,758,021	
29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	lances	27	complete lines 27 through 29, and lines 33				27		
29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	Ba	28	Temporarily restricted net assets				28		
the check here ► ✓ and complete lines 30 through 34. Capital stock or trust principal, or current funds	рu	29	Permanently restricted net assets				29		
the check here ► ✓ and complete lines 30 through 34. Capital stock or trust principal, or current funds	Fu		_	-					
33 Total net assets or fund balances	or	30				220,970	30	223,825	
33 Total net assets or fund balances	set	31	Paid-in or capital surplus, or land, building or eq	Juipme	nt fund	0	31	0	
33 Total net assets or fund balances	Ass	32	Retained earnings, endowment, accumulated ind	come,	or other funds	39,067,072	32	40,424,872	
Z 34 Total liabilities and net assets/fund balances		33	Total net assets or fund balances			39,288,042	33	40,648,697	
	Z	34	Total liabilities and net assets/fund balances .			81,573,662	34	81,406,718	

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

3a

3b

No

Form 990 (2018)

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 73-0308955

Name: KAY ELECTRIC COOPERATIVE INC

Form 990 (2018)

Form 990, Part III, Line 4a:

ALLOCATION OF PATRONAGE CAPITAL

SALE OF ELECTRIC POWER TO MEMBERS - 5.810 ACTIVE SERVICES WERE PROVIDED POWER AT YEAR END AT COST ON A COOPERATIVE BASIS THROUGH THE

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

For Paperwork Reduction Act Notice, see the Instructions for 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.

DLN: 93493316003419 OMB No 1545-0047

Internal Revenue Service

(Form 990)

2

5

Open to Public Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Inspection Name of the organization **Employer identification number** KAY ELECTRIC COOPERATIVE INC 73-0308955 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds 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 Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure 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 Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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 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 Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2018

Par	t III	Organizations M	aintaining Co	llections o	of Art, Hi	istori	cal T	reası	ıres, o	r Other	Similar A	ssets (cont	nued)	
3		ng the organization's acq ns (check all that apply)	quisition, accessio	n, and other	records, o	check :	any of	the fo	llowing t	that are a	significant i	use of its col	ection	
а		Public exhibition				d		Loan	or exch	ange prog	grams			
b		Scholarly research				е		Othe	r					
С		Preservation for future	e generations											
4		vide a description of the : XIII	organization's co	llections and	l explaın h	ow the	ey furt	her the	e organı	zation's e	xempt purpo	ose in		
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No													
Pa	Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.													
1a											lo			
b	If "	Yes," explain the arrange	ement in Part XII	I and comple	ete the foll	lowing	table				A	mount		_
С		inning balance		,		,				1c				_
d	_	litions during the year								1d				_
е	Dist	ributions during the year	r							1e				
f	End	ing balance								1f				_
2 a	Dıd	the organization include	an amount on Fo	orm 990, Par	t X, line 2	1, for	escrov	v or cu	istodial a	account lia	ability?	✓ Yes		lo
b	If "	res," explain the arrange	ement in Part XIII	Check here	e if the exp	planatı	on has	s been	provide	d in Part :	XIII	✓		
Pa	rt V	Endowment Fun	ds. Complete if											
	D			(a)Currer	nt year	(b) Pi	rior yea	ır	(c)Two y	ears back	(d)Three year	ars back (e)	our yea	rs back
	-	nning of year balance .												
		ributions												
		nvestment earnings, gair												
		ts or scholarships												
е		r expenditures for faciliti programs	es											
f	Admi	nistrative expenses .												
g	End o	of year balance												
2		vide the estimated perce		ent year enc	balance ((line 1	g, colu	mn (a)) held a	ıs	•	'		
а		rd designated or quasi-e	endowment ▶											
b		manent endowment >												
С		nporarily restricted endor												
2-		percentages on lines 2a there endowment funds						6	J - J	L	41			
3а		anization by	not in the posses	ssion of the	organizatio	on that	Lare n	eiu an	u aumin	istered to	rune		Yes	No
	(i)	unrelated organizations										3a(i)		
	(ii)	related organizations										3a(ii)		
		Yes" on 3a(II), are the re	_		•							3b		
4		cribe in Part XIII the inte			n's endow	ment f	unds							
Pa	rt VI	Land, Buildings, Complete if the or			" on Forn	ກ່ວວກ	Part	TV li	ne 11a	See Fo	rm 990 Pa	ert X line 1	0	
	Desc	cription of property	(a) Cost or ot	her basıs	(b) Cost o						depreciation		ook valu	e
4 -	les !							E7 0C2						157.000
	Land							57,862			2 121 204			157,862
	Build	_					4,9	36,709			2,131,294			2,805,415
		ehold improvements					E7 4	94 07F			5 660 067		F-	1 916 750
		oment						84,825 71,941			5,668,067 285,658		5.	486,283
е	otne	r	1		I		/	, 1,J41	1		203,030			400,203

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

Scriedule D (Form 990) 2016				Page
Part VII Investments—Other Securities. Complete if	the organizat	ion answ	ered "Yes" on Form 990	, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category		(b)	(c) Method	of valuation
(including name of security)		Book value		year market value
(1) Financial derivatives		74.45		
(2) Closely-held equity interests				
(3)Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related.	<u> </u>			
Complete if the organization answered 'Yes' on	Form 990, P	art IV, lır	ne 11c. See Form 990, P	art X, line 13.
(a) Description of investment	(b) Book v	alue		of valuation ear market value
(1)PATRONAGE CAPITAL - WFEC	12	,896,712		С
(2)PATRONAGE CAPITAL - NISC (3)PATRONAGE CAPITAL - CFC		72,852 984,339		C C
(4)PATRONAGE CAPITAL - FEDERATED INSURANCE		124,169		С
(5)PATRONAGE CAPITAL - AECI (6)PATRONAGE CAPITAL - OTHER		120,715 21,599		C C
(7)CAPTIAL TERM CERTIFICATES - CFC		605,517		C
(8)USDA ECONOMIC DEVELOPMENT LOANS (9)		46,610		С
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answers		,872,513	# TV long 11 d Con France 00	O Part V Ivan 15
(a) Descripti		11 330, 1 41	erv, mie rra beeronn b	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)				•
Part X Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	answered 'Yo	es' on Foi	rm 990, Part IV, line 116	e or 11f.
1. (a) Description of liability		(b) Bo	ook value	
(1) Federal income taxes				
ACCUMULATED PROVISION FOR POST RETIREMENT BENEFITS			1,929,726	
CONSUMER DEPOSITS			2,005,774	
ACCRUED OPERATING TAXES DEFERRED CREDITS - CONSUMER ADVANCE FOR CONSTRUCTION			61,139 330,000	
DEFERRED CREDITS - OTHER			14,914	
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		4,341,553	
2. Liability for uncertain tax positions In Part XIII, provide the text		to the org		nents that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC	740) Check h	ere if the t	text of the footpote has bee	en provided in Part XIII

Schedule D (Form 990) 2018

Page 4

		venue per Audited Financial Stateme zation answered 'Yes' on Form 990, Part			Return	
1 T		upport per audited financial statements			1	
2 A	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12				
a N	Net unrealized gains (losses) on ii	nvestments	2a			
b D	Donated services and use of facili	ties	2b			
c R	Recoveries of prior year grants .		2c			
d C	Other (Describe in Part XIII)		2d			
e A	Add lines 2a through 2d .		•			
3 S	Subtract line 2e from line 1 .				3	
4 A	Amounts included on Form 990, P	art VIII, line 12, but not on line 1				
a I	nvestment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b 0	Other (Describe in Part XIII) .		4b			
с А	Add lines 4a and 4b		٠		4c	
5 T	otal revenue Add lines 3 and 4c	. (This must equal Form 990, Part I, line 12)			5	
Part 2		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Part			Return	l.
1 T		dited financial statements			1	
	Amounts included on line 1 but no					
		ties	2a			
	Prior year adjustments		2b			
	Other losses		2c			
d C	Other (Describe in Part XIII) .		2d			
	,		·		_ 2e	
					3	
		Part IX, line 25, but not on line 1:				
	· ·	d on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII) .	, , , , , , , , , , , , , , , , , , ,	4b			
			ـــــ		- _{4c}	
		c. (This must equal Form 990, Part I, line 18			5	
Part						
		art II, lines 3, 5, and 9, Part III, lines 1a and 2d and 4b Also complete this part to provide			rt V, line	4, Part X, line 2, Part
	Return Reference			planation		
See Add	ditional Data Table					

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

EIN: 73-0308955

Name: KAY ELECTRIC COOPERATIVE INC

Supplemental Information Explanation

Return Reference

EMPLOYEES OF THE COOPERATIVE HAVE ESTABLISHED A SCHOLARSHIP FUND OF WHICH THE ASSETS AND

PART IV, LINE 2B LIABILITIES ARE HELD BY THE COOPERATIVE

Return Reference	Explanation
PART X, LINE 2	THE COOPERATIVE AND SUBSIDIARY FOLLOW THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF ACCOUNTI NG PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA THE PRIMARY TAX POSITION OF THE COOPERATIVE IS ITS FILING STATUS AS A TAX EXEMPT ENTITY THE COOPERATIVE AND SUBSI DIARY DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT ITS TAX POSITION WILL BE SUSTAINED U

Supplemental Information

PON EXAMINATION BY THE INTERNAL REVENUE SERVICE (IRS), OR OTHER STATE TAXING AUTHORITY AND

THAT ALL TAX BENEFITS ARE LIKELY TO BE REALIZED UPON SETTLEMENT WITH TAXING AUTHORITIES

Supplemental Information	
Return Reference	Explanation
PART VII	THE AMOUNT OF INVESTMENTS - OTHER SECURITIES ON FORM 990, PAGE 11, PART X, LINE 12 DOES NO T EQUAL OR EXCEED 5% OF THE TOTAL ASSETS ON FORM 990, PAGE 11, PART X, LINE 16, COLUMN B CONSEQUENTLY, IN ACCORDANCE WITH IRS INSTRUCTIONS, SCHEDULE D, PART VII HAS BEEN LEFT BLAN K

Supplemental Information Return Reference Explanation lacktriangle THE AMOUNT OF OTHER ASSETS ON FORM 990, PAGE 11, PART X, LINE 15 DOES NOT EQUAL OR EXCEED PART IX 1.5% OF THE TOTAL ASSETS ON FORM 990, PAGE 11, PART X, LINE 16, COLUMN B. CONSEQUENTLY, IN A CCORDANCE WITH IRS INSTRUCTIONS, SCHEDULE D. PART IX HAS BEEN LEFT BLANK

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19331	6003	419	
Sch	nedule J	Co	mpensati	ion Information	10	1B No	1545-0	0047	
(For	m 990)	For certain Office	•						
		► Complete if the orga	Compensa anization answ	ited Employees vered "Yes" on Form 990, Part IV	, line 23.	2018			
Denar	tment of the Treasury	▶ Go to www.irs.ao		to Form 990. instructions and the latest inform)pen i			
Intern	al Revenue Service		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Insp	ectio	n	
	me of the organiza ELECTRIC COOPERA				Employer identificat	tion nu	ımber		
					73-0308955				
Pa	rt I Questi	ons Regarding Compensat	ion						
1a				the following to or for a person liste y relevant information regarding the			Yes	No_	
	☐ First-class	s or charter travel		Housing allowance or residence for	personal use				
	Travel for	companions		Payments for business use of perso	nal residence				
		nification and gross-up payments	; <u> </u>	Health or social club dues or initiati					
	☐ Discretion	nary spending account	Ш	Personal services (e g , maid, chau	ffeur, chef)				
b		xes in line 1a are checked, did th all of the expenses described abo		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1b			
2				or allowing expenses incurred by all	- 1-2	2			
	directors, truste	es, officers, including the CEO/E.	xecutive Director	r, regarding the items checked in line	e la ^r				
3	organization's C	EO/Executive Director Check all	that apply Do r	ed to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain					
		-							
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study					
		of other organizations	<u> </u>	Approval by the board or compensa	ition committee				
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a				
_	_	ance payment or change-of-cont	rol paymont?			4a		No	
a b		r receive payment from, a supple		ified retirement plan?		4b		No	
c	•	r receive payment from, a sapple r receive payment from, an equit	•	· ·		4c		No	
	•		•	plicable amounts for each item in Par	t III				
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.					
5	For persons liste		n A, line 1a, did t	the organization pay or accrue any					
а	The organization	n?				5a			
b	Any related orga					5b			
	•	5a or 5b, describe in Part III							
6		ed on Form 990, Part VII, Sectior ontingent on the net earnings of	n A, line 1a, did t	the organization pay or accrue any					
а	The organization					6a			
b	Any related orga					6b			
_	•	6a or 6b, describe in Part III		No. of the second secon	ن				
7		ed on Form 990, Part VII, Sectior escribed in lines 5 and 6? If "Yes		the organization provide any nonfixe rt III	a	7			
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8			
9	If "Yes" on line 5 53 4958-6(c)?	8, did the organization also follow	v the rebuttable	presumption procedure described in	Regulations section	9			
For I	Panerwork Redu	iction Act Notice, see the Inst	ructions for Fo	orm 990. Cat No. 5	50053T Schedule J	(Form	990)	2018	

Part III Officers,	Dire	ctors, Trustees, Key	y Employees, and Hi	ghest Compensated	Employees. Use dup	licate copies if addition	nal space is needed.	
			ted on Schedule J, report t are not listed on Form 9		organization on row (i) ar	nd from related organizati	ons, described in the	
			dividual must equal the to		Part VII, Section A, line	1a, applicable column (D)) and (E) amounts for tha	t ındıvıdual
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base (ii) Bonus & incentive compensation reportable compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 TIM RODRIGUEZ CEO	(i)	201,470	507	3,824	152,827	26,965	385,593	0
CEO	(ii)	0	0	0	0	0	0	0
2 JD SOULEK COO	(i)	121,200	2,691	5,417	64,373	24,797	218,478	0
	(ii)	0	0	0	0	0	0	0
3 DOUG WORLEY DIRECTOR OF ENGINEERING	(i)	125,170	3,541	2,457	74,550	26,103	231,821	0
	(ii)	0	0	0	0	0	0	0
4 JIM MAUPIN DIRECTOR OF OPERATIONS	(i)	106,400	2,691	2,342	42,900	23,083	177,416	0
	(ii)	0	0	0	0	0	0	0
5 DAVE CHILDERS DIRECTOR OF ACCOUNTING	(i)	120,973	1,791	885	35,187	25,021	183,857	0
	(ii)	0	0	0	0	0	0	0

Page 3

Schedule J (Form 990) 2018

OTHER WORDS. THE OLDER A PLAN PARTICIPANT IS. THE GREATER THE INCREASE IN THAT INDIVIDUAL'S CHANGE IN ACTUARIAL VALUE, ALL OTHER THINGS BEING EQUAL BECAUSE THIS RELATES TO A MULTI-EMPLOYER PLAN, CASH CONTRIBUTIONS TO THE PLAN IN LIEU OF THE ACTUARIAL INCREASE ARE EXPENSED. IN THE FINANCIAL STATEMENTS TIM RODRIGUEZ ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$ 140,497 EMPLOYER CONTRIBUTION TO 401(K) PLAN 12,330 TOTAL REPORTED IN COLUMN C \$ 152,827 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (140,497) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 56,836 EXPENSE TO THE COOPERATIVE \$ 69,166 JD SOULEK ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$ 56,626 EMPLOYER CONTRIBUTION TO 401(K) PLAN 7.747 TOTAL REPORTED IN COLUMN C \$ 64.373 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (56.626) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 33.175 EXPENSE TO THE COOPERATIVE \$ 40.922 DOUG WORLEY ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$ 66,616 EMPLOYER CONTRIBUTION TO 401(K) PLAN 7,934 TOTAL REPORTED IN COLUMN C \$ 74,550 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (66.616) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 37.278 EXPENSE TO THE COOPERATIVE \$ 45.212 JIM MAUPIN ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$ 36,355 EMPLOYER CONTRIBUTION TO 401(K) PLAN 6,545 TOTAL REPORTED IN COLUMN C \$ 42,900 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (36,355) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 29,712 EXPENSE TO THE COOPERATIVE \$ 36,257 DAVE CHILDERS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$ 27,669 EMPLOYER CONTRIBUTION TO 401(K) PLAN 7,518 TOTAL REPORTED IN COLUMN C \$ 35,187 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (27,669) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 35,273 EXPENSE TO THE COOPERATIVE \$ 42,791

2018 Schedule 1

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493316003419				
SCHEDUL	E O Supplemental Information to Form	1 990 or 990-F7	No 1545-0047	
(Form 990 or EZ)	990- Complete to provide information for responses to a Form 990 or 990-EZ or to provide any additio	specific questions on	2018	
——, Department of the T	► Attach to Form 990 or 990-E reasury ► Go to <u>www.irs.gov/Form990</u> for the lates		en to Public Ispection	
KAY ELECTRIC COOPERATIVE INC		Employer identification 73-0308955	n number	
990 Schedul	e O, Supplemental Information			
Return Reference	Explanation			
FORM 990, PART VI, SECTION A, LINE 4	AT THE COOPERATIVE'S ANNUAL MEETING, THE MEMBERS OF THE THE BYLAWS THE BYLAWS WERE CLARIFIED TO - 1) ALLOW FOR F S FOR DISTRICT MEETINGS WHICH WOULD BE MORE CONVENIENT PROVIDE FOR ELECTION OF A TRUSTEE AT THE DISTRICT MEETING CTION PROCESS, AND 3) ADDRESSING THE TRUSTEE ELECTION PF BTAIN A QUORUM AT DISTRICT MEETINGS IT WAS EMPHASIZED THE COURAGE TRUSTEE CANDIDACY OPPORTUNITY AND ASSURE TRATIVE	LEXIBILITY TO DETERMINE LOCATION AND COMFORTABLE FOR THE MEMBI B, RATHER THAN CONDUCTING THE E ROCESS IN THE EVENT OF FAILURE TO HAT THE PROPOSAL WAS WRITTEN TO	ERS, 2) LE O O EN	

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990, PART VI,	THE COOPERATIVE WAS FORMED BY THE MEMBERS TO PROVIDE ELECTRIC SERVICE AT COST ON A COOPERATIVE BASIS
SECTION A, LINE 6	

Explanation

Return Explanation

LINE 7A

FORM 990, THE MEMBERS OF THE COOPERATIVE VOTE ON THE BOARD OF DIRECTORS ELECTIONS ARE DONE ON A ONE PART VI, MEMBER ONE VOTE BASIS SECTION A,

Return Explanation
Reference

FORM 990,	THE FOLLOWING ACTS REQUIRE APPROVAL OF THE MEMBERS OF THE COOPERATIVE 1 DISSOLUTION/LIQU
PART VI,	DATION OF THE COOPERATIVE 2 MERGER OR CONSOLIDATION OF THE COOPERATIVE WITH ANOTHER ORGA
SECTION A,	NIZATION 3 DISPOSAL OF A SUBSTANTIAL PORTION OF THE COOPERATIVE'S ASSETS 4 AMENDMENT TO
LINE 7B	THE ARTICLES OF INCORPORATION 5 AMENDMENT TO THE BYLAWS

Return Explanation
Reference

FORM 990, THE COOPERATIVE HAS NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY THE REFORE, AND PURSUANT TO FORM 990 INSTRUCTIONS, THE QUESTION HAS BEEN ANSWERED "NO" SECTION A, LINE 8B

Return Explanation
Reference

LINE 11B

FORM 990, MANAGEMENT PROVIDED A COMPLETE COPY OF THE FORM 990 TO THE BOARD PRIOR TO ELECTRONIC FILING PART VI, SECTION B.

Explanation Return Reference

FORM 990. ON AN ANNUAL BASIS. THE COOPERATIVE WILL REQUIRE THE BOARD OF TRUSTEES, OFFICERS, AND HIGH PART VI. LY COMPENSATED EMPLOYEES TO COMPLETE AND SIGN A CONFLICT OF INTEREST CERTIFICATION AND DIS CLOSURE FORM TRUSTEES, OFFICERS, AND HIGHLY COMPENSATED EMPLOYEES ARE REQUIRED TO DISCLOS E ANY ACTION OR SITUATION THAT MIGHT VIOLATE THE POLICY TO THE FULL BOARD OF DIRECTORS AS SOON AS POSSIBLE

SECTION B. LINE 12C

990 Schedule O, Supplemental Information

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,	THE BOARD OF TRUSTEES USE A COMPENSATION SURVEY WHEN DETERMINING THE COMPENSATION OF THE C
PART VI,	EO THE SURVEY SHOWS COMPARATIVE SALARIES FOR CEOS FROM SIMILARLY SITUATED COOPERATIVES LO
SECTION B,	CATED IN OKLAHOMA AND THE NATION THE CEO USES A COMPENSATION SURVEY WHEN DETERMINING THE
LINE 15	COMPENSATION OF THE COOPERATIVE'S OTHER EMPLOYEES MEETING THE DEFINITION OF OFFICER AND KE
	Y EMPLOYEES, IF ANY THE SURVEY INCLUDES SALARIES FROM SIMILARLY SITUATED COOPERATIVES THR
	OUGHOUT OKLAHOMA AND THE NATION

Return Explanation
Reference

FORM 990, THE COOPERATIVE WILL PROVIDE A COMPLETE COPY OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTER PART VI, EST POLICY, AND AUDITED FINANCIAL STATEMENTS TO ANY MEMBER WHO REQUESTS A COPY OF ANY SUCH SECTION C, LINE 19

Return Reference	Explanation
FORM 990, PART VII, COLUMN F	IN ORDER TO PROVIDE RETIREMENT BENEFITS TO ITS EMPLOYEES, THE COOPERATIVE HAS ESTABLISHED A DEFINED CONTRIBUTION PLAN UNDER SECTION 401(K) OF THE INTERNAL REVENUE CODE EMPLOYER CO NTRIBUTIONS TO THE PLAN ARE MADE PURSUANT TO THE PLAN DOCUMENT ADDITIONALLY, THE COOPERAT IVE PARTICIPATES IN A MULTI-EMPLOYER DEFINED BENEFIT PLAN CONTRIBUTIONS TO THIS PLAN ARE BASED ON THE FULL FUNDING LIMITATION OF SUCH PLAN EMPLOYER CONTRIBUTIONS FOR BOTH PLANS A RE AVAILABLE TO PARTICIPATING EMPLOYEES, INCLUDING OFFICERS AND HIGHLY COMPENSATED EMPLOYE ES, MEETING THE ELIGIBILITY REQUIREMENTS OF SUCH PLANS THE COOPERATIVE ALSO PROVIDES HEAL TH, DENTAL AND LIFE INSURANCE TO ALL ELIGIBLE EMPLOYEES THROUGH A QUALIFIED PLAN THE AMOU NTS REPORTED ON PART VII, COLUMN (F) FOR THE OFFICERS AND HIGHLY COMPENSATED EMPLOYEES IS COMPRISED OF ACTUARIAL INCREASE IN THE DEFINED BENEFIT PLAN, THE TOTAL AMOUNT CONTRIBUTED BY THE COOPERATIVE TO THE DEFINED CONTRIBUTION PLAN AND INSURANCE PAID ON BEHALF OF AND FO R THEIR BENEFIT IN ADDITION TO THE ABOVE PENSION PLANS, THE COOPERATIVE ALSO PROVIDES POS T-RETIREMENT HEALTH INSURANCE BENEFITS THROUGH AN UNFUNDED WELFARE BENEFIT PLAN THE VALUE OF THESE BENEFITS HAS NOT BEEN ESTIMATED

Return Explanation

PATRONAGE DIVIDENDS RESULT FROM THE PURCHASE OF WHOLESALE POWER FROM A GENERATION & TRANSM ISSION COOPERATIVE PATRONAGE DIVIDENDS ALSO RESULT FROM THE PAYMENT OF INTEREST FROM COOPERATIVE BANKS AND THE PURCHASE OF SUPPLIES AND SERVICES FROM OTHER COOPERATIVE ORGANIZATIO NS THE EXPENSES ASSOCIATED WITH PURCHASES FROM AND PAYMENTS TO SUCH COOPERATIVE ORGANIZAT IONS ARE A DIRECT COMPONENT OF COST OF THE ELECTRIC SERVICE PROVIDED BY THE COOPERATIVE TO ITS MEMBERS

Return Reference	Explanation
FORM 990, PART IX	ALTHOUGH THE COOPERATIVE IS NO LONGER A RURAL UTILITIES SERVICE (RUS) BORROWER, ITS ACCOUN TING RECORDS ARE MAINTAINED IN ACCORDANCE WITH THE RUS UNIFORM SYSTEM OF ACCOUNTS (USOA) P RESCRIBED FOR RUS ELECTRIC BORROWERS THE USOA DOES NOT RECORD EXPENSES IN THE GENERAL EXP ENSE CATEGORIES PROVIDED ON PART IX LINES 1 - 23 THE COOPERATIVE SEPARATELY REPORTS SALAR IES AND WAGES, EMPLOYEE BENEFITS AND PAYROLL TAXES THAT ARE ALLOCATED IN ACCORDANCE WITH T HEIR ACCOUNTING SYSTEM, BUT OTHER EXPENSES THAT ARE DESCRIBED IN LINES 1 - 23 ARE REPORTED ON LINE 24 UNDER THE EXPENSE CATEGORIES REQUIRED BY THE USOA

990 Schedule O, Supplemental Information

Return
Reference

Explanation

CALABLES AND WACES ARE ALLOCATED TO ASSET LIABILITY. AND EXPENSE ACCOUNTS BASED ON THE AC

FORIVI 990,	SALARIES AND WAGES ARE ALLOCATED TO ASSET, LIABILITY, AND EXPENSE ACCOUNTS BASED ON THE AC
PART IX,	COUNTING SYSTEM DESCRIBED ABOVE THE FOLLOWING SCHEDULE RECONCILES AMOUNTS REPORTED ON LIN
LINES 5-7	ES 5-7 TO TOTAL WAGES ACCRUED AND/OR PAID TOTAL PER LINES 5-7 \$ 2,599,553 LESS TRUSTEE F
	EES REPORTED ON FORM 1099-MISC (282,748) LESS EMPLOYEE OFFICER BENEFITS INCLUDED IN LINE
	5 (268,962) PLUS SALARIES AND WAGES ALLOCATED TO NONOPERATING MARGIN 79,741 PLUS SALARIE
	S AND WAGES CAPITALIZED DIRECTLY TO PLANT 1,185,839 PLUS SALARIES AND WAGES CAPITALIZED/E
	XPENSED INDIRECTLY THROUGH CLEARING AND OTHER ACCOUNTS 298,532 TOTAL WAGES ACCRUED AND/OR
	PAID \$ 3,611,955
J	

EODM 000

Return Reference	Explanation
FORM 990, PART IX, LINE 24	ADMINISTRATIVE & GENERAL EXPENSE IS COMPRISED OF THE FOLLOWING ADMINISTRATIVE & GENERAL \$ 801,806 OFFICE SUPPLIES 219,853 OUTSIDE SERVICES 147,430 WORKMAN'S COMPENSATION & INSURAN CES 247,838 EMPLOYEE BENEFITS 82,192 DIRECTORS 335,963 GENERAL MANAGER 733 ADVERTISING 36, 485 EDUCATIONAL 118,790 MEETINGS 143,280 MISCELLANEOUS GENERAL 124,654 MAINTENANCE OF GENE RAL PLANT 297,024 TOTAL ADMIN & GENERAL EXP PER FINANCIAL STATEMENTS \$ 2,556,048 LESS REC LASS OF DIRECTOR FEES TO PART IX, LINE 5 (282,748) LESS RECLASS OF LABOR TO PART IX, LINE S 5 & 7 (823,537) LESS RECLASS OF BENEFITS TO PART IX, LINES 8-10 (556,056) TOTAL ADMIN & GENERAL EXPENSE PER FORM 990, PART IX \$ 893,707

Return Reference	Explanation
FORM 990, PART IX, LINE 4	PURSUANT TO THE FORM 990 INSTRUCTIONS, THE AMOUNT OF PATRONAGE DIVIDENDS PAID TO THE MEMBE RS (HEREINAFTER REFERRED TO AS "PATRONS") SHOULD BE REPORTED ON PART IX, LINE 4 THE PHRAS E "PATRONAGE DIVIDENDS PAID" REFERS TO THE PROCESS, SUBSEQUENT TO YEAR-END, BY WHICH THE C COPERATIVE ALLOCATES PATRONAGE CAPITAL TO AND, THEREFORE, OPERATES AT COST WITH ITS PATRON S THE COOPERATIVE'S TAX EXEMPT PURPOSE IS TO PROVIDE ELECTRICITY TO ITS PATRONS AND TO DO SO ON A COOPERATIVE BASIS TAX LAW DEFINES "OPERATING ON A COOPERATIVE BASIS" AS SUBORDIN ATION OF CAPITAL, DEMOCRATIC CONTROL, AND OPERATION AT COST THE COOPERATIVE OPERATES AT C OST THROUGH THE ALLOCATION OF TRUE PATRONAGE DIVIDENDS (ALSO REFERRED TO AS ALLOCATIONS OF PATRONAGE CAPITAL) TO ITS PATRONS PATRONAGE DIVIDENDS ARE CONSIDERED PAID IF THE ALLOCAT ION IS MADE (1) PURSUANT TO A PRE-EXISTING OBLIGATION, (2) FROM THE MARGINS PRODUCED FROM THE TRANSACTIONS DONE WITH OR FOR PATRONS, AND (3) IN A FAIR AND EQUITABLE MANNER ON THE B ASIS OF PATRONAGE (I E PURCHASES) ADDITIONALLY, THE ALLOCATION OF PATRONAGE DIVIDENDS SHOULD BE MADE WITHIN A REASONABLE TIME PERIOD AFTER THE CLOSE OF THE COOPERATIVE'S YEAR-END OF DECEMBER 31 EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE DIVIDEND IS PROVIDED FOR IN THE NON-PROFIT OPERATION ARTICLE OF THE COOPERATIVE'S BYLAWS THE AMOUNT REPORTED ON PART IX, LINE 4 REPRESENTS THE AMOUNT OF PATRONAGE CAPITAL THAT IS EITHER ALLOCATED OR TO BE ALLOCATED TO THE PATRONS RESULTING FROM THEIR PURCHASE OF ELECTRICITY FROM THE COOPERATIVE OPERATES AT COST WITH ITS PATRONAGE DIVIDENDS AS AN EXPENSE FOR FORM 990 REPORTING PATRONAGE DIVIDENDS ARE NOT AN EXPENSE FOR FINANCIAL STATEMENTS PREPARED IN AC CORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, HOWEVER

Return Explanation

FORM 990, OTHER EXPENSES IS COMPRISED OF THE FOLLOWING CUSTOMER SERVICE & ACCOUNTS \$ 86,551 OPERATI NG TAXES 264,017 ADMINISTRATIVE AND MANAGEMENT SERVICE COSTS 105,444 ELECTRICIAN SERVICE 4 6,925 OTHER FEES AND DUES 2,837 GENERATOR INSTALLATION 257,691 TOTAL OTHER EXPENSE PER FOR M 990. PART IX \$ 763,465

Return Explanation
Reference

FORM 990,	ALL GRANTS, SPONSORSHIPS, AND/OR DONATIONS ARE MADE TO NON-PROFIT AND CIVIC ORGANIZATIONS
PART IX,	THAT ARE LOCATED IN THE COOPERATIVE'S SERVICE AREA, AND ARE INTENDED TO IMPROVE THE COMMUN
LINE 1	ITIES IN WHICH OUR MEMBERS RESIDE EACH GRANT, SPONSORSHIP, AND/OR DONATION MADE DURING TH
	E YEAR WAS BELOW THE REPORTING THRESHOLD OF SCHEDULE I. PART II

Return Explanation
Reference

FORM 990,	PATRONAGE CAPITAL ALLOCATED OR TO BE ALLOCATED 2,477,819 PATRONAGE CAPITAL RETIRED - TOTA
PART XI,	L -1,212,523 PATRONAGE CAPITAL RETIRED - UNCLAIMED 58,884 NET CHANGE IN MEMBERSHIP 2,855
LINE 9	OCI - POSTRETIREMENT BENEFIT ADJUSTMENT -123,504 EQUITY METHOD INCOME FROM SUBSIDIARY -
	7.402 NET CHANGE IN OTHER EQUITIES -1.766 DONATED CAPITAL 39.716

Return Explanation
Reference

FORM 990,	THE BOARD AS A WHOLE IS RESPONSIBLE FOR OVERSEEING THE FINANCIAL STATEMENT AUDIT AND SELEC
PART XII,	TING THE INDEPENDENT FINANCIAL STATEMENT AUDITOR PROCEDURAL CHANGES DID NOT OCCUR DURING
LINE 2C	THE YEAR

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -										DLN: 93493	316003	419
SCHEDULE R (Form 990) Department of the Treasury	> (Related Complete if the organ	nization ar	swered "Yes	s" on Form Form 990.	990, Parl	IV, line 33	, 34, 35b,		37.		Open to	18 Public	
Internal Revenue Service Name of the organization KAY ELECTRIC COOPERATIVE INC										loyer identif 308955	ication		ection	
Part I Identification	of Disregarded E	ntities Complete If	the organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3						
Name, address, and	(a) EIN (If applicable) of disr	egarded entity		(b) Primary a			c) nicile (state n country)	(d) Total inco	ome	(e) End-of-year as	ssets	(f Direct co ent	ntrolling	
Part II Identification of related tax-exem	of Related Tax-Ex		is Comple	te ıf the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	/, line 34 be	cause	it had one or	more	
Name, address, and	(a) d EIN of related organizati	ion	Prim	(b) ary activity	Legal dom	c) ncile (state n country)	(d) Exempt Cod			(e) harity status nn 501(c)(3))	Dır	(f) rect controlling entity	Section (13) cor enti Yes	512(b) trolled
For Paperwork Reduction Ac	t Notice, see the Inc	structions for Form 9	90.		٦	t No 5013	 B5Y				Sche	edule R (Form	990) 20	18

IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Corneration						Yes	No		Yes	No	
IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Corneration											
IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Corneration											
IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Corneration											
IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Corneration											
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IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Corneration											
IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Corporation											
IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Corporation											
IV Identification of Related Organiz because it had one or more related or	zations Taxable as a	Cornoration											
	organizations treated a	as a corporation	or Trus on or tru	t Complete st during th	of the orgone tax year	ganızatıon ar ar.	nswered "Yes'	" on For	m 990	0, Part IV,	line .	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c Leg dom	gal nicile r foreign	Direct c	(d)	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	Share of year asse	end-of- ar	- Percen owner	tage	(1	(i) ection 5 13) con entit Yes
SERVICES INC	WATER UTILITY	OH		KAY ELEC		С	295,660	1	155,352	100 000) %		Yes
848 ELL, OK 74631 628				COOPERA	ATIVE INC								
												+	\dashv

(1)KAY SERVICES INC

(2)KAY SERVICES INC

(3)KAY SERVICES INC

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

(a) Name of related organization

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses . . .

Part V	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.		
Note.	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	Ye	s No
1 During th	ne tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receij	pt of (i) Interest, (ii)annulties, (iii) royalties, or(iv) rent from a controlled entity	1a	No
b Gıft, g	grant, or capital contribution to related organization(s)	1b	No
c Gıft, g	grant, or capital contribution from related organization(s)	1c	No
d Loans	or loan guarantees to or for related organization(s)	ld	No
e Loans	or loan guarantees by related organization(s)	1e	No
			\top
f Divide	nds from related organization(s)	1f	No
g Sale o	of assets to related organization(s)	1g	No

Page 3

No

No

No

1n

1o | Yes

1q | Yes

1r

1s Yes

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

LABOR & BENEFITS

N/A LESS THAN \$50,000

N/A LESS THAN \$50,000

d	Loans or loan guarantees to or for related organization(s)	1d	No
e	Loans or loan guarantees by related organization(s)	1e	No
f	Dividends from related organization(s)	1f	No
g	Sale of assets to related organization(s)	1 g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1i	No

d	Loans or loan guarantees to or for related organization(s)	1d	No
е	Loans or loan guarantees by related organization(s)	1e	No
f	Dividends from related organization(s)	1f	No
g	Sale of assets to related organization(s)	1g	No
h	Purchase of assets from related organization(s)	1h	No
i	Exchange of assets with related organization(s)	1i	No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	No
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11	No
l m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	No

(b)

Transaction

type (a-s)

0

Q

S

(c)

Amount involved

159,782

0

0

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	Legal Predominant on come (state or foreign unrelated,		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate r allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
	ı									Schedul	e R (Form	1 99	0) 2018

