For Paperwork Reduction Act Notice, see the separate instructions.

	990
Form	33 6

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

2018

Den	artment of t	he Treasury	► Do not enter social	security	numbers on	this form a	s it may	be made pub	olic.		Open to Public	
Inter	nal Revenu	e Service	► Go to www.irs.gov/Form990 for instructions and the latest information.							Inspection		
A	For the 2	2018 calen	dar year, or tax year beginning			, 2018,	and end	ding	_		, 20	
8	Check if a	pplicable C	Name of organization LANE ELEC	TRIC CC	OPERATIVE,	INC			DE	mploye	er identification number	
	Address c	hange	Doing business as						1		93-0209125	
	Name cha	inge	Number and street (or P O box if ma	all is not de	elivered to street	address)	Room	/suite	E Telephone number			
	Initial retu	rn 7	87 BAILEY HILL RD								541-484-1151	
	Final return	/terminated	City or town, state or province, cour	itry, and ZI	P or foreign post	al code			1			
	Amended	return E	UGENE OR 97402		- · - · -				G G	iross re	ceipts \$ 26,163,511	
	Applicatio	n pending F	Name and address of principal office	r DEB	ORA WILSON			H(a) Is this a	a group ri	eturn for s	ubordinates? Yes V No	
		7	87 BAILEY HILL RD EUGENE,	OR 9740	2			H(b) Are a	all subo	rdinates	ıncluded? 🗌 Yes 🔲 No	
<u>. </u>	Tax-exem	pt status	501(c)(3) S01(c) (12)◀	(insert no	4947(a)(1) or	□ 527	₹ if '	"No," a	ittach a	list (see instructions)	
<u>J</u>	Website:	▶ www	laneelectric com					H(c) Grou	пр ехег	mption i	number ►	
<u>K</u>	Form of or	ganization 🗸	Corporation Trust Associa	tion 🔲 C	other ►	LY	ear of forr	nation 193	9 N	1 State	of legal domicile OR	
Р	art I	Summa	ry								·	
	1 1	Briefly des	cribe the organization's miss	ion or m	ost significah	it activities	s					
Se	[PROVIDE E	LECTRIC SERVICE TO APPRO	XIMATE	LY 10,000 ME	MBERS						
nar	l .	•••••										
Ver	2 (Check this	box ▶ 🔲 if the organization	discontir	nued its oper	ations or c	dispose	d of more tha	an 25	% of ုı	ts net assets.	
ၓၟ	1 8	Number of	f voting members of the gove	rning bo	dy (Part VI, li	ne 1a) .			ļ	3	7	
οŏ	1		f independent voting member		-			b) .		4	7	
ij			ber of individuals employed ir		•	(Part V, lın	ne 2a)			5	52	
Activities & Governance	1		ber of volunteers (estimate if i			•			٠	6	0	
Ă	1		lated business revenue from l						.	7a	0	
	d	Net unrela	ted business taxable income	from Fo	rm 990-T, lin	e 38				7b		
e								Prior	Year		Current Year	
	1		ons and grants (Part VIII, line			•				0	0	
Revenue	1	· · · · · · · · · · · · · · · · · · ·								3,000	25,854,049	
Ŗ	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)								59,894 39		
_	1		nue (Part VIII, column (A), line							7,769	270,215	
			nue-add lines 8 through 11 (n						26,85		26,163,511	
	1		d similar amounts paid (Part I			-3)	•		23,830 2			
	l .	•	aid to or for members (Part IX							5,242	1,541,650	
ses	1		ries, other compensation, employee benefits (Part IX, column (A), lines 5-10)						58	9,213	605,768	
eus			nal fundraising fees (Part IX, c			•	•			0	0	
Expenses	I .		raising expenses (Part IX, col				0	<u> </u>				
_			enses (Part IX, column (A), lin],		23,23		23,697,409	
			nses Add lines 13-17 (must			ДÆЖ, ime ∠	(3)		26,54		25,868,219	
	19	revenue i	ess expenses Subtract line 1	o II Dini II	12	<u> 8</u>	1	Beginning of 0		3,514	295,292 End of Year	
Net Assets or Fund Balances	20	Total sacs	ts (Part X, line 16)	<u> </u>	APR 2.9 2	019 19		—				
Asse	20		•	5	m; 10 2.0 L	019 52	<u>:</u>]		67,65		69,008,425	
e de la	21 22 1		ities (Part X, line 26)	21.62	SIDE TAI	LIT	'		37,88		38,637,927	
	art II		or fund balances Subtract li	16 21 (10	HENN,	<u>U1</u>			<u> 29,77</u>	1,053	30,370,498	
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			te Declare that make examined this re- te Declaration of preparer (other than								ly knowledge and belief, it is	
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Sig	an I	Signat	ure of officer						Date	<i>(</i> \sim)	7/11-	
He		DE	BORA D WILSON, GENERA	IMAN	AGER							
	-		or print name and title	TATUTA								
		'	preparer's name	Preparer's	s signature		···]	Date	7	hoo! 「	T . PTIN	
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	eparer		me Þ					Fi	rm's El	<u></u>		
US	se Only	Firm's add					<u>.</u>		hone n			
Ma	v the IRS		this return with the preparer s	shown al	bove? (see in	structions	s)				. Yes No	

Form **990** (2018)

Cat No 11282Y

Statement of Program Service Accomplishments Check Schedule Contains a response or note to any line in this Part III	Form 99	n 990 (2018) ᢩ	Page 2
PROVIDE ELECTRICITY FOR APPROXIMATELY 10,000 MEMBERS	Part _a		line in this Part III
PROVIDE ELECTRICITY FOR APPROXIMATELY 10,000 MEMBERS. Did the organization undertake any significant program services during the year which were not listed on the prior Form 90 or 990-E2? Yes," describe these new services on Schedule O Yes," describe these new services on Schedule O	1		
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27 If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Discribe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(cl2) and 501(cl4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported. 4a (Code (Expenses including grants of \$) (Revenue \$) PROVIDED ELECTRIC SERVICE TO APPROXIMATELY 10,000 MEMBERS THROUGH WHOLESALE PURCHASE OF POWER. MAINTENANCE OF TRANSMISSION AND DISTRIBUTION FACILITIES AS WELL AS OVERALL OPERATION ACTIVITIES. 4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) (Code:) (Expenses \$ including grants of \$) (Revenue \$) If evenue \$) Difference \$) (Revenue \$) Difference \$) (Revenue \$) Difference \$) (Revenue \$)			
2 Did the organization undertake any significant program services during the year which were not listed on the provided from 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. 1 Press," describe these changes on Schedule O. 2 Describe the organization's program service accomplishments for each of its three largest program services, as measured to expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revoluting grants of \$) (Revenue \$) 4a (Code*** (Expenses \$ including grants of \$) (Revenue \$) 4b (Code*** (Expenses \$ including grants of \$) (Revenue \$) 4c (Code***) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code***) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code***) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code***) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code***) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code***) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code****) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code****) (Expenses \$ including grants of \$) (Revenue \$) 4d (Code****) (Expenses \$ including grants of \$) (Revenue \$)			
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3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule 0. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(6)(3) and 501(6)(3) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported. 4a (Code			
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Part				3-
GI F	Checkinet of Hequilion Continues		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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	>	
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_		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III </i>	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		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	177		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	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		✓
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		✓
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓	
f	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	11f	✓	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
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		√
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
-	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		✓
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
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		ļ
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

Parț	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	✓	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	√	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		√
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	ļ	
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	25 <u>a</u>		
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
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		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	_	✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V	• •	V	<u></u>
4	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 1a 143	خضين	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 1a 143 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1b 0	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
·	reportable gaming (gambling) winnings to prize winners?	1c		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			1
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 52			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	√	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>
	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 over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
b	If "Yes," enter the name of the foreign country. ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a		✓
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	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			,
b	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		-
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	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		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
100	against amounts due or received from them) 388,868 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120	-	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u>'</u>
-	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			.
-	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	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?	15		✓.
	If "Yes," see instructions and file Form 4720, Schedule N			<u> </u>
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		√
	If "Yes," complete Form 4720, Schedule O		000	(2010)
		rorr	コンフ	(2018)

Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in	n Schedule O. S	ee ins	tructi	
04	Check if Schedule O contains a response or note to any line in this Part VI	· ·	<u> </u>		<u> </u>
Secti	on A. Governing Body and Management	-		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	la 7		163	110
Ia	If there are material differences in voting rights among members of the governing body, or	<u>, </u>			
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent .	lb 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel	ationship with			
_	any other officer, director, trustee, or key employee?		2		✓
3	Did the organization delegate control over management duties customarily performed by or un supervision of officers, directors, or trustees, or key employees to a management company or other		3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990		4		1
5	Did the organization become aware during the year of a significant diversion of the organization		5		1
6	Did the organization have members or stockholders?		6	✓	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to ele	ect or appoint			
	one or more members of the governing body?	,	7a	√	
b	Are any governance decisions of the organization reserved to (or subject to approval to	by) members,			
	stockholders, or persons other than the governing body?	•	7b	/	
8	Did the organization contemporaneously document the meetings held or written actions under	ertaken during			
	the year by the following: ,				
a	The governing body?	•	8a 8b	√	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	he reached at	OD	•	
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	1	
Secti	on B. Policies (This Section B requests information about policies not required by the	Internal Reven	ue C	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of saffiliates, and branches to ensure their operations are consistent with the organization's exempt		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	1	
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	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	rise to conflicts?	12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the podescribe in Schedule O how this was done	licy? If "Yes,"	12c	1	
13	Did the organization have a written whistleblower policy?	• •	13	▼	
14	Did the organization have a written document retention and destruction policy?	• •	14		/
15	Did the process for determining compensation of the following persons include a review and	d approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a	:	
b	Other officers or key employees of the organization		15b	√	ļ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar with a taxable entity during the year?	r arrangement	 16a		1
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to	ro evaluate its	. 54		
b	participation in joint venture arrangements under applicable federal tax law, and take steps to				
	organization's exempt status with respect to such arrangements?	_	16b		
Secti	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶ OREGON				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable),		(Sec	tion 5	501(c)
	(3)s only) available for public inspection. Indicate how you made these available Check all that a				
	Own website Another's website Upon request Other (explain in Sche	-		!-	
19	Describe in Schedule O whether (and if so, how) the organization made its governing document financial statements available to the public during the tax year.	s, conflict of inte	erest	holicy	, and
20	State the name, address, and telephone number of the person who possesses the organization	's books and red	cords	•	
20	CYNTHIA SCORI F 787 BAIL FY HILL RD FLIGFNE OR 97402	2 2005 44 10.			

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

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

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

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

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

Check this box if neither the organization r	or any relate	d org	anız	atic	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee
				•	C)			[
(A)	(B)	(do n	ot ch		ition	a than a	000	(D)	(E)	(F)
Name and Title	Average		do not check more than one box, unless person is both an					Reportable	Reportable	Estimated
	hours per week (list any	├	er and		lirect	or/trus	÷	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	inst	Officer	Key employee	emg. High	Former	the	organizations	compensation
	related organizations	vidu	Institutional trustee	e	em	nest	Ter	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	o al	onal		ş	e com		(17 27 1005 111100)		and related
	line)	uste	Ę,		ee	g		<u> </u>		organizations
		Ö	tee			Highest compensated employee				
(1) JACK BILLINGS		,								
DIRECTOR	7	✓				 	 	15,800		
(2) HUGH BUERMANN		,								
TREASURER	14	✓		-	┡	<u> </u>	ļ	19,200		
(3) KATHRYN KEABLE		,			1	ŀ				
SECRETARY	13	✓	_			├	-	15,700		
(4) JEANETTE I KESSLER		,	1			İ				
VICE PRESIDENT	16	/	<u> </u>	 				18,850		
(5) SUSAN KNUDSEN OBERMEYER				j]		J		
PRESIDENT	12	/	_	├-	_		├-	17,200		
(6) CHRISTOPHER SEUBERT	4	,								
DIRECTOR	9	✓		-			├	18,475	-	
(7) GERALD SHOREY		,								
DIRECTOR	7	✓		_	<u> </u>		<u> </u>	13,750		
(8) MATTHEW J MICHEL		[[•		
GENERAL MANAGER	49		<u> </u>		/	<u> </u>	ļ	203,869		49,651
(9) DEBORA D WILSON					,					
MANAGER, FINANCE & ADMINISTRATION	43		ļ		/			151,268		56,833
(10) ANTHONY TONCRAY						,				
MANAGER, OPERATIONS & ENGINEERING	40		_	<u> </u>	_	/	-	150,065		41,844
(11) DARIEL K BRADLEY						١,				
JOURNEYMAN LINEMAN	50					✓	<u> </u>	150,395		34,720
(12) HERB ANDERSON										
JOURNEYMAN LINEMAN	49		_			✓	_	142,140		53,516
(13) BRIAN MATTIE				ĺ			1		[
JOURNEYMAN LINEMAN	44		L			✓	_	123,907		61,088
(14) BRYAN DICKIE										
JOURNEYMAN LINEMAN	50		L			_ /		136,873		57,031

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees	(contin	ued)	
			İ		•	C) .t.on							
	(A)	(B)	(do n	ot ch		ition more	than e	one	(D)	(E)		(F)	
	Name and title	Average hours per	box,	unles	s pe	rson	ıs both	n an	Reportable compensation	Reportat compensatio		Estimated amount of	
		week (list any		$\overline{}$		_	or/trus	<u> </u>	from	related		other	
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	l mgh	Former	the	organizati		compensati	
		related organizations	re à	L L	ě	E E	est	ner	organization (W-2/1099-MISC)	(W-2/1099-I	VIISC)	from the organizatio	
		below dotted	or a	mal		9	e c		(** 27 1000 111100)			and related	
		line)	uste	Ę		ee	per					organization	าร
			ě	stee			Highest compensated employee						
	<u> </u>		ļ	<u> </u>	ļ	<u> </u>	<u>a</u> _	ļ					
(15)			}			ŀ							
				_	<u> </u>			ļ					
(16)		ļ		'									
		<u> </u>		<u> </u>	ļ	<u> </u>		ļ					
(17)	•	ļ			ĺ	ĺ	ĺ		Í				
				-		<u> </u>	 -						
(18)													
77.43				<u> </u>		_	<u> </u>	-					
(19)	•••••				l	l	l	1					
					_	_	 						
(20)		ļ											
				_	<u> </u>	ļ	<u> </u>	├-			\rightarrow		
(21)		ļ					ļ		ļ				
					<u> </u>		├	ļ					
(22)													
							ļ	<u> </u>					
(23)													
			Ĺ		_		Ĺ	<u> </u>					
(24)			İ								-		
			ļ				<u> </u>	<u>L</u>					
(25)													
		<u></u>	L			_	<u> </u>	<u>.</u>					•
1b	Sub-total								1,177,492			3	54,683
С	Total from continuation sheets to Part	VII, Sectio	n A					>	0			<u></u> _	0
d	Total (add lines 1b and 1c)							<u> </u>	1,177,492				54,683
2	Total number of individuals (including but		to th	ose	list	ed a	above	e) w	ho received m	ore than \$1	00,00	0 of	
	reportable compensation from the organi	zation >							22				
												Yes	No
3	Did the organization list any former of							emp	oloyee, or high	est compe	ensate	d Maria	عط ا
	employee on line 1a? If "Yes," complete 3	Schedule J	for su	ıch	ındı	vidu	ıal					3	/
4	For any individual listed on line 1a, is the	sum of rep	portal	ble d	com	per	nsatio	n a	nd other comp	ensation fr	om th	е	
	organization and related organizations	greater that	an \$1	150,	000	7 /1	f "Ye	s, "	complete Sch	edule J fo	r suc	h Est	
	individual									•		4 🗸	
5	Did any person listed on line 1a receive of									ation or inc	subivit	al Est	
	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	iedu	ıle J t	for s	such person	<u> </u>	<u>·</u>	5	✓
Section	on B. Independent Contractors						_						
1	Complete this table for your five highest of	compensate	ed inc	depe	end	ent	contr	acto	ors that receive	ed more tha	ın \$10	0,000 of	
	compensation from the organization Rep	ort compe	nsatio	on fo	or th	ne c	alend	lar y	ear ending wit	h or within	the or	ganization's t	ax
	year.							,					
	(A)								(B)			(C)	
	Name and business add	ress							Description of s	ervices		Compensation	
JENSE	N'S TREE SERVICE							RO	W MAINTENAN	CE		1,0	61,160
PROF	ESSIONAL UNDERGROUND							EX	CAVATING			5	92,646
	IT TREE SERVICE, INC							RO	W MAINTENAN	CE			98,373
_	ATES FLAGMAN, INC							FLA	AGGING				76,129
	NAL WOOD TREATING CO INC							Т-	LE TESTING & 1	TREAT			50,530
2	Total number of independent contractor	rs (ıncludır	ng bu	it n	ot I	ımıt	ed to						
•	received more than \$100,000 of compens	•	-						25				

Par	VIII	Statement of Revo		nonse or note to	any line in this l	Part VIII		
		Check if Schedule C	o contains a res	porise of flote to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
nts	1a	Federated campaigns	s 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1b		į.			
ts, (С	Fundraising events	<u>1c</u>		į			
Gff ilar	d	Related organizations						
ns, Sim	e	Government grants (cor						
er të	f	All other contributions, g						
<u>ë</u> €		and similar amounts not inc	<u> </u>	<u></u>				
P P	9	Noncash contributions includ			···			
0 8	h h	Total. Add lines 1a-1	<u> </u>	Business Code				
eur	2a	ELECTRIC REVENUE		221000	25,774,643	25,774,643		
æ	b	DOLE DENTAL		221000	79,406	23,774,043		79,406
ဥ	c			221000	73,400			75,400
Šez	d							
Ë	е							
Program Service Revenue	f	All other program ser						
<u> </u>	g	Total. Add lines 2a-2			25,854,049			
	3	Investment income						
		and other similar amounts)		▶	42,741			42,741
	4		it of tax-exempt b	ond proceeds				
	5	Royalties	(ı) Real	(ii) Personal				
	6a	Gross rents	500	+				
	b	Less. rental expenses	300	1				
	c	Rental income or (loss)	500	 				•
	d	Net rental income or		•	500			500
	7a	Gross amount from sales of	(i) Securities	(II) Other		·		300
		assets other than inventory		15,984				
	b	Less cost or other basis				/		
		and sales expenses		12,490	-			
	C	Gain or (loss)	i	(3,494)				
	ď	Net gain or (loss) .		<u> </u>	(3,494)			(3,494)
Other Revenue	8a ′	Gross income from fuevents (not including \$ of contributions reported See Part IV, line 18	ed on line 1c)					
tþ	b	Less direct expenses	a sb					
0		Net income or (loss) f						
		Gross income from ga See Part IV, line 19						
	b	Less direct expenses				1		
	С	Net income or (loss) f	rom gaming act	ivities ►				1
	10a	Gross sales of in returns and allowance						
		Less. cost of goods s						
	С	Net income or (loss) f		,				
		Miscellaneous P		Business Code				
		SALT CREEK TUNNEL		221000	2,189	2,189		
	b	PATRONAGE DIVIDEN	DS	221000	255,197	255,197		
	2	All other revenue		221000	40.000	40.000		-
	d e	All other revenue . Total. Add lines 11a-		221000	12,329	12,329		
	12	Total revenue. See in		>	269,715 26,163,511	26,044,358		119,153
					20, 103,3 [1]	20,044,330		Form 990 (2018)

Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete 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. (A) (B) (C) (D)

Check if Schedule O contains a response or note to any line in this Part IX									
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations			-					
^	and domestic governments. See Part IV, line 21								
2	Grants and other assistance to domestic individuals See Part IV, line 22	23,392							
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.								
4	Benefits paid to or for members	1,541,650							
5	Compensation of current officers, directors, trustees, and key employees	580,596							
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)								
7	Other salaries and wages .								
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	,							
9	Other employee benefits								
10	Payroll taxes	25,172							
11	Fees for services (non-employees)								
а	Management								
b	Legal								
c C	Accounting Lobbying .								
d e	Professional fundraising services. See Part IV, line 17								
f	Investment management fees			et e Fe Fill to the total total total extended a second control to the control total total total total total to					
9	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	1,297,604							
21	Payments to affiliates .								
22	Depreciation, depletion, and amortization .	2,629,915							
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	ì							
	(A) amount, list line 24e expenses on Schedule O)								
а	PURCHASED POWER	10,117,021							
b	TRANSMISSION & DISTRIBUTION	4,969,233							
c	CUSTOMER & MEMBER SERVICES	1,769,165							
d	GENERAL & ADMINISTRATIVE	2,009,329			· · · · · · · · · · · · · · · · · · ·				
e	All other expenses TAX EXPENSE	905,142							
25	Total functional expenses. Add lines 1 through 24e	25,868,219							
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 ŠOP 98-2 (ASC 958-720)								

of Schedule D

Total liabilities. Add lines 17 through 25

Unrestricted net assets

complete lines 27 through 29, and lines 33 and 34.

Total liabilities and net assets/fund balances . . .

Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and

26

27

Form 990 (2018) Page 11 Rart X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year Cash-non-interest-bearing 1 (30.889) (168.412)2 Savings and temporary cash investments . . . 2 443,144 591,511 3 Pledges and grants receivable, net . 3 4 Accounts receivable, net . . . 4 3,641,115 3.241.990 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L **Assets** 6 7 Notes and loans receivable, net . . 7 Inventories for sale or use 8 956.916 973.522 Prepaid expenses and deferred charges 538.651 9 560,568 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 87,050,317 10b Less accumulated depreciation 57,682,451 10c 27.846.066 59,204,251 11 Investments—publicly traded securities . . 11 12 Investments-other securities See Part IV, line 11 3,794,592 12 3,948,125 13 Investments-program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11. 15 633,746 656,870 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 67,659,726 69,008,425 17 Accounts payable and accrued expenses 17 5,486,601 5,660,737 18 Grants payable 18 19 19 Deferred revenue 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, iabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . 22 23 Secured mortgages and notes payable to unrelated third parties 23 31,135,272 31,724,910 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X

Ba	28	Temporarily restricted net assets		28	
힏	29	Permanently restricted net assets		29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds	7,669,018	30	4,384,145
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ã	32	Retained earnings, endowment, accumulated income, or other funds.	22,102,035	32	25,986,353
é	33	Total net assets or fund balances	29,771,053	33	30.370.498

Form **990** (2018)

69.008.425

1,252,280

38,637,927

25

27

1,266,800

67.659.726

37.888.673 **26**

		Pa	ge 12
			V
_	•	26 16	33,511
			88,219
			5,292
_			1,053
		-0,11	.,000
_			
		30	04,153
	-		
	_	30,37	0,498
_			
		Yes	No
			<u> </u>
	2b	✓	

Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12) . . 2 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 . . . 3 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments . 5 6 Donated services and use of facilities 7 Investment expenses . 7, 8 8 Prior period adjustments . . . Other changes in net assets or fund balances (explain in Schedule O) 9 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 10 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII . Accounting method used to prepare the Form 990.

Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis **b** Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? За b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the 3b required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2018)

Form 990 (2018)

SCHEDULE C (Farm 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

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

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

• Se	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III			
	of organization			Employer ide	ntification number
LANE	ELECTRIC COOPERATIVE I	NC			93-0209125
Part		e organization is exempt unde	er section 501(c	c) or is a section 527	organization.
1		f the organization's direct and inc			
2	•	y expenditures (see instructions)			\$ 4000
3	. •	cal campaign activities (see instruc	tions)		
Part		e organization is exempt unde		c)(3).	
1		excise tax incurred by the organiza			\$
2	· · · · · · · · · · · · · · · · · · ·	excise tax incurred by organization			·
3		ed a section 4955 tax, did it file For	_		Yes No
4a	Was a correction made?				. Yes No
b	If "Yes," describe in Part			, , ,	
Part		e organization is exempt unde	er section 501(c	c), except section 50°	I(c)(3).
1		ly expended by the filing organiz		·	S
2		filing organization's funds contrib	uted to other org	anizations for section	
	527 exempt function acti			P 3	4000
3	Total exempt function of line 17b .	expenditures Add lines 1 and 2.	Enter here and	on Form 1120-POL, ► \$	3 4000
4	Did the filing organization	n file Form 1120-POL for this year?	, , ,		✓ Yes No
5	organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, on ontributions received that were prof fund or a political action committee	enter the amount mptly and directly	paid from the filing organ delivered to a separate i	ization'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) OF	R ACTION COMMITTEE FOR	1750 LIBERTY STREET SE SALEM OR 97302	47-0861601	4000	
(2)					
(3)					
(4)					
(5)					
(6)				••••••	

_	
Page	4

Sched	ule C (Form 990 of 990-EZ) 2018					Page 2
Par	II-A Complete if the organization section 501(h)).	is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ction under
A C	heck In the filing organization belong address, EIN, expenses, and s		• , ,		liated group membe	er's name,
ВС	heck 🕨 🗌 if the filing organization check	ed box A and	"limited control" p	rovisions apply.		
	Limits on Lobby	ing Expendi	tures		(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amounts	paid or incurred.	.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	oublic opinion	(grass roots lobby	/ing)		
b	Total lobbying expenditures to influence	a legislative b	ody (direct lobbyin	g)		
c	Total lobbying expenditures (add lines 1a	and 1b) .				·
d	Other exempt purpose expenditures					<u></u>
е	Total exempt purpose expenditures (add	lines 1c and	ld)			
f	Lobbying nontaxable amount. Enter t columns	ne amount f	rom the following	g table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the a	mount on line 1e			
	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		5 5% of the excess of	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				
9	•			•		
h	3					
i	Subtract line 1f from line 1c If zero or les				(1 5 4700	
j	If there is an amount other than zero	on either line			Tile Form 4/20	Yes □ No
	reporting section 4911 tax for this year?	<u>-</u>			· · · · L	_ 163110
	(Some organizations that made a sec See the	tion 501(h) el separate inst	ructions for lines	e to complete all 2a through 2f.)	of the five column	s below.
	Lobbying	Expenditures	During 4-Year A	veraging Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2 a	Lobbying nontaxable amount					
	Lobbying ceiling amount (150% of line 2a, column (e))					
c	Total lobbying expenditures					
C	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

		(a)		(b)	
	each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No	Α	moun	t
а	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.					
-	Volunteers?			<u> </u>		
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			i		
c	Media advertisements?					_
d	Mailings to members, legislators, or the public?					_
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 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 .	<u></u>				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u> </u>		
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), (or se	ction		
	Mare substantially all (000/ as mare) dues recoved pendeductible by members?				Yes	N
1	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?			1 2	-	╁
2 3	Did the organization make only in-nouse lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the	Drior	voor		-	╁
_	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)				<u> </u>	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."	Ř (b)	Parl	t III-A,	line	3, i
1	Dues, assessments and similar amounts from members	•	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year	•	2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditure next year?		4			
	Taxable amount of lobbying and political expenditures (see instructions)	•	5	ļ		
5	Supplemental Information the the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated gro	1	4\ D-	- U A		_
Pari	the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated gro Instructions), and Part II-B, line 1. Also, complete this part for any additional information.	up iis	ı), Pai	rt II-A,	ines	. a
Pari Provid				ndidata	c who	
Pari Provic 2 (see		00010		nuiuate	2 MALIC	
Pari Provic 2 (see	A Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congr	essio	nai ca			
Pari Provid 2 (see Part I-	A Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congr	essio	nai ca			
Pari Provid 2 (see Part I-		essio	nai ca			
Pari Provid 2 (see Part I-	A Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congr	essio	nai ca			
Pari Provid 2 (see Part I-	A Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congr	essio	nai ca			
Pari Provid 2 (see Part I-	A Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congr	essio	nai ca			
Pari Provid 2 (see Part I-	A Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congr	essio	nai ca			
Pari Provid 2 (see Part I-	A Line 1 Cash contribution to the Action Committee for Rural Electrification (ACRE) which support congr	essio	nai ca			

Schedule C (Forn	1 990 or 990-EZ) 2018 .	Page 4
Part IV	Supplemental Information (continued)	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization 93-0209125 LANE ELECTRIC COOPERATIVE INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I 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 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area 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 Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ►

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 4 5 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 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

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.

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

.	2

P.art	III Organizations Maintaining	Collections of	Art, His	torical 1	reasures	, or Ot	her Similar A	ssets (continued)
3	Using the organization's acquisition, a collection items (check all that apply).							
а	☐ Public exhibition		d	☐ Loan	or exchang	ge progr	rams	
b	☐ Scholarly research		е	☐ Othei	r <u></u>			
С	☐ Preservation for future generations							
4	Provide a description of the organizat XIII.	ion's collections	and expla	ain how t	hey further	the org	anization's exe	empt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather							
Part	Escrow and Custodial Arra Complete if the organization		" on For	m 990, f	Part IV, line	e 9, or	reported an a	mount on Form
1a	990, Part X, line 21. Is the organization an agent, trustee, included on Form 990, Part X?		ner intern				other assets	not ☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa							
_	ii roo, oxpiair alo ar angomon ii r	are surre de la compr	010 1110 10		45.01		T	Amount
С	Beginning balance					1c		
ď	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amour		art X. line	21, for e	scrow or c			ty? ☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa							<i>,</i>
	Endowment Funds.			1				
	Complete if the organization	answered "Yes	" on For	m 990, F	art IV, line	e 10.		
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance							·
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
	Other expenditures for facilities and programs			•				
f	Administrative expenses							
g	End of year balance	•						
2	Provide the estimated percentage of the	he current year er	nd balanc	e (line 1a	, column (a	ı)) held a	3S.	
а	Board designated or quasi-endowmer			, ,	,	,,		
b	Permanent endowment ▶							
С	Temporarily restricted endowment ▶							
	The percentages on lines 2a, 2b, and		00%.					
3a	Are there endowment funds not in the organization by			zation tha	at are held	and adı	ministered for	the Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" on line 3a(ii), are the related or	rganizations listed	l as requi	red on So	chedule R?			3b
4	Describe in Part XIII the intended uses	of the organization	on's endo	wment fi	unds			
Part	VI Land, Buildings, and Equip	ment.						
	Complete if the organization	answered "Yes	" on For	m 990, F	Part IV, line	e 11a. S	See Form 990), Part X, line 10
	Description of property	(a) Cost or of (investment)			or other basis ther)		Accumulated epreciation	(d) Book value
1a	Land						_	
b	Buildings						i	
c	Leasehold improvements				-			
d	Equipment	,						
е	Other				87,050,317		27,846,066	59,204,251
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 9	90, Part)	, column			▶	59,204,251

Part VII	Investments—Other Securities.			5 -	000 0 17 1
	Complete if the organization answ	vered "Yes" on Form	990, Part IV, lin	e 11b. See Form	1 990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book value	1 ''	thod of valuation I-of-year market value
(1) Financial	l derivatives				· · · · · · · · · · · · · · · · · · ·
(2) Closely-I	held equity interests .		· 		
(3) Other	•				
(A) INVES	TIMENT IN ASSOCIATED ORGANIZATION	is	3,948,125	COST	
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	(b) must equal Form 990, Part X, col (B) line 12) ▶		3,948,125		
Part VIII	Investments—Program Related				
-	Complete if the organization answ	vered "Yes" on Form	990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment		(b) Book value		thod of valuation I-of-year market value
(1)					
(2)					
(3)					• •
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col (B) line 13) ▶				
Part IX	Other Assets.				
	Complete if the organization answ		990, Part IV, Iin	e 11d See Form	,
	(a)	Description			(b) Book value
(1)					
(2)					
(3)				······································	
(4)					
(5)				-	
(6)					
(7)					
(8)			 		
(9)	mn (b) must equal Form 990, Part X, co.	1 /P) /mo 15)			,
Part X	Other Liabilities.	i (b) line 13)	· · ·		
PartA	Complete if the organization answ	orad "Vas" on Form	000 Part IV In	o 11o or 11f So	o Form 000 Part Y
	line 25.	vered res official	990, Fait IV, IIII	e i le di i ii. de	e i Oilli 990, i alt A,
1.	(a) Description of liability	(b) Book value			
(1) Federal ır		(5) 5551 74.55	-		
	ETIREMENT HEALTH	333,	727		
	RED COMPENSATION				
	RTIZED GAINOF RUS BUYOUT	284,	383		
	DEFERRED CREDITS	563,			
(6)	DEL EMILED GREDITS		<u> </u>		
(7)			\dashv		
(8)			 		
(9)			-		
	b) must equal Form 990, Part X, col. (B) line 25.)	1 252	280		

1 Total revenue, gains, and	organization answered "Yes" on Fo d other support per audited financial st e 1 but not on Form 990, Part VIII, line			
 2 Amounts included on line a Net unrealized gains (los) b Donated services and us c Recoveries of prior year d Other (Describe in Part X e Add lines 2a through 2d 				
 a Net unrealized gains (los b Donated services and us c Recoveries of prior year d Other (Describe in Part X e Add lines 2a through 2d 	3 1 but not on Form 990, Part VIII, line		1	26,163,511
 b Donated services and us c Recoveries of prior year d Other (Describe in Part X e Add lines 2a through 2d 		1 1		
c Recoveries of prior yeard Other (Describe in Part Xe Add lines 2a through 2d	·	2a 2b		i
d Other (Describe in Part Xe Add lines 2a through 2d	: : : : : : : : : : : : : : : : : :	20 2c		
e Add lines 2a through 2d	_	2d		
•		_2d	20	<u>L</u>
3 Subtract line ze from line		• •		26 163 511
4 Amounts included on Fo	e 1			26,163,511
	t included on Form 990, Part VIII, line 7			
a Investment expenses notb Other (Describe in Part X		4a 4b		
	,	40	4c	L
		Part I line 12)	40	20 103 511
	of Expenses per Audited Financia			26,163,511
	organization answered "Yes" on Fo			turi.
· · · · · · · · · · · · · · · · · · ·	es per audited financial statements .	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 1	24,312,403
•	e 1 but not on Form 990, Part IX, line 2	5:		1
a Donated services and us		2a	ľ	
b Prior year adjustments		2b		
c Other losses		2c		
d Other (Describe in Part X	III) .	2d	(111)	
e Add lines 2a through 2d	,.	L	. 2e	(111)
3 Subtract line 2e from line			3	24,312,292
	rm 990, Part IX, line 25, but not on line	1		24,512,202
	t included on Form 990, Part VIII, line 7			
b Other (Describe in Part X		4b	1,555,927	
c Add lines 4a and 4b	,		1,555,527	1,555,927
	s 3 and 4c. (This must equal Form 990			25,868,219
Part XIII Supplemental II		, ,		20,000,210
	d for Part II, lines 3, 5, and 9; Part III, li	nes 1a and 4, Part IV, I	nes 1b and 2b, Par	t V. line 4. Part X. line
	Part XII, lines 2d and 4b Also complete			
2; Part XI, lines 2d and 4b; and I			ny additional inform	
		cented in the United Sta		ation
2; Part XI, lines 2d and 4b; and I Part X. Line 2. The Cooperative fo		cepted in the United Sta		ation
Part X, Line 2. The Cooperative fo			tes of America relate	ation ed to the recognition of
Part X, Line 2. The Cooperative fo	perative recognizes accrued interest and		tes of America relate	ation ed to the recognition of
Part X, Line 2. The Cooperative fo uncertain tax positions. The Cooperations	perative recognizes accrued interest and	penalties associated w	tes of America relate	ation at to the recognition of
Part X, Line 2. The Cooperative fo uncertain tax positions. The Cooperations		penalties associated w	tes of America relate	ation ad to the recognition of
Part X, Line 2 The Cooperative fo uncertain tax positions. The Cooperative tax provision, when applications applied the cooperative for the cooper	perative recognizes accrued interest and table. The Cooperative does not have an	penalties associated w	tes of America relate th uncertain tax posi	ation ad to the recognition of tions as part of the
Part X, Line 2 The Cooperative fo uncertain tax positions. The Cooperative tax provision, when applications applied the cooperative for the cooper	perative recognizes accrued interest and	penalties associated w	tes of America relate th uncertain tax posi	ation ad to the recognition of tions as part of the
Part X, Line 2. The Cooperative for uncertain tax positions. The Cooperative for uncome tax provision, when application in the financial statements related	perative recognizes accrued interest and cable. The Cooperative does not have an to uncertain tax positions in 2018 or 201	penalties associated w y uncertain tax position	tes of America relate th uncertain tax posi and there were no a an exempt organiza	ation ad to the recognition of tions as part of the
Part X, Line 2. The Cooperative for uncertain tax positions. The Cooperative for uncome tax provision, when application in the financial statements related	perative recognizes accrued interest and table. The Cooperative does not have an	penalties associated w y uncertain tax position	tes of America relate th uncertain tax posi and there were no a an exempt organiza	ation ad to the recognition of tions as part of the
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Schedule D (Fo		Page 5
Part XIII	Supplemental Information (continued)	
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SCHEDULEI (Form 990)

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.	 Go to www.irs.gov/Form990 for the latest information.
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OMB No 1545-0047

Employer identification number 93-0209125 General Information on Grants and Assistance ANE ELECTRIC COOPERATIVE INC Department of the Treasury Internal Revenue Service Name of the organization Part I

-	Does the organization maintain records to substantiate	in records to subs	stantiate the amou	nt of the grants or	assistance, the g	rantees' eligibility f	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	
	the selection criteria used to award the grants or assistance?	award the grants o	or assistance?					Ves No
7	Describe in Part IV the organization's procedures for m	zation's procedur	es for monitoring t	onitoring the use of grant funds in the United States	ds in the United	States		
Part	I Grants and Other As	sistance to Doı	mestic Organiz	ations and Dom	estic Governm	ents. Complete II	f the organization answe	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990,
	Part IV, line Z1, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	y recipient that r	eceived more th	an \$5,000. Part I	l can be duplica	ted if additional s	space is needed.	
1 (a)	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)								1
(2)								
(3)								
(4)								
(5)								
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
0 6	Enter total number of section 501(c)(3) and government organizate Enter total number of other organizations listed in the line 1 table	501(c)(3) and gov	ernment organizat	organizations listed in the line 1 table	ne 1 table			A

Schedule I (Form 990) (2018)

Cat No 50055P

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

Schedule I (Form 990) (2018)	rm 990) (2018)					Page 2
Part III	Grants and Other Assistance to Domestic Part III can be duplicated if additional space	mestic Individuals. space is needed.	<u>s</u> .	Complete if the organization answered "Yes"	red "Yes" on Form 990,	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 EDUCA	EDUCATIONAL GRANTS	7	20,500			,
2 YOUTH TOUR	H TOUR	1	2,846			
က						
4						
5						
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information	he information re	equired in Part I, line	2; Part III, column	(b); and any other additive	onal information.
Educational	Educational Grants are budgeted annually and awarded through an interview process by a Scholarship Committee Recipients are eligible for the awarded	rough an interview	process by a Scholars	hip Committee Recip	ents are eligible for the awar	pəp
funds by enr	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	ıs are made dırectly	to the appropriate inst	titution upon verificati	on of enrollment Unclaimed	funds are returned to the
cooperative	cooperative and may or may not be re-awarded at the board's discretion	ırd's discretion				
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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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

2018

Open to Public Inspection

Employer identification number

93-0209125 LANE ELECTRIC COOPERATIVE INC Part I Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (such as maid, chauffeur, chef) ☐ Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 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? 4a **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b 4c c Participate in, or receive payment from, an equity-based compensation arrangement? . 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 **b** 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 6a **b** Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe . . If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2018

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 (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	or eac	h listed individual mu	st equal the total am	ount of Form 990, Pa	rt VII, Section A, Ilne I	a, applicable colurn	n (U) ano (E) amount	s for that individual.
		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(O) Nontaxable	(F) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(b)(a)	in column (B) reported as deferred on prior Form 990
MATTHEW J MICHEL	€ 3	192,310		11,559	24,252	25,399	253,520	
DEBORA D WILSON	€ €	136,045	2,800	12,423	48,613	8,220	208,101	
ANTHONY TONCRAY 3MANAGER, ENGINEERING & OPS	S E	137,475	1,400	11,190	17,313	24,531	191,909	
DARIEL K BRADLEY 4JOURNEYMAN LINEMAN	38	. 146,425	341	3,629	33,383	1,337	185,115	
HERB ANDERSON 5JOURNEYMAN LINEMAN	3 3	137.747	341	4,052	36,114	17,402	195,656	
BRIAN MATTIE 6JOURNEYMAN LINEMAN	e E	122,786	341	780	37,562	23,526	184,995	
BRYAN DICKIE 7JOURNEYMAN LINEMAN	3 E	126,850	341	9,682	33,846	23,185	193,904	
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10	ΞΞ							
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Schedule J (Form 990) 2018

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.

OMB No 1545-0047 Open to Public Inspection

Employer identification number

93-0209125

Department of the Treasury Internal Revenue Service Name of the organization ► Go to www.irs.gov/Form990 for the latest information.

LANE ELECTRIC COOPERATIVE INC Form 990, Part VI, Section A, Line 6 and Line 7a As a cooperative, Lane Electric is owned by our member/owners who exercise their control by electing a total of seven board members by residential district. The seven board members are elected from four board districts to each serve a three-year term Form 990, Part VI, Section A, Line 7b Pursuant to Lane Electric's governing documents certain major decisions, such as sale of the entity, require member approval Form 990, Part VI, Section A, Line 9. Matthew J Michel can be reached at 34498 Deerwood Dr Eugene OR 97405 Form 990, Part VI, Section B, Line 11b The Form 990, including its supplemental schedules, is reviewed annually during the board meeting in 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 advance by the individual in order to save him or herself any official action involving the conflict. Monitoring and identifying such situations is the responsibility of the individual, the President of the Board, and the Board as a whole Monitoring and enforcement of compliance with policies as they relate to employees is the responsibility of the Cooperative's General Manager Annually the Cooperative provides questionnaires to its Board of Directors, officers, key, and highly compensated employees. This provides a means to disclose and obtain detailed information regarding the individual relationships reportable personnel may have with the Cooperative's affiliates giving rise to a potential conflict of interest Form 990, Part VI, Section B, Line 15a and 15b Compensation for the Cooperative's General Manager is set annually by the Board of Directors. This is discretionary based on performance to the extent it falls 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. Each such review is consistent in its inclusion of the relevant data. Compensation for managers and key employees is conducted in the same fashion, however, the decision is made

Cat No 51056K

Schedule O (Form 990 or 990-EZ) (2018)

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

Schedule O (Form 990 or 990-EZ) (2018)	Page Z
Name of the organization LANE ELECTRIC COOPERATIVE INC	Employer identification number 93-0209125
	1 00 0200 120
by the Cooperative's General Manager	
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Form 990, Part VI, Section C, Line 19	
The Cooperative makes governing documents, policies, and annual financial statements available to men	nbers of the Cooperative upon
request	
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Form 990, Part IX, Line 4 - Benefits Paid to or for Members	
This represents the allocation of 2018 patronage. Members are notified in writing of their allocation. Retir	ements are made at the
discretion of the Board of Directors. Members are notified in writing of their right to claim their retired pat	
with the Cooperative's policies and bylaws	
with the Cooperative's policies and oylaws	
Form 990, Part XI, Line 9	
Tax Depreciation Less Than Book \$ (111)	,
Amortization of RUS Buyout 14,277	
Change in Memberships	·
Patronage Retired (1.251,777)	
Patronage Allocated, Benefits Paid to Members 1.541.650	
Total Other Changes to Net Assets \$ 304,153	
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