DLN: 93493277007099 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 06-01-2018 , and ending 05-31-2019 C Name of organization D Employer identification number B Check if applicable NATIONAL ŘURAL UTILITIES COOPERATIVE □ Address change FINANCE CORPORATION 52-0891669 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return (703) 467-1800 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code DULLES, VA  $\,$  20166 G Gross receipts \$ 1,421,595,297 Name and address of principal officer H(a) Is this a group return for SHELDON PETERSEN ☐Yes **☑**No subordinates? 20701 COOPERATIVE WAY H(b) Are all subordinates DULLES, VA 20166 ☐ Yes ☐No ıncluded? 501(c)(3) **✓** 501(c) (4) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW NRUCFC COOP L Year of formation 1969 M State of legal domicile VA K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities BRIDGING THE FINANCIAL NEEDS OF THE RURAL ELECTRIC COOPERATIVE NETWORK WITH GLOBAL CAPITAL MARKETS 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) . 23 4 23 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 **6** Total number of volunteers (estimate if necessary) . . . . 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenua 1,297,860,625 1,390,394,359 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 11,727,904 24,660,699 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 5,223,274 6,444,026 1,314,811,803 1,421,499,084 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). 1,330,761 1,609,767 0 **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) 51,916,729 51,019,328 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,108,417,709 1,198,703,977 1,161,665,199 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 153,146,604 170,166,012 Net Assets or Fund Balances Beginning of Current Year End of Year 27,085,054,946 26,646,814,838 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 25,166,345,396 25,802,184,618 22 Net assets or fund balances Subtract line 21 from line 20 . 1,480,469,442 1,282,870,328 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 2019-10-04 Signature of officer Sign Here SHELDON PETERSEN CEO Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00482451 Paid self-employed Firm's name ► KPMG LLP Firm's EIN > 13-5565207 Preparer Use Only Firm's address ▶ 8350 BROAD STREET SUITE 900 Phone no (703) 286-8000 MCLEAN, VA 22102 ☐ 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)

| Form | 990 (201              | 8)                                      |  |                            |   | Page <b>2</b>                    |
|------|-----------------------|---|--|----------------------------|---|----------------------------------|
| Pa   | rt III S              | Statement of Program Se                 | rvice Accomplisi                             | hments                     |   |                                  |
|      | C                     | heck if Schedule O contains a i         | response or note to a                        | ny line in this Part III . |   | 🗹                                |
| 1    | Briefly d             | escribe the organization's miss         | ion  |                            |   |                                  |
|      |                       | E FINANCIAL NEEDS OF THE R<br>AT A TIME | URAL ELECTRIC NET                            | WORK WITH THE EXPEC        | TATIONS OF THE GLOBAL CAPIT   | AL MARKETS, ONE                  |
| 2    | Did the d             | organization undertake any sig          | nıfıcant program serv                        | vices during the year wh   | nch were not listed on  |                                  |
|      | the prior             | Form 990 or 990-EZ?                     |  |                            |   | 🗌 Yes 🗹 No                       |
|      | If "Yes,"             | describe these new services or          | n Schedule O                                 |                            |   |                                  |
| 3    | Did the d             | organization cease conducting,          | or make significant o                        | changes in how it condu    | cts, any program  |                                  |
|      |                       | describe these changes on Sch           |  |                            |   | ☐ Yes 🗹 No                       |
| 4    | Describe<br>Section ! | the organization's program se           | rvice accomplishmen<br>izations are required | to report the amount of    | argest program services, as mea<br>f grants and allocations to others | sured by expenses<br>, the total |
| 4a   | (Code                 | ) (Expenses \$                          | 1,159,566,039                                | including grants of \$     | 1,609,767 ) (Revenue \$   | 1,396,838,385 )                  |
|      | See Addıt             | ional Data                              |  |                            |   |                                  |
| 4b   | (Code                 | ) (Expenses \$                          |  | ıncluding grants of \$     | ) (Revenue \$   | )                                |
|      |                       |   |  |                            |   |                                  |
| 4c   | (Code                 | ) (Expenses \$                          |  | including grants of \$     | ) (Revenue \$   | )                                |
|      |                       |   |  |                            |   |                                  |
| 4d   | (Expens               |   | chedule O )<br>including grants of           | \$                         | ) (Revenue \$   | )                                |
| 4e   | Total p               | rogram service expenses 🕨               | 1,159,566,0                                  | 39                         |   |                                  |

| Form | 990 (2018)  |     |     | Page <b>3</b> |
|------|---|-----|-----|---------------|
| Pa   | t 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   |     | No            |
| 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?  If "Yes," complete Schedule D, Part VI  | 11a | 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 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛂   | 11b |     | No            |
|      | 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 |     | No            |
| 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 |     | No            |
| е    | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦   | 11e | Yes |               |
| f    | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses   | 446 |     | NI-           |

Nο the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Nο b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Yes 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 No 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 No 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 15 Nο 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 Nο 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, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) . . . . Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 No

18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 19 Nο 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a No

20b

21

Yes

No

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

21

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

36

37

38

Part V

| FOITH | 990 (2016)  |     |     | Page • |
|-------|---|-----|-----|--------|
| 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? <i>If "Yes," complete Schedule L, Part I</i>  | 25a |     | No     |
| 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 |     | No     |
| 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? <i>If "Yes," complete Schedule R, Part I</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  |     | No     |
| 35a   | Did the organization have a controlled entity within the meaning of section 512(b)(13)?   | 35a |     | No     |

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

All Form 990 filers are required to complete Schedule O . . . . . . . . . . . . . . . . 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 .

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

35b

36

37

38

139

0

1a

Yes

Yes

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Nο

No

7b If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

7с d If "Yes," indicate the number of Forms 8282 filed during the year . . . . 7d | e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 8 9a 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? . . . 9h Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

a Gross income from members or shareholders . 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources 11b

11 Section 501(c)(12) organizations. Enter 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?

14a

14b

15

Yes

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No

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.

13a Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans . . . . c Enter the amount of reserves on hand . . . . . . . . . . . . . . . 13c

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?

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|---------------------------|--|-------------------|------------|-----------|
| Pa                        | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Not 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 i  | ines<br>🗸 |
| 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 23   |                   |            |           |
|                           | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O   |                   |            |           |
| Ь                         | Enter the number of voting members included in line 1a, above, who are independent 1b 23   |                   |            |           |
| 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        |
| 3                         | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •  | 3                 |            | No        |
| 4                         | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .   | 4                 |            | No        |
| 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                        | 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?   | 7a                | Yes        |           |
| b                         | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  | 7b                | Yes        |           |
| 8                         | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following   |                   |            |           |
| а                         | The governing body?  | 8a                | Yes        |           |
| b                         | Each committee with authority to act on behalf of the governing body?  | <b>8</b> b        | Yes        |           |
| 9                         | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>  | 9                 |            | No        |
| Se                        | ction B. Policies (This Section B requests information about policies not required by the Internal Revenue   | e Code            | 2.)        |           |
|                           |  | $\longrightarrow$ | Yes        | No        |
|                           | Did the organization have local chapters, branches, or affiliates?   | 10a               |            | No        |
| Ь                         | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?   | 10b               |            |           |
| 11a                       | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11a               | Yes        |           |
| b                         | Describe in Schedule O the process, if any, used by the organization to review this Form 990   |                   |            |           |
|                           | Did the organization have a written conflict of interest policy? If "No," go to line 13  | 12a               | Yes        |           |
| b                         | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b               | Yes        |           |
| С                         | Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>  | 12c               | Yes        |           |
| 13                        | Did the organization have a written whistleblower policy?  | 13                | Yes        |           |
| 14                        | Did the organization have a written document retention and destruction policy?   |                   |            |           |
| 15                        |  | 14                | Yes        |           |
|                           | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?   | 14                | Yes        |           |
| а                         |  | 14<br>15a         | Yes<br>Yes |           |
|                           | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |                   |            | No        |
|                           | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a               |            | No        |
| b                         | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a               |            | No<br>No  |
| b<br>16a                  | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a<br>15b        |            |           |
| b<br>16a<br>b             | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a<br>15b        |            |           |
| b<br>16a<br>b             | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a<br>15b        |            |           |
| b<br>16a<br>b             | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a<br>15b        |            |           |
| b<br>16a<br>b             | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a<br>15b        |            |           |
| b<br>16a<br>b<br>Se<br>17 | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a<br>15b        |            |           |
| b<br>16a<br>b<br>Se<br>17 | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  | 15a<br>15b        |            |           |

| 101111 330 (2           | 010)   |  |                                   |                           |                     |                                 |                              |        |  |  | Page /   |
|-------------------------|--|--|-----------------------------------|---------------------------|---------------------|---------------------------------|------------------------------|--------|--|--|--|
| Part VII                | Compensation of Officer and Independent Contra   |  | Truste                            | es,                       | Key                 | En                              | nploy                        | ees    | , Highest Comp   | ensated Employ   | ees,   |
|                         | Check if Schedule O contains a   | response or no   | te to an                          | y line                    | ≘ ın t              | hıs                             | Part VI                      | ١.     |  |  | 🗆  |
| Section                 | A. Officers, Directors, Tru  | ıstees, Key E  | mploy                             | ees                       | , an                | d F                             | lighe                        | st (   | Compensated En   | nployees   |  |
| year .                  | this table for all persons requir<br>of the organization's current of                                      |  | ·                                 |                           |                     |                                 |                              |        | , ,  |  | •  |
| of compensa             | tion Enter -0- in columns (D), (<br>if the organization's <b>current</b> key                               | E), and (F) if no                                      | compe                             | nsatı                     | on w                | vas į                           | paid                         |        | - ,,   |  |  |
| • List the who received | organization's five <b>current</b> high<br>direportable compensation (Box<br>and any related organizations | est compensate   | d emplo                           | yees                      | (oth                | ner t                           | than a                       | n off  | icer, director, truste   | e or key employee)   | 1  |
| • List all o            | of the organization's <b>former</b> office compensation from the organization                              |  |                                   |                           |                     |                                 | pensat                       | ed e   | employees who rece   | ived more than \$10  | 0,000  |
|                         | f the organization's <b>former dir</b> e<br>, more than \$10,000 of reportat                               |  |                                   |                           |                     |                                 |                              |        |  |  | e  |
| compensated             | in the following order individual demployees, and former such p  | ersons   |                                   |                           |                     |                                 |                              |        |  |  |  |
| ☐ Check tl              | nis box if neither the organization  | n nor any relate                                       | ed organ                          | nizatio                   | on co               | omp                             | ensate                       | d ar   | ny current officer, di   | rector, or trustee   | Т  |
|                         | (A)<br>Name and Title  | (B) Average hours per week (list any hours for related | than o                            | one bo<br>oth a<br>direct | ox, un off<br>tor/t | t cho<br>unles<br>ficer<br>rust | and a                        | on     | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099- | (F) Estimated amount of other compensation from the organization and |
|                         |  | organizations<br>below dotted<br>line)                 | Individual trustee<br>or director | Institutional Trustee     | Officer             | key employee                    | Highest compensated employee | Former | 2/1099-MI3C)   | (W- 2/1099-<br>MISC)   | related organizations  |
| See Additiona           | al Data Table  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |
|                         |  |  |                                   |                           |                     |                                 |                              |        |  |  |  |

| Form  | 990 (2018)   | -  |  |  |                           |                                  |  |                |  |  |                      |   | Page <b>8</b>                     |
|-------|--|--|--|--|---------------------------|----------------------------------|--|----------------|--|--|----------------------|---|-----------------------------------|
| Par   | rt VII Section A. Officers, Direct   | 1  | Key رة   | Empl   |                           |                                  | and I  | High           | 1  | ed Employees   | (con                 |   |                                   |
|       | <b>(A)</b><br>Name and Title   | (B) Average hours per week (list any hours for related | than o   | one bo   | ox, u<br>an off<br>tor/tr | t che<br>unles<br>ficer<br>ruste |  | rson<br>a      | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (\) 2/1099-MISC | n<br><b>i</b><br>(W- | Estima amount o compens from organizati | ated<br>of other<br>sation<br>the |
|       |  | organizations<br>below dotted<br>line)                 |  | Institutional Trustee                            | Officer                   | key employee                     | Highest compensated employee                     | Former         | 2/1035-11436/  | 2/1035 11150   |                      |   | ed<br>ations                      |
| See / | Additional Data Table  | †  |  |  |                           |                                  |  |                |  |  |                      |   |                                   |
|       |  | <del>                                     </del>       |  | $\vdash$   |                           |                                  |  | $\vdash$       |  | +  | $\exists$            |   |                                   |
|       |  | <del>                                     </del>       |  |  |                           | $\Box$                           |  | +              |  |  | $\top$               |   |                                   |
|       |  | -  |  | <del></del>                                      | $\mid \rightarrow \mid$   | $\Box$                           | <del>                                     </del> | +              |  |  | $\dashv$             |   |                                   |
|       |  | <del>                                     </del>       | <u> </u>   | <del></del>                                      | $\vdash$                  | $\vdash$                         | <del>                                     </del> | +              |  | +  | $\dashv$             |   |                                   |
| —     |  |  | <del></del>                                      | <del>                                     </del> | $\vdash$                  | $\vdash$                         | <del>                                     </del> | +              |  |  | +                    |   |                                   |
|       |  | <del> </del>   | <del>                                     </del> | <del>                                     </del> | $\vdash$                  |                                  | <del>                                     </del> | +-             |  | +  | $\dashv$             |   |                                   |
| —     |  | <del>                                     </del>       |  | <del> </del>                                     | $\vdash$                  |                                  | <del>                                     </del> | +-'            | -  | +  | $\dashv$             |   |                                   |
|       |  | <del>                                     </del>       | <del>                                     </del> | <del></del>                                      | $\vdash$                  | $\vdash$                         |  | <del>  '</del> |  | +  | $\dashv$             |   |                                   |
|       |  | <u> </u> '   | <u> </u>   | <u> </u>   | $\sqcup$                  | <del> </del>                     | <del> </del>                                     | —'             | <u> </u>   |  | $\dashv$             |   |                                   |
|       |  |  |  | <u> </u>   | Ш                         |                                  | <u> </u>   | <u> </u>       |  |  | <u> </u>             |   |                                   |
|       | Sub-Total  |  |  |  |                           |                                  | <b>▶</b>  _                                      |                |  |  | +                    |   |                                   |
|       | Total (add lines 1b and 1c)  | •  |  |  |                           |                                  | <b>&gt;</b>                                      | _              | 12,364,675   |  | 0                    |   | 2,902,757                         |
| 2     | Total number of individuals (including of reportable compensation from the                   |  |  | e liste  | ed at                     | οον€                             | a) who   | , rece         | eived more than \$3  | 100,000  |                      |   |                                   |
|       |  |  |  |  |                           |                                  |  |                |  |  |                      | Yes                                     | No                                |
| 3     | Did the organization list any <b>former</b> of line 1a? <i>If "Yes," complete Schedule</i> 3 |  |  | ee, ke   | ey er                     | nplo                             | oyee, c  | or hid         | ghest compensate   | d employee on  | 3                    | Vos                                     |                                   |
| 4     | For any individual listed on line 1a, is organization and related organization               | s the sum of repo                                      | ortable o  | comp<br>0? <i>If</i>                             | ensa<br><i>"Yes</i>       | ition<br>;," c                   | ı and c<br>omplei                                | other<br>te Sc | compensation fro<br>chedule J for such                             | m the  | -                    | Yes                                     |                                   |
| _     | individual   |  |  |  | •                         | •                                |  |                |  |  | 4                    | Yes                                     |                                   |
| 5     | Did any person listed on line 1a receiv<br>services rendered to the organization             |  |  |  |                           |                                  |  |                |  | Jividual for   | 5                    | .                                       | No                                |
| Sŧ    | ection B. Independent Contract   | io <u>rs</u>   |  | _  | _                         | _                                |  | _              |  |  | _                    |   |                                   |
| 1     | Complete this table for your five higher from the organization Report comper                 |  |  |  |                           |                                  |  |                |  |  | mper                 | nsation                                 |                                   |
|       | ·  | (A)  |  | y Cu.  | - Cira                    | 1119                             | WICH C.  | 1 4410         |  | (B)  |                      | (C                                      |                                   |
| ZEPH' | YR TECHNOLOGY SERVICES LLC   | and business addre                                     | <u>+SS</u>                                       |  |                           | —                                |  |                | Des<br>IT SERVICE  | scription of services<br>SES   |                      | Comper<br>3                             | ,411,548                          |
|       | JENNIFER RD SUITE 230  |  |  |  |                           |                                  |  |                |  |  |                      |   |                                   |
|       | APOLIS, MD 21401<br>ERA TECHNOLOGIES INC   |  |  |  |                           |                                  |  |                | IT SERVICE   | .ES  |                      | 2                                       | ,965,962                          |
|       | EAST BIG BEAVER RD SUITE 109<br>', MI 48083  |  |  |  |                           |                                  |  |                |  |  |                      |   |                                   |
|       | GIOPAE US INC  |  |  |  |                           |                                  |  |                | IT SERVICE   | .ES  |                      | 1                                       | ,957,238                          |
|       | N DE GRAAFF DR<br>INGTON, MA 01803   |  |  |  |                           |                                  |  |                |  |  |                      |   |                                   |
| KPMG  |  |  |  |  |                           |                                  |  |                | AUDIT/TA>  | X SERVICES   |                      | 1                                       | ,388,120                          |
|       | ESTNUT RIDGE RD  |  |  |  |                           |                                  |  |                |  |  |                      |   |                                   |
|       | TVALE, NJ 07645<br>TEGICIT SOLUTIONS LLC   |  |  |  | —                         | _                                |  | —              | IT SERVICE   | .ES  |                      | 1                                       | ,159,456                          |
|       | 0 COPPERMINE RD  |  |  |  |                           |                                  |  |                |  |  |                      |   |                                   |
|       | IDON, VA 20171<br>Total number of independent contractor                                     |  | t not lin  | utod   | +o +b                     |                                  | listed   | <u>abo</u> :   | ve) who received t   | more than \$100.0  |                      | £                                       |                                   |

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 ▶ 68

(D) Revenue

excluded from

tax under sections 512 - 514

| -010)  |         |           |            |              |                      |
|--|---------|-----------|------------|--------------|----------------------|
| Statement of Revenue   |         |           |            |              |                      |
| Check if Schedule O contains a   | a respo | onse or r | note to an | y line in tl | nis Part VIII        |
|  |         |           |            |              | <b>A)</b><br>revenue |
| Federated campaigns  | 1a      |           |            |              |                      |
| Membership dues  | 1b      |           |            |              |                      |
| Fundraising events   | 1c      |           |            |              |                      |
| Related organizations  | 1d      |           |            |              |                      |
| Government grants (contributions)  | 1e      |           |            |              |                      |
| All other contributions, gifts, grants, and similar amounts not included above | 1f      |           |            |              |                      |
| Noncash contributions included in lines 1a - 1f \$                             |         |           |            |              |                      |
| Total. Add lines 1a-1f   |         |           | . •        |              |                      |
|  |         |           | Busines    | s Code       |                      |
| NTEREST FROM PSA   |         |           |            | 522298       | 1,102                |
| DERIVATIVE CASH SETTLEMENTS  |         |           |            | 522298       | 279,                 |
| OTHER INCOME-LOAN FEES   |         |           |            | 522298       | 15,                  |
| RECOVERY FOR LOSSES  |         |           |            | 522298       | 1,                   |
|  |         |           |            |              |                      |

Contributions, Gifts, Grants and Other Similar Amounts

h

|   | Business Code |               |               |           |
|---|---------------|---------------|---------------|-----------|
| 2a INTEREST FROM PSA                                | 522298        | 1,102,264,425 | 1,102,264,425 |           |
| <b>b</b> DERIVATIVE CASH SETTLEMENTS                | 522298        | 279,063,327   | 279,063,327   |           |
| c OTHER INCOME-LOAN FEES                            | 522298        | 15,143,424    | 15,143,424    |           |
| d RECOVERY FOR LOSSES                               | 522298        | 1,039,178     | 1,039,178     |           |
| e G/L EARLY EXTINGUISHMENT OF DEBT                  | 522298        | -7,115,995    | -7,115,995    |           |
| f All other program service revenue                 | <u> </u>      |               |               |           |
| <b>9Total.</b> Add lines 2a-2f ▶                    | 1,390,394,359 |               |               |           |
| 3 Investment income (including dividends, interest, | and other     | 24 605 000    |               | 24 625 22 |

(B) Related or

exempt function

revenue

(C) Unrelated

business

revenue

Program Service Revenue 24,605,080 sımılar amounts) . . . . . 4 Income from investment of tax-exempt bond proceeds **5** Royalties . (ı) Real (II) Personal 6a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) . (II) Other (ı) Securities 7a Gross amount 151,832 from sales of assets other than inventory **b** Less cost or other basis and 96,213 sales expenses 55,619 C Gain or (loss) 55,619 55,619  $\boldsymbol{d}$  Net gain or (loss) . . . . **8a** Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 . . . **b** Less direct expenses . . . b c Net income or (loss) from fundraising events . **9a** Gross income from gaming activities See Part IV, line 19 . . . **b** Less direct expenses . . b  $\boldsymbol{c}$  Net income or (loss) from gaming activities **10a**Gross sales of inventory, less returns and allowances .  ${f b}$  Less cost of goods sold . .  ${f c}$  Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11aMANAGEMENT FEES 522298 5,371,000 5,371,000 522298 1,073,026 1,073,026 b INTEGRITY FUND COLLECTIONS FROM d All other revenue . e Total. Add lines 11a-11d 6,444,026

| Fort IV Statement of Functional Expenses  |                        |                                    |   | Page <b>1</b>                     |
|---|------------------------|------------------------------------|---|-----------------------------------|
| Part IX Statement of Functional Expenses section 501(c)(3) and 501(c)(4) organizations must complete all columns.   | lumns All other orga   | inizations must comp               | lete column (A)                           |                                   |
| Check if Schedule O contains a response or note to any  | line in this Part IX . |                                    |   | 🗆                                 |
| Oo not include amounts reported on lines 6b,<br>'b, 8b, 9b, and 10b of Part VIII.   | (A)<br>Total expenses  | (B)<br>Program service<br>expenses | (C)<br>Management and<br>general expenses | <b>(D)</b><br>Fundraisingexpenses |
| Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21   | 1,609,767              | 1,609,767                          |   |                                   |
| 2 Grants and other assistance to domestic individuals See Part IV, line 22  |                        |                                    |   |                                   |
| <b>3</b> 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   |                        |                                    |   |                                   |
| <b>5</b> Compensation of current officers, directors, trustees, and key employees   | 13,429,414             |                                    | 13,429,414                                |                                   |
| <b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)  | 56,407                 |                                    | 56,407                                    |                                   |
| 7 Other salaries and wages  | 25,001,006             |                                    | 25,001,006                                |                                   |
| 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)   | 6,925,695              |                                    | 6,925,695                                 |                                   |
| 9 Other employee benefits   | 3,481,352              |                                    | 3,481,352                                 |                                   |
| <b>10</b> Payroll taxes   | 2,125,454              |                                    | 2,125,454                                 |                                   |
| 11 Fees for services (non-employees)  |                        |                                    |   |                                   |
| a Management  | 973,000                |                                    | 973,000                                   |                                   |
| <b>b</b> Legal  | 952,879                |                                    | 952,879                                   |                                   |
| c Accounting  | 1,373,713              |                                    | 1,373,713                                 |                                   |
| d Lobbying  |                        |                                    |   |                                   |
| e Professional fundraising services See Part IV, line 17  |                        |                                    |   |                                   |
| f Investment management fees  | 783,464                | 783,464                            |   |                                   |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  | 5,430,510              |                                    | 5,430,510                                 |                                   |
| L2 Advertising and promotion  | 1,281,439              |                                    | 1,281,439                                 |                                   |
| L3 Office expenses  | 1,326,639              |                                    | 1,326,639                                 |                                   |
| 14 Information technology   | 6,122,954              |                                    | 6,122,954                                 |                                   |
| L5 Royalties  |                        |                                    |   |                                   |
| <b>16</b> Occupancy   | 2,537,869              |                                    | 2,537,869                                 |                                   |
| <b>17</b> Travel  | 2,749,651              |                                    | 2,749,651                                 |                                   |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials .   |                        |                                    |   |                                   |
| L9 Conferences, conventions, and meetings   | 5,352,341              |                                    | 5,352,341                                 |                                   |
| <b>20</b> Interest  | 1,157,172,808          | 1,157,172,808                      |   |                                   |
| 21 Payments to affiliates   |                        |                                    |   |                                   |
| 22 Depreciation, depletion, and amortization  | 9,305,300              |                                    | 9,305,300                                 |                                   |
| 23 Insurance  | 616,180                |                                    | 616,180                                   |                                   |
| 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 DUES, SUBSCRIPTIONS & R   | 380,181                |                                    | 380,181                                   |                                   |
| b COMMUNITY OUTREACH  | 273,037                |                                    | 273,037                                   |                                   |
| c TRAINING  | 262,896                |                                    | 262,896                                   |                                   |
| d BANK FEES   | 180,230                |                                    | 180,230                                   |                                   |
| e All other expenses  | 1,628,886              |                                    | 1,628,886                                 |                                   |
| 25 Total functional expenses. Add lines 1 through 24e   | 1,251,333,072          | 1,159,566,039                      | 91,767,033                                |                                   |
| 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)  |                        |                                    |   |                                   |

Page **11** 

7.085.769

120,627,359

570,532,226

82.444.800

84.423.810

27.085.054.946

3.783.888.239

56.301.831

15,858,200,062

5,689,742,234

25.802.184.618

968,800

1,281,901,528

1,282,870,328

27,085,054,946

Form **990** (2018)

414.052.252

Form 990 (2018)

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13

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34

Liabilities 22

Fund Balance

Assets or 30

Net

Less accumulated depreciation

Intangible assets . . .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

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

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

**Total assets.**Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

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

Investments-program-related See Part IV, line 11

| 2 | Savings and temporary cash investments  | 100,287,735 | 2 | 36,462,319  |
|---|---|-------------|---|-------------|
| 3 | Pledges and grants receivable, net  |             | 3 |             |
| 4 | Accounts receivable, net  | 160,501,840 | 4 | 164,378,563 |
| 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L  |             | 5 |             |
| 6 | Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ |             |   |             |

53,694,837

116,031,082

702.871.276

288.005.289

26.646.814.838

3.974.696.740

63.949.254

15,298,045,423

5,531,306,731

25.166.345.396

968,800

1,479,500,642

1,480,469,442

26,646,814,838

298.347.248

6,980,263

10c

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buting employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . . . Assets 25.871.010.087 25.126.697.426 Notes and loans receivable, net . 8 Inventories for sale or use . Prepaid expenses and deferred charges 7.858.459 9 10a Land, buildings, and equipment cost or other 10a 174,322,196 basis Complete Part VI of Schedule D

10b

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:** 52-0891669

Name: NATIONAL RURAL UTILITIES COOPERATIVE

FINANCE CORPORATION

Form 990 (2018)

#### Form 990, Part III, Line 4a:

LENDING SERVICES CFC PROVIDES LOANS TO ITS MEMBERS, RURAL ELECTRIC COOPERATIVES AND THEIR RELATED ORGANIZATIONS, AND GENERATES INTEREST INCOME FROM THESE LOANS TO FUND ITS LENDING SERVICES, CFC RAISES FUNDS IN THE CAPITAL MARKETS OR PRIVATE THIRD PARTY TRANSACTIONS AND PAYS A RATE OF RETURN COMMENSURATE WITH CURRENT ECONOMIC CONDITIONS FOR THE USE OF THOSE FUNDS. THESE RAISED FUNDS PERMIT CFC TO MEET THE BORROWING NEEDS OF ITS MEMBERS SO THEY CAN CONTINUE TO PROVIDE ELECTRIC AND POWER SERVICES TO THE CONSUMERS AND BUSINESSES IN THE RURAL

BORROWING NEEDS OF ITS MEMBERS SO THEY CAN CONTINUE TO PROVIDE ELECTRIC AND POWER SERVICES TO THE CONSUMERS AND BUSINESSES IN THE RURAL TERRITORIES SERVICED BY THOSE MEMBERS/BORROWERS CFC OPERATES IN SUCH MANNER TO OBTAIN FUNDING BASED ON COST AVAILABLE TO IT AND PASSES THE COSTS AND RESULTING SAVINGS ALONG TO ITS BORROWERS SEE SCHEDULE O FOR FUTHER INFORMATION GRANTS INTEGRITY FUND -- UTILIZING A RESTRICTED CASH ACCOUNT, CFC MANAGES A VOLUNTARY FUND ESTABLISHED FOR THE PURPOSE OF ASSISTING COOPERATIVES IN DEFENDING THEIR COOPERATIVE TERRITORIES AND PROTECTING COOPERATIVE PRINCIPLES EDUCATION FUND -- EACH STATEWIDE ASSOCIATION AND ELIGIBLE REGIONAL ASSOCIATION WILL SUBMIT AN APPLICATION FORM DESCRIBING THE PROGRAM FOR WHICH THE GRANT WILL BE USED CFC CALCULATES THE AMOUNT ALLOTTED TO EACH APPLICANT DURING THE FISCAL YEAR BASED UPON THE TOTAL NUMBER OF CO-OPS WHICH ARE MEMBERS OF CFC AND OF THE ASSOCIATION, WITH RESPECT TO STATEWIDE ASSOCIATIONS, THE NUMBER OF STATES EACH APPLICANT REPRESENTS, AND THE NUMBER OF COMMUNICATIONS GROUP APPROVES THE APPLICATIONS MADE BY THE ASSOCIATIONS.

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

ROBERT BROCKMAN

MIKE CAMPBELL UNTIL 032018

PHILIP A CARSON UNTIL 032019

**ROMAN E GILLEN UNTIL 032019** 

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DAVID E FELKEL

|   | any nours   | and a director/trustee)           |                       |    |              |                              |        | organization         | organizations        | from the                                     |  |
|---|---|-----------------------------------|-----------------------|----|--------------|------------------------------|--------|----------------------|----------------------|--|--|
|   | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional Trustee | 10 | Key employee | Highest compensated employee | Former | (W- 2/1099-<br>MISC) | (W- 2/1099-<br>MISC) | organization and<br>related<br>organizations |  |
| HARRY N PARK UNTIL 032019<br>PRESIDENT-DIRECTOR | 8 00  | ×                                 |                       | х  |              |                              |        | 61,000               | 0                    | 0  |  |
| KENT D FARMER PRESIDENT-DIRECTOR                | 10 00   | х                                 |                       | х  |              |                              |        | 61,000               | 0                    | 0  |  |
| DEAN R TESCH VICE PRESIDENT                     | 8 00  | ×                                 |                       | х  |              |                              |        | 60,000               | 0                    | 0  |  |

| PRESIDENT-DIRECTOR             |       |     |  |   |     |   |        |  |
|--------------------------------|-------|-----|--|---|-----|---|--------|--|
| DEAN R TESCH                   | 8 00  | l   |  | v |     |   | 60,000 |  |
| VICE PRESIDENT                 |       | _ ^ |  | ^ |     |   | 00,000 |  |
| ALAN W WATTLES                 | 13 40 | ×   |  | Х |     |   | 55,000 |  |
| SECRETARY-TREASURER            |       | _ ^ |  | ^ |     |   | 35,000 |  |
| PATRICK L BRIDGES UNTIL 032019 | 5 00  |     |  |   |     |   |        |  |
|                                |       | l x |  |   | 1 1 | l | 55,000 |  |

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| VICE PRESIDENT                 |       | `                |   |  |  | 00,000   | <u> </u> |   |
|--------------------------------|-------|------------------|---|--|--|----------|----------|---|
| ALAN W WATTLES                 | 13 40 | ×                | x |  |  | 55,000   | 0        |   |
| SECRETARY-TREASURER            |       | , and the second |   |  |  | 33,000   |          |   |
| PATRICK L BRIDGES UNTIL 032019 | 5 00  | ×                |   |  |  | 55,000   | 0        |   |
| DIRECTOR                       |       |                  |   |  |  | ] 33,000 | ĭ        | 1 |

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| VICE PRESIDENT                        | ••••• | X | Х |  | 60,000 | 0 | C | Э |
|---------------------------------------|-------|---|---|--|--------|---|---|---|
| ALAN W WATTLES<br>SECRETARY-TREASURER | 13 40 | X | X |  | 55,000 | 0 | C | 0 |
| PATRICK L BRIDGES UNTIL 032019        | 5 00  | × |   |  | 55,000 | 0 | C | 0 |

| ICE PRESIDENT                 |       |                  |   |  |        |   | _ |
|-------------------------------|-------|------------------|---|--|--------|---|---|
| LAN W WATTLES                 | 13 40 | ×                | Х |  | 55,000 | C | 0 |
| ECRETARY-TREASURER            |       | , and the second | ^ |  | 33,000 | • |   |
| ATRICK L BRIDGES UNTIL 032019 | 5 00  | ·                |   |  | 55,000 | 0 | 0 |
| DIRECTOR                      |       | ^                |   |  | 33,000 | 0 |   |

55,000

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55,000

45,833

55,000

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the compensation from related

any hours

and a director/trustee)

organization

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organizations

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

|  | any nouns   | ""                                | u un                  |         | ,, .,        | uscee                        | ′      | argamization         | 1 110111 1110        |  |
|--|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------|----------------------|--|
|  | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional Trustee | Officer | key employee | Highest compensated employee | Former | (W- 2/1099-<br>MISC) | (W- 2/1099-<br>MISC) | organization and<br>related<br>organizations |
| DOYLE JAY HANSON<br>DIRECTOR           | 10 00   | х                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |
| THOMAS L HAYES DIRECTOR                | 9 50  | х                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |
| ROBERT M HILL UNTIL 032019<br>DIRECTOR | 5 00  | ×                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |
| JIMMY A LAFOY DIRECTOR                 | 8 50  | ×                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |
| CURTIN R RAKESTRAW IIUNTIL 032019      | 5 00  | х                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |

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| DIRECTOR                          |
|-----------------------------------|
| CURTIN R RAKESTRAW IIUNTIL 032019 |
| DIRECTOR                          |
| DEBRA L ROBINSON                  |

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

TIMOTHY RODRIGUEZ

BRADLEY J SCHARDIN

MARSHA L THOMPSON

MARK SNOWDEN UNTIL 0318

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and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the compensation from related and a director/trustee) any hours from the

organization

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organizations

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

|                             | ,   |                                   | ,,                    |         |              |                              |        | (1)                  | (11)                 |  |  |
|-----------------------------|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------|----------------------|--|--|
|                             | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional Trustee | Officer | key employee | Highest compensated employee | Former | (W- 2/1099-<br>MISC) | (W- 2/1099-<br>MISC) | organization and<br>related<br>organizations |  |
| STEPHEN C VAIL DIRECTOR     | 7 00  | x                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |  |
| BRUCE A VITOSH DIRECTOR     | 8 00  | х                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |  |
| TODD P WARE DIRECTOR        | 5 00  | x                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |  |
| GREGORY D WILLIAMS DIRECTOR | 8 50  | x                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |  |
| CURTIS WYNN DIRECTOR        | 5 00  | ×                                 |                       |         |              |                              |        | 55,000               | 0                    | 0  |  |

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| GREGORY D WILLIAMS |
|--------------------|
| DIRECTOR           |
| CURTIS WYNN        |
| DIRECTOR           |
| -                  |

THOMAS BAILEY BEGIN 032019

DENNIS FULK BEGIN 032019

CHRIS CHRISTENSEN BEGIN 032019

BARBARA HAMPTON BEGIN 032019

BRADLEY JANORSCHKE BEGIN 032019

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W- 2/1099organization and

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

ROBERTA B ARONSON

SVP & GEN COUNSEL

GRACEANN CLENDENEN

SVP, LOAN OPERATIONS

SVP, STRATEGIC SERVICES

STEVEN M KETTLER

SVP, MEMBER SERVICES GROUP

JOEL ALLEN

SVP & CAO

ROBIN REED

|  | organizations<br>below dotted<br>line) | ndividual trustee<br>ir director | Institutional Trustee | 10 | ey employee | lighest compensated<br>mplovee | ormer | MISC)     | MISC) | related<br>organizations |
|--|--|----------------------------------|-----------------------|----|-------------|--------------------------------|-------|-----------|-------|--------------------------|
| GORDON NORTON BEGIN 032019<br>DIRECTOR | 0 00                                   | х                                |                       |    |             |                                |       | 0         | 0     | 0                        |
| SHELDON C PETERSEN CEO                 | 65 00                                  |                                  |                       | х  |             |                                |       | 1,893,200 | 0     | 111,854                  |
| JOHN T EVANS UNTIL 92018<br>EVP & COO  | 58 00                                  |                                  |                       | х  |             |                                |       | 1,285,873 | 0     | 27,449                   |
| JONATHON ANDREW DON<br>SVP AND CFO     | 60 00                                  |                                  |                       | ×  |             |                                |       | 623,078   | 0     | 218,682                  |
|  |  |                                  |                       |    |             |                                |       |           |       |                          |

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543,499

456,969

430,353

382,456

414,988

306,828

230,153

208,612

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145,710

167,276

| EVP & COO                            | *************************************** |  | Х |  | 1,285,873 |  |
|--------------------------------------|---|--|---|--|-----------|--|
| JONATHON ANDREW DON SVP AND CFO      | 60 00                                   |  | X |  | 623,078   |  |
| GREGORY STARHEIM  SVP, BUS & IND DEV | 60 00                                   |  | X |  | 601,800   |  |

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

|  | 1 411, 110413   |                                   |                       |    |              |                                  | ′      | (11) 2 (1000         | (14, 2/4,000         |  |  |
|--|---|-----------------------------------|-----------------------|----|--------------|----------------------------------|--------|----------------------|----------------------|--|--|
|  | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional Trustee | 10 | key employee | ee voldme<br>Highest compensated | Former | (W- 2/1099-<br>MISC) | (W- 2/1099-<br>MISC) | organization and<br>related<br>organizations |  |
| BRAD CAPTAIN SVP, CORPORATE RELATIONS      | 55 00   |                                   |                       | x  |              |                                  |        | 368,937              | 0                    | 119,298                                      |  |
| JOHN M BORAK<br>SVP, CREDIT RISK MANAGEMEN | 60 00   |                                   |                       | x  |              |                                  |        | 385,693              | 0                    | 163,961                                      |  |
| LAWRENCE SAUNDERS VP, PORTFOLIO MANAGEMENT | 50 00   |                                   |                       |    | ×            |                                  |        | 332,591              | 0                    | 81,219                                       |  |
| GHOLAM M SALEH  VP, FINANCIAL RISK MANAGEM | 60 00   |                                   |                       |    | ×            |                                  |        | 294,630              | 0                    | 49,255                                       |  |
|  |   |                                   |                       | -  | -            |                                  |        |                      |                      |  |  |

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308,684

307,512

277,954

256,174

386,826

376,276

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0

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62,313

65,527

72,081

78,132

108,742

73,639

| GHOLAM M SALEH             |
|----------------------------|
| VP, FINANCIAL RISK MANAGEM |
| YU LING WANG               |
| VP, CAPITAL MARKETS        |

AMY S LUONGO

DAVID W OLAH

ALLYN J AMATO

VP AND CIO

DANIEL W CAWOOD

VP, PORTFOLIO MANAGEMENT

......

VP, PORTFOLIO MANAGEMENT

VP, PORTFOLIO MANAGEMENT

VP & DEP GEN COUNSEL

RICHARD PERREAULT

and Independent Contractors

60 00

45 00

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40 00

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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation

and a director/trustee)

organization

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

DELBERT MARVIN CRANFORD

FORMER DIRECTOR

FORMER SVP

JOHN LIST UNTIL 92015

|                            | for related<br>organizations<br>below dotted<br>line) | Individual trustee<br>or director | Institutional Trustee | Officer | key employee | Highest compensated employee | Former | (W- 2/1099-<br>MISC) | (W- 2/1099-<br>MISC) | organization and<br>related<br>organizations |
|----------------------------|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------|----------------------|--|
| GARY A BRADBURY            | 47 00   |                                   |                       |         |              |                              |        |                      | _                    |  |
| VP, INTERNAL AUDIT AND ERM | •••••   |                                   |                       |         |              | X                            |        | 338,920              | 0                    | 87,181                                       |
| ROBERT E GEIER JR          | 60 00   |                                   |                       |         |              | V                            |        | 227.007              | 0                    | 101 224                                      |

any hours

| GARY A BRADBURY            | 47 00 |  |  |   | 338,920 | 0 |  |
|----------------------------|-------|--|--|---|---------|---|--|
| VP, INTERNAL AUDIT AND ERM |       |  |  | ^ | 336,920 | 0 |  |
| ROBERT E GEIER JR          | 60 00 |  |  | × | 337,087 | 0 |  |
| VP AND CONTROLLER          |       |  |  | ^ | 337,007 | • |  |
| JOHN FREDERICK SUTER       | 40 00 |  |  |   |         |   |  |

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| VF, INTERNAL AODIT AND ERIT |       |  |  |   |         |   |  |
|-----------------------------|-------|--|--|---|---------|---|--|
| ROBERT E GEIER JR           | 60 00 |  |  | × | 337,087 | 0 |  |
| VP AND CONTROLLER           |       |  |  | ^ | 337,007 |   |  |
| JOHN FREDERICK SUTER        | 40 00 |  |  | v | 319.170 | 0 |  |

| ROBERT E GEIER JR<br>VP AND CONTROLLER | 60 00 |  |  | х | 337,087 | 0 |  |
|--|-------|--|--|---|---------|---|--|
| JOHN FREDERICK SUTER                   | 40 00 |  |  | Х | 319,170 | 0 |  |

| JOHN FREDERICK SUTER                   | 40 00 |  |  |   |         |   |         |
|--|-------|--|--|---|---------|---|---------|
| ROBERT E GEIER JR<br>VP AND CONTROLLER |       |  |  | Х | 337,087 | 0 | 101,224 |

|   |       | ı | ı | <br>ı |         |   |        |
|---|-------|---|---|-------|---------|---|--------|
| JOHN FREDERICK SUTER                    | 40 00 |   |   |       |         |   |        |
| VP, CAPITAL MARKETS RESEARCH & ANALYSIS |       |   |   | ×     | 319,170 | 0 | 117,77 |
| DELDERT MARVIN CRANEORD                 | 0 00  |   |   |       |         |   |        |

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12,064

146,942

**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.

OMB No 1545-0047

DLN: 93493277007099

Cat No 52283D Schedule D (Form 990) 2018

Open to Public

Department of the Treasury

(Form 990)

| nem | al Revenue Service   | ov/10/11/990 for the latest information.   | Inspection                                |
|-----|--|--|---|
| NAT | me of the organization<br>TONAL RURAL UTILITIES COOPERATIVE<br>ANCE CORPORATION  |  | Employer identification number 52-0891669 |
| Pa  | Organizations Maintaining Donor Advis<br>Complete if the organization answered "Ye   |  | or Accounts.                              |
|     | •  | (a) Donor advised funds  | (b)Funds and other accounts               |
| 1   | Total number at end of year  |  |   |
| 2   | Aggregate value of contributions to (during year)  |  |   |
| 3   | Aggregate value of grants from (during year)   |  |   |
| 4   | Aggregate value at end of year   |  |   |
| 5   | Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex  |  | dvised funds are the                      |
| 6   | Did the organization inform all grantees, donors, and do<br>charitable purposes and not for the benefit of the donor<br>private benefit?   |  |   |
| Pa  | rt III Conservation Easements. Complete if th  | ie organization answered "Yes" on For  | m 990, Part IV, line 7.                   |
| 1   | Purpose(s) of conservation easements held by the organ   | nization (check all that apply)  |   |
|     | Preservation of land for public use (e g , recreation  | n or education) $\Box$ Preservation of ar  | historically important land area          |
|     | Protection of natural habitat  | ☐ Preservation of a  | certified historic structure              |
|     | ☐ Preservation of open space   |  |   |
| 2   | Complete lines 2a through 2d if the organization held a  | gualified concernation contribution in the fe  | rm of a concervation                      |
| _   | easement on the last day of the tax year   | quamieu conservation contribution in the 10  | Held at the End of the Year               |
| а   | Total number of conservation easements   |  | 2a  |
| b   | Total acreage restricted by conservation easements   |  | 2b  |
| С   | Number of conservation easements on a certified historic   | c structure included in (a)  | 2c  |
| d   | Number of conservation easements included in (c) acqui structure listed in the National Register   | red after 7/25/06, and not on a historic   | 2d  |
| 3   | Number of conservation easements modified, transferre tax year ▶   | d, released, extinguished, or terminated by  | the organization during the               |
| 4   | Number of states where property subject to conservatio   | n easement is located ▶  |   |
| 5   | Does the organization have a written policy regarding th   |  | of welstions                              |
| ,   | and enforcement of the conservation easements it holds   |  | Yes No                                    |
| 6   | Staff and volunteer hours devoted to monitoring, inspec  | ting, handling of violations, and enforcing c  |   |
| 7   | Amount of expenses incurred in monitoring, inspecting,  \$ \\$   | handling of violations, and enforcing consei   | rvation easements during the year         |
| В   | Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(II)$ ?   | above satisfy the requirements of section 1  | .70(h)(4)(B)(ı)                           |
| 9   | In Part XIII, describe how the organization reports cons<br>balance sheet, and include, if applicable, the text of the   | footnote to the organization's financial stat  | ense statement, and                       |
| Par | the organization's accounting for conservation easement  TIII Organizations Maintaining Collections Complete if the organization answered "Ye                                    | of Art, Historical Treasures, or Oth   | ner Similar Assets.                       |
| 1a  | If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan | 6 (ASC 958), not to report in its revenue st<br>public exhibition, education, or research in |   |
| b   | If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publ  | 6 (ASC 958), to report in its revenue stater   |   |
|     | following amounts relating to these items  |  | <b>▶</b> ¢                                |
|     | (i) Revenue included on Form 990, Part VIII, line 1  |  | <b>*</b> *                                |
| (i  | ii)Assets included in Form 990, Part X   |  | <b>▶</b> \$                               |
| 2   | If the organization received or held works of art, historic following amounts required to be reported under SFAS 1   | · · · · · · · · · · · · · · · · · · ·  |   |
| а   | Revenue included on Form 990, Part VIII, line 1  |  | <b>▶</b> \$                               |
| b   | Assets included in Form 990, Part X  |  | <b>&gt;</b> \$                            |

| Par        | t II | Organizations M   | aintaining Col         | lections o     | of Art, H          | istori       | cal T    | reasu   | ires, o          | r Other     | Similar As    | sets (conti     | nued)       |   |
|------------|------|---|------------------------|----------------|--------------------|--------------|----------|---------|------------------|-------------|---------------|-----------------|-------------|---|
| 3          |      | ing the organization's acq<br>ms (check all that apply)     | juisition, accessio    | n, and other   | records,           | check        | any of   | the fo  | llowing t        | that are a  | sıgnıfıcant u | ise of its coll | ection      |   |
| а          |      | Public exhibition   |                        |                |                    | d            |          | Loan    | or exch          | ange prog   | ırams         |                 |             |   |
| Ь          |      | Scholarly research  |                        |                |                    | е            |          | Othe    | r                |             |               |                 |             |   |
| С          |      | Preservation for future                                     | e generations          |                |                    |              |          |         |                  |             |               |                 |             |   |
| 4          |      | ovide a description of the rt XIII                          | organization's col     | llections and  | l explain h        | now the      | ey furt  | her the | e organiz        | zation's ex | kempt purpo   | se in           |             |   |
| 5          |      | ırıng the year, dıd the org<br>sets to be sold to raıse fuı |                        |                |                    |              |          |         |                  |             | ıılar         | ☐ Yes           | □ N         | o                                       |
| Pai        | rt I | Complete if the or X, line 21.                              |                        |                | " on Forr          | m 990        | , Part   | IV, lı  | ne 9, o          | r reporte   | ed an amou    | nt on Form      | n 990,      | Part                                    |
| 1a         |      | the organization an agent<br>cluded on Form 990, Part       |                        | an or other    | ıntermedi          | ary for      | contri   | bution  | s or oth         | er assets I | not           | ☐ Yes           | □ N         | o                                       |
| Ь          | If   | "Yes," explain the arrange                                  | ement in Part XIII     | and comple     | ete the fol        | lowing       | table    |         |                  |             | Α             | mount           |             | _                                       |
| c          | Ве   | ginning balance   |                        |                |                    | _            |          |         |                  | 1c          |               |                 |             | _                                       |
| d          | Ad   | ditions during the year                                     |                        |                |                    |              |          |         |                  | 1d          |               |                 |             |   |
| е          | Dis  | stributions during the yea                                  | r                      |                |                    |              |          |         |                  | 1e          |               |                 |             | _                                       |
| f          | En   | dıng balance  |                        |                |                    |              |          |         |                  | 1f          |               |                 |             | _                                       |
| 2a         | Die  | d the organization include                                  | an amount on Fo        | orm 990, Pai   | rt X, line 2       | 21, for      | escrov   | v or cu | stodial a        | account lia | bility?       | ☐ Yes           | $\square$ N | o                                       |
| b          | If   | "Yes," explain the arrange                                  | ement in Part XIII     | Check here     | e if the ex        | planati      | on has   | s been  | provide          | d in Part ) | KIII          |                 |             |   |
| Pa         | rt V | Endowment Fun   | <b>ds.</b> Complete ıf | the organ      | ızatıon a          | nswer        | ed "Y    | es" or  | n Form           | 990, Par    | t IV, line 1  | 0.              |             |   |
|            | _    |   |                        | (a)Currer      | nt year            | <b>(b)</b> P | rıor yea | ır      | <b>(c)</b> Two y | ears back   | (d)Three yea  | rs back (e)F    | our yea     | rs back                                 |
|            | _    | inning of year balance .                                    |                        |                |                    |              |          | _       |                  |             |               |                 |             |   |
|            |      | tributions  |                        |                |                    |              |          | -       |                  |             |               |                 |             |   |
|            |      | investment earnings, gair                                   |                        |                |                    |              |          | _       |                  |             |               |                 |             |   |
|            |      | nts or scholarships   |                        |                |                    |              |          |         |                  |             |               |                 |             |   |
| е          |      | er expenditures for faciliti<br>programs                    | es                     |                |                    |              |          |         |                  |             |               |                 |             |   |
| f          |      | ninistrative expenses .                                     |                        |                |                    |              |          |         |                  |             |               |                 |             |   |
| g          | End  | of year balance   |                        |                |                    |              |          |         |                  |             |               |                 |             |   |
| 2          | Pro  | ovide the estimated perce                                   | ntage of the curr      | ent vear end   | d balance          | (line 1      | a. colu  | mn (a`  | )) held a        | ıs          |               | I               |             |   |
| а          |      | ard designated or quasi-e                                   |                        | ,              |                    | •            |          | •       |                  |             |               |                 |             |   |
| ь          | Pe   | rmanent endowment <b>&gt;</b>                               |                        |                |                    |              |          |         |                  |             |               |                 |             |   |
| С          | Te   | mporarily restricted endo                                   | wment 🟲                |                |                    |              |          |         |                  |             |               |                 |             |   |
|            | Th   | e percentages on lines 2a                                   | , 2b, and 2c shou      | ıld equal 100  | 0%                 |              |          |         |                  |             |               |                 |             |   |
| <b>3</b> a |      | e there endowment funds                                     | not in the posses      | sion of the    | organızatı         | on that      | t are h  | eld an  | d admın          | istered fo  | r the         |                 |             |   |
|            |      | ganization by<br>unrelated organizations                    |                        |                |                    |              |          |         |                  |             |               | 3a(i)           | Yes         | No                                      |
|            | ٠.   | ) related organizations .                                   |                        |                |                    |              |          |         |                  |             |               | 3a(ii)          |             |   |
| b          | •    | "Yes" on 3a(II), are the re                                 |                        | ns listed as i | equired o          | n Sche       | dule R   | . ?     | • •              |             |               | 3b              |             |   |
| 4          | De   | escribe in Part XIII the inte                               | ended uses of the      | organizatio    | n's endow          | ment f       | unds     |         |                  |             |               |                 |             |   |
| Pai        | rt V |   |                        |                |                    |              |          |         |                  |             |               |                 |             |   |
|            |      | Complete if the or  | ganization ansv        |                |                    |              |          |         |                  |             |               |                 |             |   |
|            | νes  | scription of property                                       | (a) Cost or oth        |                | ( <b>b)</b> Cost o | or other     | nasis (  | outer)  | (C) ACC          | umulated C  | lepreciation  | (a) B           | ook valu    | e                                       |
| 1-         | 1    | A   |                        |                |                    |              | 72 74    | 05 071  |                  |             |               |                 | 2-          | 705 071                                 |
|            |      | d   |                        |                |                    |              |          | 95,971  |                  |             | 19 9/19 17/   |                 |             | 3,795,971                               |
|            |      | dings   |                        |                |                    |              | 56,1     | 79,334  |                  |             | 18,848,174    |                 | 3,          | 7,331,160                               |
|            |      | sehold improvements   |                        |                |                    |              |          |         |                  |             |               |                 |             |   |
|            |      | ıpment<br>er  |                        |                |                    |              | 94 3     | 46,891  |                  |             | 34,846,663    |                 | 50          | 9,500,228                               |
| е          | Oun  |   | 1                      |                | ı                  |              | ٠, ٦٠    | .0,001  | 1                |             | J-7,U-0,UUJ   |                 | J:          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |

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

120,627,359

| chedule D (Form 990) 2018  Part VII Investments—Other Securities. Complete if the orga  | nızatıon ar          | nswered "Yes" on Form 990,     | Page<br>Part IV, line 11b.     |
|---|----------------------|--------------------------------|--------------------------------|
| See Form 990, Part X, line 12.  |                      |                                | ·<br>                          |
| (a) Description of security or category (including name of security)  | (b)<br>Book<br>value | Cost or end-of-ye              |                                |
| ) Financial derivatives   | . ,                  |                                |                                |
| ) Closely-held equity interests   |                      |                                |                                |
|   | _                    |                                |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| tal. (Column (b) must equal Form 990, Part X, col (B) line 12)  | <b>•</b>             |                                |                                |
| Int VIII Investments—Program Related.  Complete if the organization answered 'Yes' on Form 99   | n Part IV            | line 11c See Form 990 Par      | + Y line 13                    |
|   | <b>b)</b> Book val   | ue (c) Method o                | f valuation                    |
| )   |                      | Cost or end-of-ye              | ar market value                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )  |                      |                                |                                |
| Other Assets. Complete if the organization answered 'Yes' or (a) Description  | n Form 990,          | Part IV, line 11d See Form 990 | Part X, line 15 (b) Book value |
| )   |                      |                                | (b) Book value                 |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
| Part X Other Liabilities. Complete if the organization answere  |                      |                                | or 11f.                        |
| See Form 990, Part X, line 25.  (a) Description of liability  | (b                   | ) Book value                   |                                |
| ) Federal income taxes  |                      |                                |                                |
| JARANTEE LIABILITY  |                      | 13,666,487                     |                                |
| THER ACCRUED EXPENSES EDIT LOSSES ALLOWANCE   |                      | 16,849,864<br>63,000           |                                |
| RIVATIVE LIABILITY  |                      | 383,472,901                    |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
|   |                      |                                |                                |
| )   |                      |                                |                                |
| )   |                      |                                |                                |
| tal. (Column (b) must equal Form 990, Part X, col (B) line 25 )   | <u> </u>             | 414,052,252                    |                                |
| <ul> <li>Liability for uncertain tax positions In Part XIII, provide the text of the foo rganization's liability for uncertain tax positions under FIN 48 (ASC 740) Ch</li> </ul> |                      |                                | _                              |

1

Schedule D (Form 990) 2018

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990. Part VIII. line 12

1

Page 4

| 2   | Amounts included on line 1 but not on Form 990, Part VIII, line 12   |            |                         |
|-----|--|------------|-------------------------|
| а   | Net unrealized gains (losses) on investments 2a  |            |                         |
| b   | Donated services and use of facilities   |            |                         |
| С   | Recoveries of prior year grants  |            |                         |
| d   | Other (Describe in Part XIII )   |            |                         |
| е   | Add lines <b>2a</b> through <b>2d</b>  | 2e         |                         |
| 3   | Subtract line <b>2e</b> from line <b>1</b>   | 3          |                         |
| 4   | Amounts included on Form 990, Part VIII, line 12, but not on line 1  |            |                         |
| а   | Investment expenses not included on Form 990, Part VIII, line 7b . 4a  |            |                         |
| b   | Other (Describe in Part XIII )   |            |                         |
| С   | Add lines <b>4a</b> and <b>4b</b>  | 4c         |                         |
| 5   | Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12 )   | 5          |                         |
| Par | Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  | per Returi | n.                      |
| 1   | Total expenses and losses per audited financial statements   | 1          |                         |
| 2   | Amounts included on line 1 but not on Form 990, Part IX, line 25   |            |                         |
| а   | Donated services and use of facilities   |            |                         |
| b   | Prior year adjustments   |            |                         |
| c   | Other losses   |            |                         |
| d   | Other (Describe in Part XIII )   |            |                         |
| е   | Add lines 2a through 2d  | 2e         |                         |
| 3   | Subtract line <b>2e</b> from line <b>1</b>   | 3          |                         |
| 4   | Amounts included on Form 990, Part IX, line 25, but not on line 1:   |            |                         |
| а   | Investment expenses not included on Form 990, Part VIII, line 7b 4a  |            |                         |
| b   | Other (Describe in Part XIII )   |            |                         |
| С   | Add lines <b>4a</b> and <b>4b</b>  | 4c         |                         |
| 5   | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 )  | 5          |                         |
| Par | t XIII Supplemental Information  |            |                         |
|     | vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b<br>lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional informatio |            | 4, Part X, line 2, Part |
|     | Return Reference Explanation   |            |                         |

| Schedule D (Fo | orm 990) 2018     |                            | Page <b>5</b>              |
|----------------|-------------------|----------------------------|----------------------------|
| Part XIII      | Supplemental Info | rmation <i>(continued)</i> |                            |
| Ret            | urn Reference     | Explanation                |                            |
|                |                   |                            | Schedule D (Form 990) 2018 |

DLN: 93493277007099 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number NATIONAL RURAL UTILITIES COOPERATIVE 52-0891669 FINANCE CORPORATION Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete If the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Schedule I (Form 990) 2018

Part III can be duplicated if additional space is needed

Part III

(2) (3) (4)

(5) (6)

(7) Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Part IV Return Reference **Explanation** PART I, LINE 2 INTEGRITY FUND IN ORDER TO BE CONSIDERED FOR A GRANT FROM THE INTEGRITY FUND, A RURAL ELECTRIC SYSTEM MUST ESTABLISH THAT THERE IS AT LEAST ONE OF THE FOLLOWING THREE THREATS TO THE INTEGRITY OF ITS SYSTEM (I) ALL, OR A SIGNIFICANT PORTION, OF ITS GEOGRAPHICALLY DEFINED TERRITORY OR SPECIFICALLY IDENTIFIED PRESENT OR ANTICIPATED CONSUMERS AND/OR ELECTRIC FACILITIES FACE A THREAT OF ACQUISITION BY A COMPETING ENTITY, (II) THE COOPERATIVE FACES A THREAT OF ITS RIGHT TO OFFER NON-ELECTRIC ENERGY SERVICES TO CONSUMERS, OR (III) THE COOPERATIVE IS FACING

REGULATORY, JUDICIAL OR LEGISLATIVE CHALLENGES THAT THREATEN ITS EXISTENCE UNDER THE COOPERATIVE BUSINESS MODEL EDUCATION FUND -- EACH STATEWIDE ASSOCIATION AND ELIGIBLE REGIONAL ASSOCIATION WILL SUBMIT AN APPLICATION FORM DESCRIBING THE PROGRAM FOR WHICH THE GRANT WILL BE USED CFC CALCULATES THE AMOUNT ALLOTTED TO EACH APPLICANT DURING THE FISCAL YEAR BASED UPON THE TOTAL NUMBER OF CO-OPS WHICH ARE

Page 2

### **Additional Data**

CKENERGY ELECTRIC

COOPERATIVE INC PO BOX 70 BINGER, OK 73009 ELKHORN RURAL PUBLIC

POWER DISTRICT

PO BOX 310 BATTLE CREEK, NE 687150310

## Software ID: **Software Version: EIN:** 52-0891669 Name: NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORPORATION Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| organization<br>or government | (-, | ıf applicable | grant | cash<br>assistance | (book, FMV, appraisal, other) |
|-------------------------------|-----|---------------|-------|--------------------|-------------------------------|
|                               |     |               |       |                    |                               |

| (a) Name and address of organization or government | (b) EIN | (c) IRC section<br>if applicable | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash<br>assistance | <b>(f)</b> Method of value (book, FMV, approacher) |
|--|---------|----------------------------------|-----------------------------|--|--|
|  |         |                                  |                             |  |  |

501 (C)(6)

501 (C)(6)

47-4815587

47-6000258

| (g) Description of non-cash assistance | (h) Purpose of gr<br>or assistance |
|--|------------------------------------|

| <b>g)</b> Description of on-cash assistance | (h)<br>or a |
|---|-------------|
|   |             |

rant

luation

32,832

18,842

INTEGRITY FUND -TERRITORY THREAT

INTEGRITY FUND -

TERRITORY THREAT

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance GRAND CANYON STATE 86-6056759 501 (C)(6) 125,000 INTEGRITY FUND -

TERRITORY THREAT

| ASSOCIATION INC 2210 S PRIEST DRIVE TEMPE, AZ 85282 |            |            |        |  | TERRITORY THREAT |
|---|------------|------------|--------|--|------------------|
| HIGH WEST ENERGY                                    | 83-0143525 | 501 (C)(6) | 12.847 |  | INTEGRITY FUND - |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PINE BLUFFS, WY 820820519

PO BOX 519

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance NORTHWESTERN ELECTRIC 73-0375825 501 (C)(6) 93,391 INTEGRITY FUND -RY THREAT

| COOPERATIVE INC<br>PO BOX 2707<br>WOODWARD, OK 738022707 |            |            |         |  | TERRITORY THREAT                     |
|--|------------|------------|---------|--|--------------------------------------|
| PEDERNALES ELECTRIC<br>COOPERATIVE INC<br>PO BOX 1       | 74-0828412 | 501 (C)(6) | 105,608 |  | INTEGRITY FUND -<br>TERRITORY THREAT |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

JOHNSON CITY, TX 786360001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 84-0312535 501 (C)(6) 23.911 INTEGRITY FUND -SAN ISABEL ELECTRIC ASSOCIATION INC TERRITORY THREAT

781 F INDUSTRIAL BLVD PUEBLO WEST, CO 81007 SOUTH TEXAS ELECTRIC 74-1393760 501 (C)(6) 125.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NURSERY, TX 77976

INTEGRITY FUND -COOPERATIVE INC TERRITORY THREAT PO BOX 119

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance THE ASSOCIATION OF 501 (C)(6) 104.630 INTEGRITY FUND -72-0400467 LOUISIANA ELECTRIC TERRITORY THREAT COOPERATIVES INC

IOWNED UTILITY ASSOC YOUTH RALLY

10725 AIRLINE HIGHWAY BATON ROUGE, LA 708164299 ALASKA POWER ASSOCIATION 92-0069880 501 (C)(6) 14,800

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ANCHORAGE, AK 995036650

EDUCATIONAL FUND-703 WEST TUDOR ROAD SUITE INRECA YOUTH TOUR OF DC & ID CONSUMER-200

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance 63-0264081 501 (C)(6) 17.400 EDUCATIONAL FUND-ALABAMA RURAL ELECTRIC ASSOCIATION OF IAREA SUMMER CONFERENCE COOPERATIVES PO BOX 244014 71-0219756 501 (C)(12) 13,400 EDUCATIONAL FUND-ORIENTATION TO COOP

PRINCIPLES &

LEADERSHIP & EMPLOYEE TRAINING

MONTGOMERY, AL 361244014 ELECTRIC COOPERATIVES OF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ARKANSAS PO BOX 194208 LITTLE ROCK, AR 722194208

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance MISSOURI ELECTRIC 43-0631824 501 (C)(6) 30.200 EDUCATIONAL FUND-COOPERATIVES IMO COOPERATIVE PO BOX 1645 YOUTH CONFERENCE

COURSES, NRECA

WASHINGTON, DC

YOUTH TOUR OF

JEFFERSON CITY, MO 65102 AND LEADERSHIP EXPERIENCE COLORADO RURAL ELECTRIC 84-0411220 501 (C)(6) 18,000 EDUCATIONAL FUND-EMPLOYEE EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ASSOCIATION 5400 NORTH WASHINGTON

DENVER, CO 80216

STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance ELECTRIC POWER 64-0200697 501 (C)(6) 17.400 EDUCATIONAL FUND-ASSOCIATIONS OF INRECA YOUTH TOUR OF MISSISSIPPI WASHINGTON, DC

PO BOX 3300
RIDGELAND, MS 391583300

FLORIDA ELECTRIC
COOPERATIVES ASSOCIATION
INC
100
2916 APALACHEE PARKWAY

WASHINGTON, BC
COMPRESSION AND COMPRESSION AN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

TALLAHASSEE, FL 32301

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance GEORGIA FLECTRIC 58-0530279 501 (C)(6) 25 400 EDUCATIONAL FUND-

LENERGY COOPERATIVE

DEVELOPMENT &

EDUCATION

| MEMBERSHIP CORPORATION<br>PO BOX 1707<br>TUCKER, GA 300851707 |            |            |       |  | SUNBELT AG EXPO<br>EDUCATION EXHIBIT |
|---|------------|------------|-------|--|--------------------------------------|
| GOLDEN STATE POWER  | 68-0441905 | 501 (C)(6) | 6,200 |  | EDUCATIONAL FUND-                    |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GOLDEN STATE POWER 68-0441905 501 (C)(6) COOPERATIVE

8 S PINION PINE CIRCLE

GRAEAGLE, CA 96103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BOISE, ID 837011898

| GRAND CANYON STATE ELECTRIC COOPERATIVE ASSOCIATION 22 S PRIEST DRIVE TEMPE, AZ 85282 | 86-6056759 | 501 (C)(6) | 12,200 |  | EDUCATIONAL FUND-<br>NRECA YOUTH TOUR OF<br>WASHINGTON, DC |
|---|------------|------------|--------|--|--|
|   |            |            |        |  |  |

82-0502739 501 (C)(6) 11,600 EDUCATIONAL FUND-IDAHO CO-OPERATIVE UTILITIES ASSOCIATION INC ICUA YOUTH RALLY & PO BOX 1898 ICUA MEMBERS

CONFERENCE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 35-1499808 501 (C)(6) 27.000 INDIANA ELECTRIC EDUCATIONAL FUND-COOPERATIVES EMPLOYEE TRAINING. 8888 KEYSTONE CROSSING BOARD DEVELOPMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

DES MOINES, IA 503222992

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance KANSAS ELECTRIC 48-0541902 501 (C)(12) 20.000 **IEDUCATIONAL FUND-**

BASICS

| COOPERATIVES INC<br>PO BOX 4267<br>TOPEKA, KS 666044267 |            |            | ·     |  | BACK TO E<br>PROGRAM |
|---|------------|------------|-------|--|----------------------|
| MICHIGAN ELECTRIC<br>COOPERATIVE ASSOCIATION            | 38-2214287 | 501 (C)(6) | 9,600 |  | EDUCATIO<br>NRECA YO |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LANSING, MI 489331529

IONAL FUND-OUTH TOUR OF 201 TOWNSEND STREET WASHINGTON, DC SUITE 900

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

EDUCATIONAL FUND

EDUCATIONAL FUND-

PROGRAM

THE TODAY'S MEMBERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(6)

501 (C)(6)

MININECOTA DUDAL ELECTRIC

COOPERATIVES' ASSOCIATION

MONTANA ELECTRIC

GREAT FALLS, MT 59403

PO BOX 1306

41 0417102

81-0229220

| MINNESOTA KOKAL LELCTRIC  | 41-041/193 | 301 (0)(0) | 23,000 |  |  | LDOCATIONAL TOND-   |
|---------------------------|------------|------------|--------|--|--|---------------------|
| ASSOCIATION               |            |            |        |  |  | BOARD LEADERSHIP    |
| 11640 - 73RD AVENUE NORTH |            |            |        |  |  | (BLC) CERTIFICATION |
| MAPLE GROVE, MN 55369     |            |            |        |  |  | COURSES AND STAFF   |
|                           |            |            |        |  |  | TRAINING            |

25 600

19,400

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance NEBRASKA RURAL ELECTRIC 47-0394033 501 (C)(6) 17.800 IEDUCATIONAL FUND-ASSOCIATION INRECA YOUTH TOUR OF

PO BOX 82048 WASHINGTON, DC LINCOLN, NE 68501 NEVADA RURAL ELECTRIC 88-0237046 501 (C)(6) 8.200 ASSOCIATION 1894 E WILLIAM STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CARSON CITY, NV 89701

EDUCATIONAL FUND-STATEWIDE ENERGY SMART PROGRAM SUITE 4222

(book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

**IEDUCATIONAL FUND-**

| COOPERATIVE ASSOCIATION<br>INC<br>614 DON GASPAR AVENUE<br>SANTA FE, NM 87505 |            |            | ,     |  | NRECA CREDENTIALED<br>COOP DIR & BOARD<br>LEADERSHIP<br>CERTIFICATE COURSES |
|---|------------|------------|-------|--|---|
| NEW YORK STATE RURAL<br>ELECTRIC COOPERATIVE                                  | 16-1264464 | 501 (C)(6) | 6,200 |  | EDUCATIONAL FUND-<br>STUDENT  |

11.600

ASSOCIATION INC PARTICIPATION -PO BOX 128 NRECA LEG HARTWICK, NY 133480128 CONFERENCE

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (C)(6)

(c) IRC section

(a) Name and address of

NEW MEXICO RURAL ELECTRIC

(b) EIN

85-0155370

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 56-1189186 501 (C)(6) 17.200 NORTH CAROLINA EDUCATIONAL FUND-ASSOCIATION OF ELECTRIC BRIGHT IDEAS COOPERATIVES INC. EDUCATION GRANT PROGRAM

PROGRAM

PO BOX 27306
RALEIGH, NC 27611

NORTH DAKOTA ASSOCIATION 45-0231058
OF RURAL ELECTRIC COOPERATIVES
PO BOX 7277
OF RURAL FUND-COOPERATIVES
PO BOX 7277
ORIGINAL FUND-CONNECTION
PO BOX 7277

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MANDAN, ND 585540724

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance NORTHEACT ACCOCTATION OF 22 21 52 520 E01 (C)(13) 1 E 000 EDUCATIONAL FUND

LEADERSHIP

PROGRAMS

| ELECTRIC COOPERATIVES INC<br>PO BOX 8<br>EAST MONTPELIER, VT 05651 | 22-2153529 | 301 (C)(12) | 15,000 |  | NRECA YOUTH TOUR C<br>WASHINGTON, DC |
|--|------------|-------------|--------|--|--------------------------------------|
|  |            |             |        |  |                                      |

51-0174617 501 (C)(6) 21.400 **IEDUCATIONAL FUND-**OHIO'S ELECTRIC COOPERATIVES INRECA COURSES AND

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6677 BUSCH BOULEVARD

COLUMBUS, OH 43229

organization or government if applicable grant cash assistance or assist

(e) Amount of non-

(f) Method of valuation

(a) Description of

(h) Purpose of grant

LEGISLATOR OUTREACH PROGRAM & DIRECTOR

EDUCATION

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

COOPERATIVE ASSOCIATION

8565 SW SALISH LANE SUITE

WILSONVILLE, OR 970709674

130

(b) EIN

| ELECTRIC COOPERATIVES INC<br>PO BOX 54309<br>OKLAHOMA CITY, OK<br>731541309 | /3-0556236 | 501 (C)(6) | 18,600 |  | YOUTH TOUR PROMOTIONAL MATERIALS & T-SHIRTS |
|---|------------|------------|--------|--|---|
| OREGON RURAL ELECTRIC   | 93-0593238 | 501 (C)(6) | 20,200 |  | EDUCATIONAL FUND-                           |

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance DENINGVI VANITA DUDAL 22 6201 520 ED4 (C)(C) 21 000 FDUCATIONAL FUND-

| ELECTRIC ASSOCIATION<br>PO BOX 1266<br>HARRISBURG, PA 171081266 | 23-6291550 | 301 (0)(0)  | 21,000 |  | PREA<br>COMMU<br>WORKS |
|---|------------|-------------|--------|--|------------------------|
| SOUTH DAKOTA RURAL  | 46-0231254 | 501 (C)(12) | 16.200 |  | EDUCA <sup>-</sup>     |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 1138 PIERRE, SD 57501

MUNICATIONS KSHOP CATIONAL FUND-ELECTRIC ASSOCIATION INC YOUTH EXCURSION

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(e) Amount of non-

(f) Method of valuation

(q) Description of

(h) Purpose of grant

YOUR TOUR MAGAZINE

AND TEXAS CO-OP

POWER TOOL KIT

| TENNESSEE ELECTRIC      | 62-0461379 | 501 (C)(6) | 14,400 |  | EDUCATIONAL FUND- |
|-------------------------|------------|------------|--------|--|-------------------|
| COOPERATIVE ASSOCIATION |            |            |        |  | YOUTH LEADERSHIP  |
| PO BOX 100912           |            |            |        |  | SUMMIT            |
| NASHVILLE, TN 37224     |            |            |        |  |                   |

TEXAS ELECTRIC 74-1007829 277 48.600 IEDUCATIONAL FUND-

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

COOPERATIVES INC

AUSTIN, TX 787012167

1122 COLORADO ST STE 2400

**(b)** EIN

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(e) Amount of non-

(f) Method of valuation

(a) Description of

(h) Purpose of grant

BASIS)

| THE ASSOCIATION OF<br>LOUISIANA ELECTRIC<br>COOPERATIVES INC<br>10725 AIRLINE HIGHWAY<br>BATON ROUGE, LA 708164299 | 72-0400467 | 501 (C)(6) | 9,800   |  | EDUCATIONAL FUND-<br>LOUISIANA ELECTRIC<br>COOPERATIVES YOUTH<br>TOUR |
|--|------------|------------|---------|--|---|
| THE ELECTRIC COORERATIVES  | E2 02000C4 | E03 (C)(C) | 1 . 000 |  | EDUCATIONAL FUND  |

THE ELECTRIC COOPERATIVES 57-0308664 502 (C)(6)| 15,800 |EDUCATIONAL FUND-OF SOUTH CAROLINA INC. NRECA TRAINING COURSES (STATEWIDE

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

808 KNOX ABBOTT DRIVE

CAYCE, SC 29033

(a) Name and address of

**(b)** EIN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance UTAH RURAL ELECTRIC 87-0402010 501 (C)(6) 9,000 EDUCATIONAL FUND-ASSOCIATION NEW LEGISLATOR

| 10714 SOUTH JORDAN<br>GATEWAY SUITE<br>300 |            |            |        |  | 1 | EDUCATION       |
|--|------------|------------|--------|--|---|-----------------|
| SOUTH JORDAN, UT 84095                     |            |            |        |  |   |                 |
| VA MD & DE ASSOCIATION OF                  | 54-0553861 | 501 (C)(6) | 19.600 |  |   | EDUCATIONAL FUN |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GLEN ALLEN, VA 230582340

JND-(-)(-)

ELECTRIC COOPERATIVES BOARD TRAINING AND PO BOX 2340 EDUCATION

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MADISON, WI 537032869

| WASHINGTON RURAL ELECTRIC COOPERATIVE ASSOCIATION PO BOX 7219 OLYMPIA, WA 985077219 | 91-1236389 | 501 (C)(6) | 14,000 |  | EDUCATIONAL FUND-<br>WRECA ANNUAL<br>MEMBERSHIP MEETING<br>EDUC MATERIAL |
|---|------------|------------|--------|--|--|
| WISCONSIN ELECTRIC COOPERATIVE ASSOCIATION 222 WEST WASHINGTON AVENUE SUITE 680     | 39-1128018 | 501 (C)(6) | 20,800 |  | EDUCATIONAL FUND-<br>WECA YOUTH<br>LEADERSHIP<br>CONGRESS/YOUTH<br>TOUR  |

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance NAL FUND-

COOPERATIVE COM

| WYOMING RURAL ELECTRIC ASSOCIATION 2312 CAREY AVENUE CHEYENNE, WY 820013627 | 83-0207211 | 501 (C)(12) | 10,200 |  | EDUCATIONAL FUND-<br>SPONSOR YOUTH TOUR<br>& AG IN THE<br>CLASSROOM |
|---|------------|-------------|--------|--|---|
|   |            |             |        |  |   |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4301 WILSON BLVD FIN8-110

ARLINGTON, VA 22203

NRECA 53-0116145 501(C)(6) 310.974 **IEDUCATIONAL FUND-**

| efil  | e GRAPHIC pr                                | int - DO NOT PROCESS  | As Filed Data              | a -  | DLN: 934                | 9327           | 7007   | 099     |  |
|-------|---|---|----------------------------|--|-------------------------|----------------|--------|---------|--|
| Sch   | edule J                                     | Co  | mpensati                   | ion Information  | ОМ                      | IB No          | 1545-0 | 0047    |  |
| (For  | n 990)                                      | For certain Officer   | hest                       |  |                         |                |        |         |  |
|       |   | ► Complete if the orga  | Compensa<br>Inization answ | ited Employees<br>ered "Yes" on Form 990, Part IV                              | , line 23.              | 20             | 18     | 3       |  |
| D     |   |   | ▶ Attach                   | to Form 990. instructions and the latest inform                                |                         | Open to Public |        |         |  |
| •     | tment of the Treasury<br>al Revenue Service | P do to <u>www.ns.gov</u>   | <u>/101111990</u> 101      | mistractions and the latest mion   |                         | Insp           | ectio  | n       |  |
|       | ne of the organizational Rural UTILI        |   |                            |  | Employer identificat    | ion nu         | ımber  |         |  |
|       | ANCE CORPORATION                            | l .   |                            |  | 52-0891669              |                |        |         |  |
| Pa    | rt I Questi                                 | ons Regarding Compensat   | ion                        |  |                         |                |        |         |  |
| 1a    |   |   |                            | the following to or for a person liste<br>y relevant information regarding the |                         |                | Yes    | No      |  |
|       |   | ,   | II to provide air          | ,  |                         |                |        |         |  |
|       |   | s or charter travel<br>companions   | H                          | Housing allowance or residence for<br>Payments for business use of perso       | •                       |                |        |         |  |
|       | _   | nification and gross-up payments  |                            | Health or social club dues or initiati   |                         |                |        |         |  |
|       |   | nary spending account   |                            | Personal services (e g , maid, chaut   | ffeur, chef)            |                |        |         |  |
|       | T66 +b - b                                  |   | 6-                         |  |                         |                |        |         |  |
| Ь     |   | xes in line II are checked, did the<br>all of the expenses described abov |                            | ollow a written policy regarding payn<br>plete Part III to explain             | nent or reimbursement   | <b>1</b> b     | Yes    |         |  |
| 2     |   |   |                            | or allowing expenses incurred by all<br>r, regarding the items checked in line | e 1a?                   | 2              |        | No      |  |
| 3     | Indicate which,                             | if any, of the following the filing o                                     | organization use           | d to establish the compensation of t   | he                      |                |        |         |  |
|       |   | EO/Executive Director Check all ed organization to establish compe        |                            | not check any boxes for methods<br>CEO/Executive Director, but explain         | ın Part III             |                |        |         |  |
|       | <b>✓</b> Compens                            | ation committee   |                            | Written employment contract  |                         |                |        |         |  |
|       |   | ent compensation consultant   | $\overline{\checkmark}$    | Compensation survey or study   |                         |                |        |         |  |
|       | <b>✓</b> Form 990                           | of other organizations  | $\checkmark$               | Approval by the board or compensa  | ition committee         |                |        |         |  |
| 4     | During the year related organiza            |   | 90, Part VII, Sed          | ction A, line 1a, with respect to the f  | iling organization or a |                |        |         |  |
| а     | Receive a sever                             | ance payment or change-of-contr   | ol payment?                |  |                         | 4a             |        | No      |  |
| b     | Participate in, o                           | r receive payment from, a supple  | mental nonquali            | ified retirement plan?   |                         | 4b             | Yes    |         |  |
| С     | •   | r receive payment from, an equit  |                            | -  |                         | 4c             |        | No      |  |
|       | If "Yes" to any o                           | or lines 4a-c, list the persons and                                       | provide the app            | licable amounts for each item in Par   | t 111                   |                |        |         |  |
|       | Only 501(c)(3                               | ), 501(c)(4), and 501(c)(29)  | organizations              | must complete lines 5-9.   |                         |                |        |         |  |
| 5     |   | ed on Form 990, Part VII, Section<br>ontingent on the revenues of         |                            | the organization pay or accrue any   |                         |                |        |         |  |
| а     | The organization                            | 1?  |                            |  |                         | 5a             |        | No      |  |
| b     | Any related orga                            |   |                            |  |                         | 5b             |        | No      |  |
| _     | -   | 5a or 5b, describe in Part III  |                            |  |                         |                |        |         |  |
| 6     |   | ed on Form 990, Part VII, Section ontingent on the net earnings of        | A, line 1a, did t          | the organization pay or accrue any   |                         |                |        |         |  |
| a     | The organization                            |   |                            |  |                         | 6a             |        | No      |  |
| Ь     | Any related orga                            | anization?<br>6a or 6b, describe in Part III                              |                            |  |                         | 6b             |        | No      |  |
| 7     | -   | ·   | A. line 1a. did t          | the organization provide any nonfixe   | d                       |                |        |         |  |
| -     |   | escribed in lines 5 and 6? If "Yes,                                       |                            |  | -                       | 7              | Yes    | <u></u> |  |
| 8     |   |   |                            | red pursuant to a contract that was<br>section 53 4958-4(a)(3)? If "Yes," d    | escribe                 |                |        | N! -    |  |
| 9     |   | 8, dıd the organızatıon also follow                                       | the rebuttable             | presumption procedure described in   | Regulations section     | 9              |        | No      |  |
| For F |   | ction Act Notice, see the Inst  | ructions for Fo            | orm 990 Cat No. 5  | 50053T Schedule J       |                | 990)   | 2018    |  |

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

| Part II Officers, Directors, Trustees, Rey Employees, and Ting   |                          |   |   |                     |                                 |                   |  |
|--|--------------------------|---|---|---------------------|---------------------------------|-------------------|--|
| For each individual whose compensation must be reported on Schedule J, report of instructions, on row (ii) Do not list any individuals that are not listed on Form 990 | 0, Part VII              |   |   |                     |                                 |                   |  |
| Note. The sum of columns (B)(I)-(III) for each listed individual must equal the tot  | <u>al amount of Fo</u> r | <u>rm 990, Part VII, Se</u>                               | ction A, line 1a, a                       | pplicable column (ر | <u>ン) and (E) amour</u>         | nts for that indi | vidual   |
| (A) Name and Title   | (B) Breal                | <b>(B)</b> Breakdown of W-2 and/or 1099-MISC compensation |   |                     | ( <b>D)</b> Nontaxable benefits | columns           | Compensation in  |
|  | (i) Base<br>compensation | (ii)<br>Bonus & incentive<br>compensation                 | (iii) Other<br>reportable<br>compensation | portable            |                                 | (B)(ı)-(D)        | column (B)<br>reported as<br>deferred on prior<br>Form 990 |
| See Additional Data Table  |                          |   |   |                     |                                 | •                 |  |
|  | 1                        | 1   | 1   |                     | 1                               | I                 | 1  |
|  |                          |   |   |                     |                                 |                   | !  |
|  |                          |   |   |                     |                                 |                   |  |
|  |                          |   |   |                     |                                 |                   |  |
|  |                          |   |   |                     |                                 |                   |  |
|  |                          |   |   |                     |                                 |                   |  |
|  |                          |   |   |                     |                                 |                   |  |
|  |                          |   |   | +                   |                                 |                   |  |
|  |                          |   |   |                     |                                 |                   |  |
|  |                          |   |   |                     |                                 |                   |  |
|  | +                        |   |   | +                   |                                 |                   |  |
|  |                          |   |   | +                   |                                 |                   |  |
| 1-   |                          | -   |   | +                   |                                 |                   |  |
| 1  |                          |   |   |                     |                                 |                   |  |
|  |                          |   |   |                     |                                 |                   |  |
|  |                          |   |   |                     |                                 |                   |  |
|  |                          |   | 1   |                     |                                 |                   |  |

| Schedule J (Form 990) 2016               | Page 3  |  |  |  |  |
|--|---|--|--|--|--|
| Part III Supplemental Information        |   |  |  |  |  |
| Provide the information, explanation, or | rovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information   |  |  |  |  |
| Return Reference                         | Explanation   |  |  |  |  |
| ·  | THE PERQUISITES PROVIDED TO THE CEO ARE LIMITED TO AN ANNUAL AUTOMOBILE ALLOWANCE AS WELL AS AN ANNUAL SPOUSAL AIR TRAVEL ALLOWANCE ADDITIONALLY, THE CEO MAY RECEIVE AN ANNUAL EXECUTIVE PHYSICAL PAID FOR BY CFC BECAUSE THE CEO IS FREQUENTLY REQUIRED TO TRAVEL TO MEMBER SITES IN RURAL PARTS OF THE COUNTRY, THE BOARD OF DIRECTORS HAS AUTHORIZED HIM TO OCCASIONALLY UTILIZE A PRIVATE PLANE SERVICE TO |  |  |  |  |

FACILITATE HIS EXTENSIVE BUSINESS TRAVEL THIS SERVICE HAS BEEN USED INFREQUENTLY AND IS SOLELY FOR BUSINESS PURPOSES

Calcadula 1 (Farms 000) 2010

| Return Reference | Explanation  |
|------------------|--|
|                  | TO PROVIDE THE ANNUAL AUTOMOBILE AND SPOUSAL AIR TRAVEL PERQUISITES IN AN EFFICIENT FASHION, THE BOARD AUTHORIZES AN ANNUAL ALLOWANCE RATHER THAN PROVIDING UNLIMITED REIMBURSEMENT OR USE OF A COMPANY-OWNED VEHICLE THE AMOUNT OF EACH ALLOWANCE IS AUTHORIZED ANNUALLY BY THE BOARD AND IS DETERMINED BASED ON THE ESTIMATED COST FOR OPERATION AND MAINTENANCE OF AN AUTOMOBILE AND THE ANTICIPATED COST OF AIR TRAVEL BY THE CEO'S SPOUSE THESE PAYMENTS WERE TREATED AS TAXABLE COMPENSATION CFC DOES NOT HAVE A FORMAL POLICY REGARDING THESE PAYMENTS OR REIMBURSEMENT OF THESE EXPENSES ALL OTHER APPROPRIATE BUSINESS EXPENSES INCURRED ARE SUBJECT TO AND REIMBURSED BY A FORMAL WRITTEN PLAN |

| Return Reference | Explanation   |
|------------------|---|
|                  | CFC OFFERS A PENSION RESTORATION PLAN OR AN EXECUTIVE BENEFIT RESTORATION PLAN WHICH ARE SUPPLEMENTS TO THE RETIREMENT SECURITY PLAN TO ELIGIBLE EXECUTIVE OFFICERS OF THE COMPANY BOTH 457(F) PLANS RESTORE THE VALUE OF THE RETIREMENT SECURITY PLAN FOR EACH OFFICER TO THE LEVEL IT WOULD BE IF THE IRS LIMITS ON ANNUAL PAY AND ANNUAL ANNUITY BENEFITS WERE NOT IN PLACE. THE BENEFIT AND PAYOUT FORMULA UNDER THESE RESTORATION COMPONENTS ARE SIMILAR TO THAT UNDER THE QUALIFIED PLAN COMPONENT. HOWEVER, THREE OF THE EXECUTIVE OFFICERS PARTICIPATING IN THE PENSION RESTORATION PLAN HAVE SATISFIED THE PROVISIONS ESTABLISHED TO RECEIVE THE BENEFIT FROM THESE PLANS. SINCE THESE OFFICERS NO LONGER HAVE A RISK OF FORFEITURE OF THE BENEFITS UNDER THE PENSION RESTORATION PLAN, DISTRIBUTIONS ARE MADE FROM THE PLAN TO EACH EXECUTIVE OFFICER ANNUALLY SHOULD THEY HAVE AN ACCRUED BENEFIT IN ADDITION, THE CEO IS ALSO ELIGIBLE FOR A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN WHICH MAY BE FUNDED AT THE DISCRETION OF THE BOARD OF DIRECTORS. FOR CALENDAR YEAR 2018 TWO OFFICERS HAD ACCRUED VESTED BENEFITS AND RECEIVED THE FOLLOWING DISTRIBUTIONS FROM THE PLANS DISCUSSED ABOVE. JOHN EVANS \$ 96,732 SHELDON PETERSEN \$392,824 |

| Return Reference | Explanation  |
|------------------|--|
| PART I, LINE 7   | WE PROVIDED ONE-TIME CASH PAYMENTS TO EACH OF THE EXECUTIVE OFFICERS, KEY EMPLOYEES AND HIGHLY COMPENSATED EMPLOYEES AS PART OF OUR      |
|                  | SHORT-TERM AND LONG-TERM INCENTIVE PROGRAMS CFC'S SHORT-TERM CASH INCENTIVE PROGRAM IS A ONE-YEAR CASH INCENTIVE THAT IS TIED TO THE     |
|                  | ANNUAL PERFORMANCE OF THE ORGANIZATION AS A WHOLE WE BELIEVE THAT BY PAYING A SHORT-TERM INCENTIVE TIED TO THE ACHIEVEMENT OF ANNUAL     |
|                  | OPERATING GOALS, ALL EMPLOYEES, INCLUDING EXECUTIVE OFFICERS, WILL FOCUS THEIR EFFORTS ON THE MOST IMPORTANT STRATEGIC OBJECTIVES WHICH  |
|                  | HELP US TO FULFILL OUR MISSION TO OUR MEMBERS AND OUR OBLIGATIONS TO THE FINANCIAL MARKETS THE SHORT-TERM INCENTIVE PROGRAM PROVIDES     |
|                  | ANNUAL CASH INCENTIVE OPPORTUNITIES BASED UPON THE LEVEL OF THE POSITION WITHIN OUR BASE PAY STRUCTURE, RANGING FROM 15 PERCENT TO 25    |
|                  | PERCENT OF BASE PAY EXECUTIVE OFFICERS ARE ELIGIBLE TO RECEIVE SHORT-TERM CASH INCENTIVE COMPENSATION UP TO 25 PERCENT OF THEIR BASE PAY |
|                  | KEY EMPLOYEES AND HIGHLY COMPENSATED EMPLOYEES ARE ELIGIBLE TO RECEIVE SHORT-TERM CASH INCENTIVE COMPENSATION UP TO 20 PERCENT OF        |
|                  | THEIR BASE PAY THE LONG-TERM INCENTIVE PROGRAM IS A THREE-YEAR PLAN THAT IS TIED TO CFC'S LONG-TERM STRATEGIC OBJECTIVES THE LONG-TERM   |
|                  | INCENTIVE PROGRAM WAS IMPLEMENTED TO CREATE DYNAMIC TENSION BETWEEN SHORT-TERM OBJECTIVES AND LONG-TERM GOALS EXECUTIVE OFFICERS,        |
|                  | KEY EMPLOYEES AND HIGHLY COMPENSATED EMPLOYEES ARE ELIGIBLE TO PARTICIPATE IN THE PLAN AND RECEIVE PERFORMANCE UNITS THAT ARE            |
|                  | CALCULATED AT 20% - 25% OF BASE PAY THE VALUE OF THE PERFORMANCE UNITS WILL RANGE FROM \$0 TO \$150 PER PERFORMANCE UNIT ACCORDING TO    |
|                  | THE LEVEL OF NATIONAL RURAL'S ISSUER CREDIT RATINGS BY THE RATING AGENCIES   |

#### Software ID:

**Software Version:** 

**EIN:** 52-0891669

Name: NATIONAL RURAL UTILITIES COOPERATIVE

FINANCE CORPORATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

| Form 990, Schedule                          | : J, | Part II - Officers, D                | irectors, Trustees, K                          | ey Employees, and I       | lighest Compensate                             | d Employees                       | T                                  |   |
|---|------|--------------------------------------|--|---------------------------|--|-----------------------------------|------------------------------------|---|
| (A) Name and Title                          |      | (B) Breakdown  (i) Base Compensation | of W-2 and/or 1099-MISO (ii) Bonus & Incentive | (iii)<br>Other reportable | (C) Retirement and other deferred compensation | <b>(D)</b> Nontaxable<br>benefits | (E) Total of columns<br>(B)(ı)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
| SHELDON C PETERSEN                          | (1)  | 1,048,366                            | compensation<br>364,270                        | compensation              | 27.697   | 20 610                            | 1 040 506                          | <u> </u>  |
| CEO   |      |                                      | 364,270  | 480,564                   | 27,687   | 28,619                            | 1,949,506                          |   |
| TOURIT EVANCUATE                            | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| JOHN T EVANS UNTIL<br>92018<br>EVP & COO    | (i)  | 488,412                              | 191,020  | 606,441                   | 15,000   | 16,998                            | 1,317,871                          | 464,860   |
| JONATHON ANDREW DON                         | (1)  | 409,285                              | 100 270  | 47 522                    | 175 300  | 72.001                            | 831,347                            | 0   |
| SVP AND CFO                                 | (II) | 0                                    | 166,270  | 47,523<br>                | 175,388<br>                                    | 32,881<br>                        | 831,347                            |   |
| GREGORY STARHEIM<br>SVP, BUS & IND DEV      | (1)  | 390,649                              | 158,520  | 52,631                    | 259,120  | 32,986                            | 893,906                            | 0   |
| SVF, BOS & IND BEV                          | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| ROBERTA B ARONSON<br>SVP & GEN COUNSEL      | (1)  | 350,885                              | 144,125  | 48,489                    | 206,796  | 7,927                             | 758,222                            | 0   |
|   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| JOEL ALLEN<br>SVP, MEMBER SERVICES          | (1)  | 315,650                              | 114,250  | 27,069                    | 189,401  | 32,346                            | 678,716                            | 0   |
| GROUP                                       | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| GRACEANN CLENDENEN<br>SVP & CAO             | (1)  | 268,908                              | 113,635  | 47,810                    | 260,205  | 27,481                            | 718,039                            | 0   |
| SVI W CAO                                   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| ROBIN REED<br>SVP, LOAN OPERATIONS          | (1)  | 258,526                              | 97,298   | 26,632                    | 136,458  | 16,679                            | 535,593                            | 0   |
|   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| STEVEN M KETTLER<br>SVP, STRATEGIC SERVICES | (1)  | 255,753                              | 111,800  | 47,435                    | 126,880  | 27,214                            | 569,082                            | 0   |
| l '   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| BRAD CAPTAIN<br>SVP, CORPORATE              | (=)  | 237,508                              | 93,800   | 37,629                    | 85,596   | 9,336                             | 463,869                            | 0   |
| RELATIONS                                   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| JOHN M BORAK<br>SVP, CREDIT RISK            | (1)  | 229,918                              | 99,762   | 56,013                    | 168,123  | 12,938                            | 566,754                            | 0   |
| MANAGEMEN                                   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| LAWRENCE SAUNDERS VP, PORTFOLIO             | (1)  | 249,300                              | 75,642   | 7,649                     | 67,176   | 21,998                            | 421,765                            | 0   |
| MANAGEMENT                                  | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| GHOLAM M SALEH<br>VP, FINANCIAL RISK        | (1)  | 238,907                              | 49,500   | 6,223                     | 34,779   | 22,747                            | 352,156                            | 0   |
| MANAGEM                                     | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| YU LING WANG<br>VP, CAPITAL MARKETS         | (1)  | 224,708                              | 71,472   | 12,504                    | 61,624   | 2,424                             | 372,732                            | 0   |
|   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| AMY S LUONGO<br>VP, PORTFOLIO               | (1)  | 214,272                              | 73,459   | 19,781                    | 56,140   | 15,120                            | 378,772                            | 0   |
| MANAGEMENT                                  | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| DANIEL W CAWOOD<br>VP, PORTFOLIO            | (1)  | 203,176                              | 64,954   | 9,824                     | 53,677   | 33,071                            | 364,702                            | 0   |
| MANAGEMENT                                  | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| DAVID W OLAH<br>VP, PORTFOLIO               | (1)  | 195,543                              | 55,370   | 5,261                     | 57,827   | 29,998                            | 343,999                            | 0   |
| MANAGEMENT                                  | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| ALLYN J AMATO<br>VP & DEP GEN COUNSEL       | (1)  | 266,738                              | 91,165   | 28,923                    | 93,582   | 28,460                            | 508,868                            | 0   |
|   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| RICHARD PERREAULT<br>VP AND CIO             | (1)  | 263,999                              | 86,240   | 26,037                    | 52,610   | 33,026                            | 461,912                            | 0   |
|   | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
| GARY A BRADBURY<br>VP, INTERNAL AUDIT AND   | (1)  | 241,203                              | 77,528   | 20,189                    | 66,877   | 31,375                            | 437,172                            | 0   |
| ERM<br>                                     | (11) | 0                                    | 0  | 0                         | 0  | 0                                 | 0                                  | 0   |
|   |      |                                      |  |                           |  |                                   |                                    |   |

(A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns other deferred benefits (i) Base Compensation (iii) compensation Bonus & incentive Other reportable compensation compensation ROBERT E GEIER JR 233,631

26,436

26.886

12,064

143,270

80.079

96.471

6,367

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

12,064

143,270

(B)(i)-(D)

426,701

447.557

12,064

153,309

9.535

31.916

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

77.020

73,463

3,672

218.821

VP AND CONTROLLER

JOHN FREDERICK SUTER

VP, CAPITAL MARKETS RESEARCH & ANALY DELBERT MARVIN

CRANFORD FORMER DIRECTOR JOHN LIST UNTIL 92015

FORMER SVP

| efile GRAPH   | IC print   | t - DO NOT PRO   | CESS  | As Filed Data -  |   | DLN:   | 93493277007099   |
|---|--|--|---|--|---|--|--|
| SCHEDUL<br>(Form 990 or<br>EZ)  | 990-   | Comple<br>Fo   | te to pro<br>rm 990 o   | vide information for<br>r 990-EZ or to prov<br>▶ Attach to Forn  | on to Form 990 or 9<br>r responses to specific questi<br>ide any additional informatio<br>n 990 or 990-EZ.<br>90 for the latest information.  | ons on<br>n.   | 2018 Open to Public Inspection   |
| <b>Name</b> l <b>ይዩ the ነዕት ge</b><br>NATIONAL RURAL U<br>FINANCE CORPORA | TILITIES (   |  |   |  |   | Employer identi<br>52-0891669  | ification number   |
| -   | O, Sup   | oplemental Info  | ormatio   | n  |   |  |  |
| Return<br>Reference   |  |  |   |  | Explanation   |  |  |
| FORM 990,<br>PART VI,<br>SECTION A,<br>LINE 6                             | AS OF I WERE & DISTRIC COMMITO ENGULTIMA CORPC WHICH WHICH MEMBE REGION MEMBE FURNIS WAS 1 CLASS ASSOC 80% OF FOR-PF CLASS CONSU | MAY 31, 2019, THE B42 CLASS A MEM CTS, AND OTHER TMENT FOR A LO BAGE IN THE FUR TRATIONS WHICH ARE OWNED ANI ARE ENGAGED C TAS OR OTHER CI VAL ASSOCIATION TO BOTH, OF THE STATES OF THE | ERE WER IBERS - ( PUBLIC I AN FROM NISHING CLASS I ARE FEE OR PLANM ASS B M NS WHICH CES BUT R CLASS C /E, AT TH RGANIZE ERS AND ES ARE | E 1,020 MEMBERS A COOPERATIVE OR N BODIES, WHICH HAY M THE RUS OR ANY OF UTILITY SERVICE BERATIONS OF CLASS A OLLED BY CLASS A NING TO ENGAGE IN MEMBERS CLASS C H ARE WHOLLY-OWN WHICH SUPPLY OT BED ON MEMBERS IN ORD MEMBERS IN ORD MEMBERS IN AD MEMBERS I | E CORPORATION IS A NON-ST<br>AND ASSOCIATES MEMBERSI<br>IONPROFIT CORPORATIONS,<br>I/E RECEIVED OR ARE ELIGIBI<br>SUCCESSOR AGENCY, AND V<br>IES TO THEIR MEMBERS AND<br>CLASS B MEMBERS - COOPER<br>SS A MEMBERS OR OF OTHER<br>MEMBERS OR BY OTHER CLA<br>I THE FURNISHING OF UTILITY<br>THERE WERE 64 CLASS C MI<br>NED OR CONTROLLED BY CL<br>ED SUBSIDIARIES OF A CFC MI<br>HER FORMS OF SERVICE TO<br>IATIONAL ASSOCIATIONS OF<br>ER TO BE ELIGIBLE FOR MEM<br>ION TO CFC, MEMBER COOPE<br>DITION TO MEMBERS, ASSOCIATION T | HIP INCLUDED OF PUBLIC CORPORE TO RECEIVE AND HICH ARE ENGAY PATRONS FOR TOWN TOWN TOWN TOWN TOWN TOWN TOWN TOWN | CLASS A THERE RATIONS, UTILITY A LOAN OR AGED OR PLANNING THEIR USE AS PROFIT BERS, OR BOTH, OR , OR BOTH, AND MARILY TO CLASS A WIDE AND G OR CLASS B HICH DO NOT S CLASS D THERE COMPRISED OF C, A NATIONAL CILED IN AT LEAST ING 46) ARE NOT- O OR OPERATED BY E BENEFIT OF |

| Return<br>Reference                            | Explanation  |
|--|--|
| FORM 990,<br>PART VI,<br>SECTION A,<br>LINE 7A | CFC'S MEMBERS ARE DIVIDED INTO ELEVEN DISTRICTS EACH DISTRICT APPOINTS TWO DIRECTORS THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ("NRECA"), AS THE SOLE CLASS D MEMBER, APPOINTS TWO DIRECTORS FOR DISTRICT 11 FOR DISTRICTS 1 THROUGH 10, THE TWO DIRECTORS MUST INCLUDE ONE DIRECTOR, WHO IS A TRUSTEE OR DIRECTOR OF A MEMBER ORGANIZED WITHIN THE DISTRICT, AND ONE, WHO IS A MANAGER OF A MEMBER ORGANIZATION WITHIN THE DISTRICT, PROVIDED THAT, EXCEPT FOR DISTRICT 11, AND IN THE CASE WHERE ONLY ONE STATE IS LOCATED IN A DISTRICT, NO TWO DIRECTORS CAN REPRESENT MEMBERS WITH THEIR HEADQUARTERS IN THE SAME STATE ALL CFC DIRECTORS OTHER THAN THE TWO DIRECTORS DESIGNATED BY NRECA ARE ELECTED FOR A THREE YEAR TERM AND CAN SERVE A MAXIMUM OF TWO CONSECUTIVE TERMS UPON EXPIRATION OF THE TERM OF A DIRECTOR, MEMBERS FROM THAT DISTRICT ELECT A DIRECTOR THAT MEETS THE QUALIFICATIONS OUTLINED ABOVE TO REPRESENT THEM ON CFC'S BOARD IF THE BOARD OF DIRECTORS IN ITS DISCRETION SO DETERMINES, THEN THERE MAY BE ONE ADDITIONAL DIRECTOR ELECTED BY THE MEMBERS TO SERVE ON THE BOARD OF DIRECTORS FROM TIME TO TIME WHO MEETS THE QUALIFICATIONS AS MAY BE REQUIRED BY THE SECURITIES AND EXCHANGE COMMISSION, A GOVERNMENTAL AGENCY OR AUTHORITY, OR A NATIONAL STOCK EXCHANGE TO SERVE AS AN AUDIT COMMITTEE FINANCIAL EXPERT |

Return Explanation
Reference

FORM 990, PURSUANT TO THE BUSINESS ORGANIZATIONS CODE OF THE DISTRICT OF COLUMBIA, CFC MEMBERS MUST APPROVE THE SALE OR DISPOSITION OF MORE THAN 75% OF THE COMPANY'S ASSETS, MERGERS FOR WHICH THE SECTION A, COMPANY WILL NOT BE THE SURVIVING ENTITY, AND THE DISSOLUTION OF THE COMPANY

Return Explanation

SCHEDULED BOARD MEETING

Reference

FORM 990,
PART VI,
SECTION B,
LINE 11B

THE BOARD OF DIRECTORS OF CFC REVIEWED THE 2018 FORM 990 FOR FISCAL YEAR ENDED MAY 31, 2019 AT A
REGULARLY SCHEDULED BOARD MEETING PRIOR TO FILING THE FORM 990 WITH THE INTERNAL REVENUE SERVICE
A DRAFT OF THE FORM 990 WAS PREPARED BY CFC STAFF, REVIEWED BY INTERNAL COUNSEL AND SENIOR
MANAGEMENT, REVIEWED BY EXTERNAL TAX ADVISORS, KPMG LLP, AND PRESENTED TO THE BOARD FOR REVIEW
A DETAIL ED PRESENTATION ABOUT THE FORM 990 WAS MADE BY CFC STAFF TO THE BOARD AT A REGULARLY

| 990 | Schedule | ο, | Supplemental | Information |
|-----|----------|----|--------------|-------------|
|     |          |    |              |             |

(

| Return<br>Reference                             | Explanation   |
|---|---|
| FORM 990,<br>PART VI,<br>SECTION B,<br>LINE 12C | CONFLICTS OF INTERESTS ARE ADDRESSED BY CFC THROUGH ITS RELATED PERSON TRANSACTIONS AND RE LATED CREDITS POLICY (THE "POLICY") CFC ESTABLISHED THE POLICY IN MAY 2007, AS AMENDED FR OM TIME TO TIME, TO FACILITATE DISCLOSURE WITH RESPECT TO TRANSACTIONS IN WHICH ITS EXECUT IVE OFFICERS, DIRECTORS AND KEY EMPLOYEES AND THEIR IMMEDIATE FAMILY MEMBERS ("RELATED PER SON") HAVE A SUBSTANTIAL INTEREST A RELATED PERSONS TRANSACTION IS DEFINED AS ANY TRANSACTION IN WHICH (I) CFC WAS, IS, OR PROPOSES TO BE A PARTICIPANT, (II) THE AMOUNT INVOLVED E XCEEDS \$120,000 AND (III) A RELATED PERSON HAD, HAS, OR WILL HAVE A DIRECT OR INDIRECT MAT ERIAL INTEREST IN THE TRANSACTION IN QUESTION THE POLICY APPLIES TO ALL EXECUTIVE OFFICER S, DIRECTORS AND KEY EMPLOYEES OF CFC ("COVERED PARTIES") AND REQUIRES SIMILAR DISCLOSURE TO THAT REQUIRED BY ITEM 404 OF REGULATION S-K OF THE SECURITIES ACT OF 1933, AS AMENDED ON A QUARTERLY BASIS, EACH DIRECTOR IS REQUIRED TO REVIEW THE POLICY AND COMPLETE A RELATE D PERSON DISCLOSURE IF HE OR SHE OR AN IMMEDIATE FAMILY MEMBER IS INVOLVED IN A TRANSACTION WITH CFC OUTSIDE OF REGULARLY SCHEDULED BOARD MEETINGS, DIRECTORS ARE REQUIRED TO COMPLETE RELATED PERSON DISCLOSURE NOTICES WHENEVER THEY BECOME AWARE OF A POTENTIAL CONFLICT OF INTEREST THE RELATED PERSON DISCLOSURE NOTICE REQUIRES A DESCRIPTION OF THE PARTIES INV OLVED IN THE TRANSACTION, AND ANY OTHER MATERIAL FACTS AND CIRCUMSTANCES WE HAVE THEY RESPECT TO THE TIMING AND STAT US OF THE TRANSACTION UPON RECEIPT OF A RELATED PERSON DISCLOSURE NOTICE REQUIRED ADDRESS OF THE TRANSACTION. AND ANY OTHER MATERIAL FACTS AND CIRCUMSTANCES AS WELL AS AN UPDATE WITH RESPECT TO THE TIMING AND STAT US OF THE TRANSACTION UPON RECEIPT OF A RELATED PERSON DISCLOSURE NOTICE, CFC'S GENERAL COUNSEL IS RESPONSIBLE FOR THE REVIEW, APPROVAL AND RATIFICATION OF THE TRANSACTION UPON RECEIPT OF A RELATED PERSON TRANSACTIONS INVOLVING A SUBS TANTIAL INTEREST OF CFC'S GENERAL COUNSEL ARE REQUIRED TO BE REFERRED TO THE BOARD FOR REVIEW, APPROVAL AND RATIFICATION IN REV |

| Return<br>Reference                             | Explanation  |
|---|--|
| FORM 990,<br>PART VI,<br>SECTION B,<br>LINE 12C | POSITION AS A DIRECTOR OF ANOTHER ENTITY THAT IS A PARTY TO THE TRANSACTION, AND TRANSACTI ONS DEEMED TO BE RELATED CREDITS A RELATED CREDIT IS DEFINED AS THE EXTENSION OF CREDIT TO OR FOR THE BENEFIT OF COVERED EMPLOYEES OR RELATED ENTITIES THAT ARE MADE ON SUBSTANTIAL LY THE SAME TERMS AND FOLLOW THE UNDERWRITING PROCEDURES THAT ARE NO LESS STRINGENT THAN T HOSE PREVAILING AT THE TIME FOR COMPARABLE TRANSACTIONS GENERALLY OFFERED BY CFC. THE POLI CY PROHIBITS CFC FROM EXTENDING CREDIT IN THE FORM OF A PERSONAL LOAN TO A COVERED EMPLOYE E RELATED ENTITIES INCLUDE CFC'S MEMBER COOPERATIVES AS WELL AS ANY ENTITY FOR WHICH A RE LATED PERSON (I) SERVES AS AN OFFICER, DIRECTOR, TRUSTEE, ALTERNATIVE DIRECTOR OR TRUSTEE OR EMPLOYEE (INCLUDING PART TIME EMPLOYEE), (II) CONTROLS THE ENTITY, OR (III) HAS A SUBST ANTIAL BENEFICIAL INTEREST IN THE ENTITY THE BOARD HAS DELEGATED TO THE CEO, WITH AUTHORI TY TO REDELEGATE TO SUCH OFFICER OF CFC AS THE CEO DEEMS APPROPRIATE, THE AUTHORITY TO APP ROVE ALL RELATED CREDITS IN AN AMOUNT EQUAL TO OR LESS THAN \$250,000 AND EMERGENCY AND CER TAIN OTHER LINES OF CREDIT RELATED CREDITS IN EXCESS OF \$250,000 MUST BE APPROVED BY THE BOARD ALL RELATED PERSONS ARE REQUIRED TO ABSTAIN FROM PARTICIPATING, DIRECTLY OR INDIRECTLY, IN THE CREDIT APPROVAL PROCESS INVOLVING A RELATED CREDIT ADDITIONALLY, ALL RELATED PERSONS ARE REQUIRED TO LEAVE THE BOARD MEETING OR DISCONNECT FROM THE CONFERENCE CALL WHILE THE RELATED CREDIT IS BEING CONSIDERED AND DISCUSSED AND RELATED PERSONS ARE NOT PROVIDED WITH ANY WRITTEN MATERIALS PERTAINING TO SUCH RELATED CREDIT ADDITIONALLY, CURRENT EXE CUTIVE OFFICERS AND DIRECTORS, FORMER EXECUTIVE OFFICERS AND DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO ANSWER QUESTIONS IN AN ANNUAL DIRECTOR AND OFFICER SURVEY IN ORDER TO IDEN TIFY ANY RELATIONSHIPS OR TRANSACTIONS THAT MUST BE REPORTED ON CFC'S FORM 990, INCLUDING BUSINESS TRANSACTIONS BETWEEN CFC AND AN INTERESTED PERSON INVOLVING MORE THAN \$10,000 |

| Return<br>Reference                             | Explanation  |
|---|--|
| FORM 990,<br>PART VI,<br>SECTION B,<br>LINE 15A | CFC'S COMPENSATION COMMITTEE (THE "COMMITTEE"), WHICH IS COMPRISED OF CFC EXECUTIVE COMMIT TEE BOARD MEMBERS, DETERMINES AND APPROVES THE COMPENSATION OF CFC'S CEO THE COMMITTEE AN NUALLY REVIEWS AND APPROVES APPROPRIATE CORPORATE GOALS AND OBJECTIVES RELATED TO THE CEO'S COMPENSATION AND EVALUATES PERFORMANCE IN LIGHT OF THOSE GOALS AND OBJECTIVES THE CEO'S COMPENSATION AND EVALUATES PERFORMANCE IN LIGHT OF THOSE GOALS AND OBJECTIVES THE CEO'S COMPENSATION AND EVALUATES PERFORMANCE IN LIGHT OF THOSE GOALS AND OBJECTIVES THE CEO'S COMPENSATION AND EVALUATES PERFORMANCE IN LIGHT OF THOSE GOALS AND OBJECTIVES THE CEO'S COMPENSATION AND PER QUISITES IN FISCAL YEAR 2019, AN INDEPENDENT CONSULTANT AND LONG TERM INCENTIVE COMPENSATION DAY THE COMPANIES THE COMPANIES IN THE COMPANIES THE COMMITTEE TO C ONDUCT A COMPENSATION SURVEY AND PROVIDE COMPENSATION DATA FOR THE CEO POSITION USING PEER ORGANIZATIONS IDENTIFIED BY THE INDEPENDENT CONSULTANT THROUGH DISCUSSIONS WITH THE COMMITTEE THE INDEPENDENT CONSULTANT THROUGH DISCUSSIONS WITH THE COMMITTEE THE INDEPENDENT CONSULTANT INCLUDED COMPANIES IN THE COMPENSATION COMPARISON GROUP THAT WERE SIMILAR TO CFC IN ASSET SIZE, INDUSTRY AND BUSINESS DESCRIPTION THE GROUP INCLUDE DE FINANCIAL INSTITUTIONS THAT ARE PRIVATE MARKET, COMMERCIAL AND/OR MISSION-DRIVEN LENDERS, OFFERING FULL SERVICE FINANCING, INVESTMENT AND RELATED SERVICES THE COMPANIES TARGETE D AS PEER COMPANIES INCLUDED TWO MEMBERS OF THE FARM CREDIT SYSTEM AND 13 REGIONAL BANKS O R FINANCIAL SERVICES COMPANIES THE SEC COMPANIES WERE CHOSEN BECAUSE THEIR BUSINESSES ARE SIMILAR TO CFC'S ALTHOUGH CFC IS NOT FOCUSED ON PROFITS LIKE THE INSTITUTIONS IN THE PEER GROUP. THE COMMITTEE BELIEVES THAT THESE COMPANIES MED THE ADDACT THE INDEPENDENT CONSULTANT LED THE COMMITTEE BELIEVES THAT THESE COMPANIES REPLOYE SKECUTIVES THAT HAVE SKILLS AND EXPERTISE CONSISTENT WITH WHAT CFC WOULD SEEK IF IT HAD TO REPLACE THE CEO THE INDEPENDENT CONSULTANT'S DATA INCLUDED BOTH ACTUAL COMPENSATION AND TARGET COMMITTEE THROUGH AN ASSESS |

| Return<br>Reference                             | Explanation   |
|---|---|
| FORM 990,<br>PART VI,<br>SECTION B,<br>LINE 15A | TURE, RANGING FROM 15% - 25% OF BASE PAY THE CEO IS ELIGIBLE FOR AN ANNUAL INCENTIVE OPPO RTUNITY AT 25% OF HIS BASE PAY THE LONG-TERM INCENTIVE PROGRAM IS A THREE-YEAR PLAN THAT IS TIED TO CFC'S LONG-TERM STRATEGIC OBJECTIVES THE MEASURE FOR ALL ACTIVE LONG-TERM INCE NTIVE PLANS IS THE ACHIEVEMENT OF BOND RATING TARGETS FOR CFC'S ISSUER CREDIT RATING BY RA TING AGENCIES S & P GLOBAL, FITCH RATINGS INC., AND MOODY'S INVESTORS SERVICE ELIGIBLE P ARTICIPANTS IN THE PLAN CYCLE WILL RECEIVE PERFORMANCE UNITS THAT ARE CALCULATED AT 15% - 25% OF BASE PAY, DIVIDED BY THE TARGET OBJECTIVE THE CEO'S PERFORMANCE UNITS ARE CALCULATED AT 25% OF HIS BASE PAY DIVIDED BY THE TARGET OBJECTIVE THE COMMITTEE ALSO CONSIDERS PE RQUISITES FOR THE CEO IN CONNECTION WITH ITS ANNUAL REVIEW OF THE CEO'S TOTAL COMPENSATION PACKAGE DESCRIBED ABOVE THE PERQUISITES PROVIDED TO CFC'S CEO ARE LIMITED TO AN ANNUAL A UTOMOBILE ALLOWANCE AS WELL AS AN ANNUAL SPOUSAL AIR TRAVEL ALLOWANCE TO PROVIDE THESE PE RQUISITES IN AN EFFICIENT FASHION, THE BOARD AUTHORIZES AN ANNUAL ALLOWANCE RATHER THAN PROVIDING UNLIMITED REIMBURSEMENT OR USE OF A COMPANY-OWNED VEHICLE THE AMOUNT OF EACH ALLO WANCE IS AUTHORIZED ANNUALLY BY THE BOARD AND IS DETERMINED BASED ON THE ESTIMATED COST FO R OPERATION AND MAINTENANCE OF AN AUTOMOBILE AND THE ANTICIPATED COST OF AIR TRAVEL BY THE CEO'S SPOUSE ADDITIONALLY, CFC'S CEO MAY RECEIVE AN ANNUAL EXECUTIVE PHYSICAL PAID FOR BY CFC THE COMMITTEE DELEGATES THE POWER TO REVIEW AND APPROVE ALL EMPLOYEE COMPENSATION TO THE CEO, WHO EXERCISES HIS JUDGMENT TO SET THE ANNUAL BASE PAY FOR THE OTHER EXECUTIVE OFFICERS AND KEY EMPLOYEES, AS WELL AS EACH EMPLOYEE BASED ON GENERAL MARKET DATA, OVERALL PERFORMANCE AND LEADERSHIP ACCOMPLISHMENTS IN DETERMINING THE BASE COMPENSATION PRACTICES AND FOR SIMILAR ASSET SIZE TO OBTAIN A GENERAL UNDERSTANDING OF CURRENT COMPENSATION PRACTICES AND FINE MEANING GENERAL UNDERSTANDING OF CURRENT COMPENSATION PRACTICES AND TO ENSURE THAT THE BASE PAY FOR SIMILAR POSITIONS. THE CEO DID NOT REVIEW OR |

Return

| CFC'S ARTICLES OF INCORPORATION AND BYLAWS, AS AMENDED, AND ANNUAL AND PERIODIC FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC THROUGH THE SECURITIES AND EXCHANGE COMMISSION'S "SEC'S"               |
|---|
| WEBSITE AND ON CFC'S WEBSITE AT WWW NRUCFC COOP CFC'S CONFLICT OF INTEREST POLICY, TITLED THE   |
| RELATED PERSONS TRANSACTIONS AND RELATED CREDITS POLICY, IS AVAILABLE ON CFC'S WEBSITE AT WWW NRUCFC COOP CFC'S ARTICLES OF INCORPORATION ARE FILED AS EXHIBIT 3 1 TO ANNUAL REPORT ON                  |
| FORM 10-K FOR THE FISCAL YEAR ENDED MAY 31, 2014 (FILED AUGUST 28, 2014) CFC'S BYLAWS ARE FILED AS EXHIBIT 3 2 TO THE FORM 10-Q FOR THE QUARTER ENDED FEBRUARY 28, 2011 (FILED ON APRIL 13, 2011) CFC'S |
| ANNUAL AND PERIODIC FINANCIAL STATEMENTS ARE PERIODICALLY FILED WITH THE SEC ON FORM 10-K AND FORM 10-Q   |
|   |

Explanation

Paturn

| Reference | Explanation   |
|-----------|---|
| FORM 990, | AS A LENDER, CFC, FROM TIME TO TIME, MAY HAVE TO FORECLOSE ON THE ASSETS OF A BORROWER AS PART OF |
| PART VI,  | SUCH ACTIONS, THE COMPANY MAY RECEIVE INTERESTS IN JOINT VENTURES WITH TAXABLE ENTITIES CFC TAKES |
| QUESTION  | SUCH INTERESTS ONLY IN ORDER TO MAXIMIZE ITS RECOVERY ON THE LOAN RECEIVABLE CFC DOES NOT ENTER   |
| 16B       | INTO JOINT VENTURES WITH TAXABLE ENTITIES AS PART OF ITS CORE LENDING BUSINESS TO DATE, THE       |
|           | COMPANY'S INVESTMENT IN THESE JOINT VENTURES HAS BEEN NOMINAL CFC HAS DEVELOPED A WRITTEN POLICY  |
|           | THAT REQUIRES THE COMPANY TO EVALUATE ITS PARTICIPATION IN JOINT VENTURE ARRANGEMENTS AND TAKE    |
|           | STEPS TO SAFEGUARD THE COMPANY'S 501(C)(4) TAX EXEMPT STATUS                                      |

Evolanation

990 Schedule O, Supplemental Information

Return

| Reference | ·  |
|-----------|--|
| FORM 990, | NET PATRONAGE CAPITAL RETIREMENT -47,505,824 DERIVATIVE FORWARD VALUE LOSS -318,134,424 NET CHANGE |
| PART XI,  | IN OTHER OCI COMPONENTS 102,574 NET REDUCTION IN MEMBERSHIP FEES 0 NET CHANGE IN INTEGRITY FUND    |
| LINE 9    | I -428.034   |

Explanation

| Return<br>Reference               | Explanation   |
|-----------------------------------|---|
| FORM 990,<br>PART XII,<br>LINE 2C | WHILE THERE IS NO SEPARATE AUDIT PERFORMED OF THE CFC FINANCIAL STATEMENTS, THE CFC FINANCIAL STATEMENTS ARE CONSOLIDATED WITH THE STATEMENTS OF NATIONAL COOPERATIVE SERVICES CORPORATION AND RURAL TELEPHONE FINANCE COOPERATIVE THE CONSOLIDATED FINANCIAL STATEMENTS ARE AUDITED CFC'S AUDIT COMMITTEE IS SOLELY RESPONSIBLE FOR THE NOMINATION, APPROVAL, COMPENSATION, EVALUATION AND DISCHARGE OF THE INDEPENDENT REGISTERED PUBLIC ACCOUNTANTS THE INDEPENDENT REGISTERED PUBLIC ACCOUNTANTS REPORT DIRECTLY TO THE AUDIT COMMITTEE AND THE AUDIT COMMITTEE IS RESPONSIBLE FOR THE RESOLUTION OF DISAGREEMENTS BETWEEN MANAGEMENT AND THE INDEPENDENT REGISTERED PUBLIC ACCOUNTANTS CONSISTENT WITH SEC REQUIREMENTS, THE AUDIT COMMITTEE HAS ADOPTED A POLICY TO PRE-APPROVE ALL AUDIT AND PERMISSIBLE NON-AUDIT SERVICES PROVIDED BY THE INDEPENDENT REGISTERED PUBLIC ACCOUNTANTS THE POLICY PROVIDES THAT PRE-APPROVAL IS NOT REQUIRED FOR TAX COMPLIANCE AND TAX PLANNING AND ADVICE ENGAGEMENTS FOR CFC AND ITS AFFILIATES PROVIDED THE FEES OF EACH SUCH ENGAGEMENT ARE NOT MORE THAN TIVE PERCENT OF TOTAL REVENUES PAID TO THE INDEPENDENT PUBLIC ACCOUNTANTS AND DO NOT IMPAIR THEIR INDEPENDENCE THE COMMITTEE MEETS WITH OUR INDEPENDENT REGISTERED PUBLIC ACCOUNTING FIRM, INTERNAL AUDITORS, CHIEF EXECUTIVE OFFICER AND FINANCIAL MANAGEMENT EXECUTIVES TO REVIEW THE SCOPE AND RESULTS OF AUDITS AND RECOMMENDATIONS MADE BY THOSE PERSONS WITH RESPECT TO INTERNAL AND EXTERNAL ACCOUNTING CONTROLS AND SPECIFIC ACCOUNTING AND FINANCIAL REPORTING ISSUES AND TO ASSESS CORPORATE RISK THE BOARD HAS ADOPTED A WRITTEN CHARTER FOR THE AUDIT COMMITTEE WHICH MAY BE FOUND ON OUR WEBSITE, WWW NRUCFC COOP THE PROCESS HAS NOT CHANGED FROM THE PRIOR PERIOD |