EXTENDED TO NOVEMBER 15, 2019

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. and ending A For the 2018 calendar year, or tax year beginning

B	Check if	C Name of organization		D Employer identifi	cation number			
	Addre	S GUOGRAM ELEGERICO GOODEDAMINE INC						
H	chang Name			73_0	182325			
H	chang ∏Initial		Doom/euito					
H	return □Final	Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 758	Room/suite	580-326-6486				
	⊸return/ termin			G Gross receipts \$	47,124,873.			
	ated Amend	City or town, state or province, country, and ZIP or foreign postal code HUGO, OK 74743		-				
F	return Applic			H(a) Is this a group re for subordinates				
_	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	0.525(1) 0			
i	Tay.ey	empt status:	or 52	-	list. (see instructions)			
.1. \	Wehsit	e: WWW.CHOCTAWELECTRIC.COOP	<u>., </u>	H(c) Group exemptio	1967			
		organization; X Corporation Trust Association Other	L Year		A State of legal domicile: OK			
	art I	Summary	"					
4	1	Briefly describe the organization's mission or most significant activities: PROV	IDE RI	ELIABLE, SAF	E AND			
Activities & Governance		AFFORDABLE ENERGY SERVICES TO THE MEMBER	S WE	SERVE.				
r	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispo	sed of mor	re than 25% of its net as	ssets.			
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	9			
ر م	4	Number of independent voting members of the governing body (Part VI, line 1b)			9			
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	***********		71			
Vit		Total number of volunteers (estimate if necessary)			0			
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.			
_	b	Net unrelated business taxable income from Form 990-T, line 38			0.			
			_	Prior Year	Current Year			
ne	4	Contributions and grants (Part VIII, line 1h)			46,594,300.			
Revenue		Program service revenue (Part VIII, line 2g)	ACCURATION AND A	44,085,344. 266,011.	447,362.			
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	ACTIVITY OF THE PARTY OF THE PA	114,573.	10,551.			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		44,465,928.	47,052,213.			
	_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,573.	8,425.			
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,816,206.	4,812,871.			
		Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,541,601.	5,630,431.			
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	100000000000000000000000000000000000000	0.	0.			
Den		Total fundraising expenses (Part IX, column (D), line 25)	0. H		84.0			
$\overline{\mathbf{X}}$		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		35,097,548.	36,600,486.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	200000000000000000000000000000000000000	44,465,928.	47,052,213.			
		Revenue less expenses. Subtract line 18 from line 12		0.	0.			
let Assets or and Balances		2000 2000 2000 2000 2000 2000 2000 200	В	eginning of Current Year	End of Year			
sets	20	Total assets (Part X, line 16)		119,170,152.	120,195,987.			
ASS DBS	21	Total liabilities (Part X, line 26)		63,074,693.	60,303,113.			
2E	22	Net assets or fund balances. Subtract line 21 from line 20	*********	56,095,459.	59,892,874.			
	art II	Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	hich prepare	54500 Telegrap 14	5.40m			
		Signature of officer		10-30-	77			
Sig				Duto				
Hei	re	KOONEY DUNCAN, CEO Type or print name and title						
_		(E) 53		Date Check	X PTIN			
Pai	d	Print/Type preparer's name WILLIAM M. MILLER WILLIAM M. MILLE WILLIAM M. MILL	ER	if	D00439459			
	u parer	Firm's name BOLINGER, SEGARS, GILBERT AND M		LP Firm's EIN ▶	75-0882037			
	Only	Firm's address 8215 NASHVILLE AVENUE	M	THUISCHY				
J00	, Only	LUBBOCK, TX 79423		Phone no. (8	06)747-3806			
Ma	v the II	RS discuss this return with the preparer shown above? (see instructions)		T. Hono nor (C	X Yes No			
near	y ule li	A discuss this return with the preparer shown above: (see instructions)	ODS		Form 990 (2018)			

rC	(Code:) (Expenses a	including grants) (nevelide #	!
	-					
						
	-					
	-					
	-					
	<u> </u>					
ŀd	Other program	services (Describe in Sch	nedule O.)			
	(Expenses \$		including grants of \$) (Revenue \$)
ŀе	Total program	service expenses 🕨				

	· ·		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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4	N/	Δ.
	during the tax year? If "Yes," complete Schedule C, Part II	4	14/	_
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		x
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		_	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X_
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		x
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		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
а	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	X	
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		x
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44-	х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	- 11	
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		3,7	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	-
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Α.
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
45	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			12
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-7		x
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		- 21
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
19	complete Schedule G, Part III	19		X
20a	The state of the s	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	х	
	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		
24a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
	Schedule K. If "No," go to line 25a	24a		X
	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			es .
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	N/	A_
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	N/	A
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		x
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		X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		x
35.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		l
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	N/	Α
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
-0	Note. All Form 990 filers are required to complete Schedule O	38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			70-14
	Check if Schedule O contains a response or note to any line in this Part V		· · · · · · · · · · · · · · · · · · ·	Ш
			Yes	No
	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	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		1

Page 5

Part V

Statements Regarding Other IRS Filings and Tax Compliance (continued)

Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 71 filed for the calendar year ending with or within the year covered by this return 2a X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). X 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? N/AOrganizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f N/Ag If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?... **7**g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? N/A 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 the year? N/A 8 Sponsoring organizations maintaining donor advised funds. 9 N/A 9a a Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A 9b Section 501(c)(7) organizations. Enter: 10 a Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ______ Section 501(c)(12) organizations. Enter: 45,936,347. 11a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the 13b organization is licensed to issue qualified health plans c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X 15 excess parachute payment(s) during the year? If "Yes." see instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.

Form 990 (2018) CHOCTAW ELECTRIC COOPERATIVE, INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response or changes in Schedule O. See instructions.

J. 53.0	to line 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			X
Sec	tion 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	1		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	1		
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			37
	of officers, directors, or trustees, or key employees to a management company or other person?	3	37	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	Х	
6	Did the organization have members or stockholders?	6		-
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	х	
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	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
		_	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	l		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	-
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	x	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	21	
С		100	х	
	in Schedule O how this was done		X	-
13	Did the organization have a written whistleblower policy?		X	
14	Did the organization have a written document retention and destruction policy?	17		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	х	
a	The organization's CEO, Executive Director, or top management official		X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	.00		
40-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
Iba		16a		Х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	etion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OK			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd finar	ncial	
. •	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	TIFFANY HEMPSTED, CFO - 580-326-6486			
	P.O. BOX 758, HUGO, OK 74743			

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

Check if Schedule O contains a response or note to any line in this Part VII

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization										(E)
(A)	(B)			Posi	زز ition	tion		(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one box, unless person is both an officer and a director/trustee)			more than one		Reportable	Reportable	Estimated
	hours per	box				is bot or/trus	h an tee)	compensation from	compensation from related	amount of other
	week (list any	10.						the	organizations	compensation
	hours for	direc				-		organization	(W-2/1099-MISC)	from the
	related	9e OF	stee			nsate		(W-2/1099-MISC)		organization
	organizations	Individual trustee or director	nstitutional trustee		Key employee	aduic		,		and related
	below	idual	tution	- E)d III	est co	ja ja			organizations
	line)	혈	Insti	Officer	Key	Highest compensated employee	Former			
(1) DOUGLAS FRANKS	7.50							6 010	0	0
PRESIDENT		Х		X		_	_	6,918.	0.	0.
(2) JOE M SILK	6.10									_
VICE PRESIDENT		X		X	_	╙		6,812.	0.	0.
(3) MIKE BREWER	6.50							4	_	
SECRETARY/TREASURER		x		X				6,400.	0.	0.
(4) BECKY FRANKS	3.40							0.000	0	0
TRUSTEE (JAN-SEP)		X				_	_	2,800.	0.	0.
(5) WILLIAM WOOLSEY	4.80	ا						6 000		
TRUSTEE		X	_	Ш		_	_	6,200.	0.	0.
(6) NORMAN RANGER	7.90							- 400	_	_
TRUSTEE (JAN-SEP)		X					_	5,100.	0.	0.
(7) GEORGE BURNS	3.20								0	_
TRUSTEE		X	_			_	L	0.	0.	0.
(8) STACY NICHOLS	3.50							6 000	0	
TRUSTEE		X	_	_		_	┡	6,200.	0.	0.
(9) KENNETH AUTRY	8.00	١						6 500		
TRUSTEE		X	_	_	_	_	_	6,500.	0.	0.
(10) DEBORAH CODY	1.90							1 (50		_
TRUSTEE		X	\perp		_	-	L	1,650.	0.	0.
(11) PERRY THOMPSON JR	3.20							1 650	0	_
TRUSTEE		X	_	-	_	╀	_	1,650.	0.	0.
(12) KOONEY DUNCAN	50.00			l				106 000		04 262
CEO/GM		_	_	X	_	<u> </u>	_	186,298.	0.	84,262.
(13) TIFFANY HEMPSTED	52.00	4		١			1	00 000		27 012
CFO		_	_	X		<u> </u>	_	99,238.	0.	27,813.
		-								
		-	-	-	-	<u> </u>	⊢			
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	-	-								
	_1	_	_		_	_	_			Farm 990 (0010)

(A) Name and title	(B) Average hours per week (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						h an	(D) Reportable compensation from	(E) Reportable compensation from related		an	(F) stimate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		fr org and	npensa rom the janizat d relat anizati	e ion ed
										1			
										+			
										1			
-										+			
,		-	-			-				+			
								225 766).	11	2,0	75
1b Sub-total c Total from continuation sheets to Part V							▶	335,766.		1.			0.
d Total (add lines 1b and 1c)		erenen.					•	335,766.		•	11	2,0	75.
Total number of individuals (including but recompensation from the organization	not limited to th	nose	liste	ed a	.bov	e) w	ho r	eceived more than \$10	0,000 of reportable				1
The state of the s									ampleuse on	Г		Yes	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s								nignest compensated i			3		X
4 For any individual listed on line 1a, is the s and related organizations greater than \$15											4	x	-
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion	fron	an	y un	rela			•			
rendered to the organization? If "Yes," con Section B. Independent Contractors	nplete Schedu	le J	for s	uch	per	son				7	5		X
Complete this table for your five highest co	ompensated in	dep	ende	ent o	cont	tract	ors	that received more than	1 \$100,000 of compe	nsa	ition	from	
the organization. Report compensation for	the calendary	/ear	end	ing	with	or w	vithi		year.			C)	
(A) Name and business	address							(B) Description of	services	Co	eqmc	ensatio	n
RIGGS TREE SERVICE, INC. P.O. BOX 453225, GROVE,	OK 7434	5						ROW TREE TRI	MMING		43	0,2	73.
KENNY'S DOZER SERVICE, IN		_											
P.O. BOX 368, LOCKESBURG	, AR 71	84	6			_		ROW TREE TRI	MMING		3 /	77,6	33.
2 Total number of independent contractors	(including but t	not l	imite	ed to	the	ose l	iste	ld above) who received	more than				

2

\$100,000 of compensation from the organization

Part VIII Statement of Revenue

′′′		Check if Schedule O conta	ins a response	or note to any line	in this Part VIII		*****	<u>X</u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts st	1 a	Federated campaigns	1a					
ira	b	Membership dues	41					
å,e	С	Fundraising events						
i i	d	B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
S, G	e	Government grants (contribution						
Sign	f	All other contributions, gifts, grants						
투	•	similar amounts not included abov						
ᄚ	g	Noncash contributions included in lines	CONTRACT ALL COMPANY					
Contributions, Gifts, Grants and Other Similar Amounts	9 h	Total. Add lines 1a-1f						
<u> </u>		Total. Add lines 1a 11		Business Code				
.	2 a	SALES OF ELECTRICITY		221000	44,947,880.	44,947,880.		
<u>ě</u>	z a b	PATRONAGE DIVIDENDS		221000	1,192,027.	1,192,027.		
Program Service Revenue	_	SERVICE FEES		221000	448,410.	448,410.		
E B	C	OTHER PROGRAM REVENUE		221000	5,983.	5,983.		
Be	a	OTHER PROGRAM REVENCE		221000	0,300.			
ဥ	e	All athermalian and a series was						
- 1	Τ	All other program service rever			46,594,300.			
-	<u>g</u> 3	Total. Add lines 2a-2f Investment income (including of	Marie I for Section of Fill Advisor and Section		20,000,000			
	3			The same of the sa	91,658.			91,658.
		other similar amounts)						
	4	Income from investment of tax		99				
	5	Royalties						
	_		(i) Real	(ii) Personal				
	6 a							
	b							
	С	Rental income or (loss)						
		1579	***************************************					
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		414,892.				
l l	b	Less: cost or other basis						
		and sales expenses		59,188.				
		Gain or (loss)		355,704.				255 704
	d	Net gain or (loss)			355,704.			355,704.
ne	8 a	Gross income from fundraising		1				
		including \$	of	1 1				
ě.		contributions reported on line	1c). See					
er l		Part IV, line 18	a					
Other Reven	b	Less: direct expenses	k)				
	С	Net income or (loss) from fund	raising events					
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19		1				
	b	Less: direct expenses	t					
	С	Net income or (loss) from gam	ing activities .	.,				
	10 a	Gross sales of inventory, less	returns					
		and allowances		18,170.				
	b	Less: cost of goods sold	annamentaria k	13,472.				
		Net income or (loss) from sales		>	4,698.	4,698.		
		Miscellaneous Revenue		Business Code				
	11 a	POLE ATTACHMENT INCOME		221000	5,853.			5,853.
	b	**						
	c							
		All other revenue						
		Total. Add lines 11a-11d			5,853.			
	12	Total revenue. See instructions	wastermetter statistic		47,052,213.	46,598,998.	-	453,215.

Part IX Statement of Functional Expenses

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

INC.

	Check if Schedule O contains a respon-	se or note to any line in t	this Part IX		X
Do r	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations		САРСПОСО	general expenses	onponioso.
1	and describe sourcements. Can Dort IV/ line Of	8,425.			
_	and domestic governments. See Part IV, line 21	0,425.			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	4 010 071			
4	Benefits paid to or for members	4,812,871.			
5	Compensation of current officers, directors,	117 011			
	trustees, and key employees	447,841.		ļ	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 214 521			
7	Other salaries and wages	3,314,531.			
8	Pension plan accruals and contributions (include	000 701			
	section 401(k) and 403(b) employer contributions)	928,701.			
9	Other employee benefits	645,436.			
10	Payroll taxes	293,922.			
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,250,283.			
20	Interest	4,450,403.			
21	Payments to affiliates	3,957,303.			
22	Depreciation, depletion, and amortization	3,337,303.			
23	Insurance				
24	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.) PURCHASED POWER	26,990,930.			
a	DISTRIBUTION EXPENSE	1,658,258.			
b	ADMIN & GENERAL EXPENSE	1,107,456.			
C	CONSUMER EXPENSE	489,698.			
d		146,558.			
e oe	All other expenses	47,052,213.			
<u>25</u>	Joint costs. Complete this line only if the organization	, 002, 210			
26	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

-omi 990 (2018)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 558,362. 1,911,068. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 3,011,395. 2,807,131. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 103,750. 180,396. 7 Notes and loans receivable, net 572,512. 774,943. 8 Inventories for sale or use 31,161. 53,924. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D ______ 10a 126,460,183. b Less: accumulated depreciation 10b 39,489,496. 86,970,687. 87,789,863. 10c 3,634,855. 3,380,825. 11 Investments - publicly traded securities 11 26,196. 26,052. 12 Investments - other securities. See Part IV, line 11 12 21,655,730. 21,138,065. 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 2,278,633. 2,460,591. Other assets. See Part IV, line 11 15 120,195,987. 119,170,152. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 4,189,257. 3,599,870. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 55,807,652. 52,816,302. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of 3,667,171. 25 3,297,554. Schedule D 60,303,113. 63,074,693. Total liabilities. Add lines 17 through 25 ... Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 69,105. 68,145. 30 30 Capital stock or trust principal, or current funds 0. 31 Paid-in or capital surplus, or land, building, or equipment fund 31 59,823,769. 56,027,314. 32 Retained earnings, endowment, accumulated income, or other funds 32 56,095,459. 59,892,874. 33 33 Total net assets or fund balances 119,170,152. 120,195,987. Total liabilities and net assets/fund balances

Par	t XI Reconciliation of Net Assets				r==1	
	Check if Schedule O contains a response or note to any line in this Part XI				X	
1 2 3 4 5	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities	1 2 3 4 5 6 7	47,05 47,05 56,09	2,2	13. 0. 59.	
7 8	Investment expenses Prior period adjustments	8			~=	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	3,55	5,4	95.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	59,89	2,8	74.	
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	No	
1 2a	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?					
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:					
За	X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	990	(2018)	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

CHOCTAW ELECTRIC COOPERATIVE, INC.

Employer identification number 73-0182325

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). □ Preservation of land for public use (e.g., recreation or education) □ Preservation of a historically important land area □ Protection of natural habitat □ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2 Total number of conservation easements □ Total number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register □ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ □ Number of states where property subject to conservation easement is located ▶ □ Number of states where property subject to conservation easements is located ▶ □ Number of states where property subject to conservation easements is located ▶ □ Number of states where property subject to conservation, handling of violations, and enforcement of the conservation easements it holds? □ No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ↑ S □ Number of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ↑ S □ No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year No 9 In Part XIII, describe how the organization reports conservation easements that describes the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization sMaintaining Collections of Art, Historical Treasures, o	Par			or productive complete it the
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of grants from (during year) 5 Did the organization from (during year) 6 Did the organization from (during year) 7 Old the organization from property, subject to the organization's exclusive legal control? 8 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990. Part IV, line 7. Purpose(s) of conservation easements breid by the organization (check all that apply). Preservation of for public use (e.g., recreation or education) Proservation of a for public use (e.g., recreation or education) Preservation of a conservation easement on the last of the preservation of a conservation easement on the last day of the tax year. 2 Complete line 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 3 Total number of conservation easements 3 Total acreage restricted by conservation easements 4 Total acreage restricted by conservation easements 5 Total acreage restricted by conservation easements included in (c) acquired after 7/25/06, and not on a historic structure isted in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year year. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year year. Number of conservation easements modified, transferred, released, extinguished, or termina		organization answered "Yes" on Form 990, Part IV, line		(b) Funds and other accounts
2 Aggregate value of grants from (during year) 3 Aggregate value at grants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in form all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements. Complete if the organization is writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part III Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purposely of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of open space 2 Complete lines 2a through 25 if the organization held a qualified conservation contribution in the form of a conservation easement aday of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (c) acquired after 77.25/06, and not on a historic structure listed in the National Register Number of conservation easements included in (c) acquired after 77.25/06, and not on a historic structure is leaded in the National Register Number of states where property subject to conservation easement is located P Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year P 1 No in Part IIII Organization with the conservation easements it holds? 1 Dese each conservation easements or policy regarding the periodic monitoring, inspection, handling of violations, a	4	Total number at and of year	(4) 2010. 42100	
4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No 6 Did the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection or natural habitat Protection or natural habitat Protection or natural habitat Protection or natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement Rel at the End of the Tax Year Rel at t		**************************************		
A Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confering impermissible private benefit? Part II Conservation Easements. Complete if the donor or donor advisor, or for any other purpose confering impermissible private benefit? Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education)		0200735500		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization share apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Proservation of natural habitat Preservation of or natural habitat Preservation of or natural habitat Preservation of organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 3 Total number of conservation easements 4 Total acreage restricted by conservation easements 5 Total acreage restricted by conservation easements 6 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 7 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 8 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 9 Number of states where property subject to conservation easements is located				·
are the organization's property, subject to the organization's exclusive legal control? Yes		Did the organization inform all denors and denor advisors in w	riting that the assets held in donor adviso	ed funds
Bid the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Propose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area. Protection of natural habitat Protection of natural habitat Preservation of or natural habitat Preservation of on factural habitat Preservation of or factural habitat Preservation of a certified historic structure Preservation of a certified historic structure Preservation of a certified historic structure included in the form of a conservation easement on the last day of the tax year. 1 Total number of conservation easements 2 Number of conservation easements included in (a) acquired after 7/25.06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easements is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in holds? Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Ps S B Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l)) Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easeme	5			
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring memormisable private benefit? Part II Conservation Easements Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of and for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements 2a	6			
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Proservation of land for public use (e.g., recreation or education)	O			
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). □ Preservation of land for public use (e.g., recreation or education) □ Preservation of a historically important land area □ Protection of natural habitat □ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2 Total number of conservation easements □ Total number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register □ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ □ Number of states where property subject to conservation easement is located ▶ □ Number of states where property subject to conservation easements is located ▶ □ Number of states where property subject to conservation easements is located ▶ □ Number of states where property subject to conservation, handling of violations, and enforcement of the conservation easements it holds? □ No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ↑ S □ Number of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ ↑ S □ No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year No 9 In Part XIII, describe how the organization reports conservation easements that describes the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization sMaintaining Collections of Art, Historical Treasures, o				1 22
Preservation of land for public use (e.g., recreation or education)	Par	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, F	
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(II) Assets included in Form 990, Part A		(ii) Assets included in Form COO Dort V		
and the state of t	_	(ii) Assets included in Form 990, Fart A	acurae or other similar assets for financia	al gain, provide
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	2			a gain, provide
	_			> \$
b Assets included in Form 990, Part X		Assets included in Form 990 Part X		> \$

Par	t III Organizations Maintaining Co	ollections of Ar	t, Hist	orical Tr	easures, o	r Other S	Similar As	sets(continu	red)
3	Using the organization's acquisition, accession	n, and other records	s, check	any of the	following that	are a signi	ficant use of	its collection	items
	(check all that apply):								
а	Public exhibition	d	t	_oan or exc	hange progra	ms			
b	Scholarly research	е		Other					
c	Preservation for future generations			7/					
	Provide a description of the organization's co	llections and explain	how th	ey further t	he organizatio	on's exemp	t purpose in	Part XIII.	
5	During the year, did the organization solicit or	receive donations o	of art, his	storical trea	sures, or othe	er similar as	sets	06 185V	4
	to be sold to raise funds rather than to be ma							Yes Yes	No
Par		gements. Comple	te if the	organizatio	n answered "	Yes" on Fo	rm 990, Part	IV, line 9, or	
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for	contribution	ns or other as	sets not inc	cluded		
	on Form 990, Part X?			•••				Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing t	able:					
	-							Amount	
С	Beginning balance						1c		
	Additions during the year						1d		
	Distributions during the year						1e		
f	Ending balance	***************************************					1f		
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for 6	escrow or c	ustodial acco	unt liability	?	Yes	⊢ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planatio	on has been	provided on	Part XIII	*******	*******	Ш
	t V Endowment Funds. Complete if	the organization an	swered	"Yes" on Fo	orm 990, Part	IV, line 10.			
		(a) Current year	(b) P	rior year	(c) Two year	s back (d)	Three years b	ack (e) Four	years back
1a	Beginning of year balance								
	Contributions								
c	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1	g, column (a)) held as:				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
c	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.							
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	and administe	ered for the	organization	Ē	
	by:					8			Yes No
	(i) unrelated organizations		****					3a(i)	
	(ii) related organizations		******	*******		*****		3a(ii)	_
b	If "Yes" on line 3a(ii), are the related organiza				?			3b	
4	Describe in Part XIII the intended uses of the	organization's endo	wment	funds.					
Pa	rt VI Land, Buildings, and Equipm				150	S WS	40		
	Complete if the organization answere							(0.5.4	
Description of property (a) Cost or other (b) Cost or other (c) Accumulated							(d) Bool	(value	
		basis (investr	nent)		(other)	depre	eciation	287	5,792.
1a	Land	***			36,792.	1 24	7 515		0,373.
b	Buildings			3,09	97,888.	1,30	57,515.	1,730	,,,,,,,,
С	Leasehold improvements			100 4	11 607	20 11	1 001	84,31	706
d	Equipment	944 L			41,687.	30,14	21,981.		3,816.
e	Other	335			33,816.			86,97	
Tota	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colu	mn (B), line	10c.)			00,97	0,007.

Schedule D (Form 990) 2018

	(1 01111 330) 2010		
Part VII	Investments -	Other	Securities.

Complete if the organization answered "Yes" or (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
) Financial derivatives			
Closely-held equity interests			
) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.	rs =tatr(m-sector)
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	I-of-year market value
(1) PATRONAGE CAPITAL - WFEC	16,708,096.	COST	
(2) PATRONAGE CAPITAL - CFC	1,194,964.	COST	
(3) PATRONAGE CAPITAL - AECI	87,040.	COST	
(4) PATRONAGE CAPITAL - NISC	143,367.	COST	
(5) PATRONAGE CAPITAL -			
(6) COBANK	2,240,192.	COST	
(7) PATRONAGE CAPITAL - CRC	3,489.	COST	
(8) CAPITAL TERM CERTIFICATES	1,277,482.	COST	
(9) MEMBERSHIPS	1,100.	COST	
	21,655,730.		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	11d. See Form 990, Part X, line 15.	(b) Book value

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	ACCUMULATED PROVISION FOR PENSIONS		
(3)	AND BENEFITS	1,992,944.	
(4)	CONSUMER DEPOSITS	176,915.	
(5)	OTHER DEFERRED CREDITS	1,025,050.	
(6)	ACCRUED OPERATING TAXES	102,645.	
(7)			
(8)			
(9)		2 225 554	
otal.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	3,297,554.	

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

(9)

_	rt XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per R	eturr	ı.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		1	47,052,213.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	W		
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		•
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	47,052,213.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		0
С			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	A- With Evanges per	5 Dot	47,052,213.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statemen	its with Expenses per	неш	ırıı.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			42,239,342.
1	Total expenses and losses per audited financial statements		1	42,233,342.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	. 1		
а		2a		
b	**************************************	2b		
С	Other losses	2c		
d		2d	2e	0.
е			3	42,239,342.
3	Subtract line 2e from line 1		٦	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4a		ж.
a	#155990-04000 AND THE REPORT OF THE PROPERTY O	4b 4,812,871.		
b	throughous and the control of the co		4c	4,812,871.
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	47,052,213.
	rt XIII Supplemental Information.			
	vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV is 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition		4; Part	X, line 2; Part XI,
PΑ	RT X, LINE 2:			
тн	E COOPERATIVE APPLIES THE "UNCERTAIN TAX POS	SITIONS" PROVIS	ION	S OF
AC	COUNTING PRINCIPLES GENERALLY ACCEPTED IN TH	HE UNITED STATE	s o	F AMERICA.
тн	E PRIMARY TAX POSITION OF THE COOPERATIVE IS	S ITS FILING ST	'ATU	S AS A TAX
EX	EMPT ENTITY. THE COOPERATIVE DETERMINED THAT	r IT IS MORE LI	KEL	Y THAN NOT
TН	AT ITS TAX POSITION WILL BE SUSTAINED UPON 1	EXAMINATION BY	THE	INTERNAL
RE	VENUE SERVICE (IRS), OR OTHER STATE TAXING	AUTHORITY AND T	TAH	ALL TAX
(NEFITS ARE LIKELY TO BE REALIZED UPON SETTL			
AU	THORITIES.			
	RT XII LINE 4B - OTHER ADJUSTMENTS:			

PART VII:

THE AMOUNT OF INVESTMENTS - OTHER SECURITIES ON FORM 990, PAGE 11, PART

X, LINE 12 DOES NOT EQUAL OR EXCEED 5% OF THE TOTAL ASSETS ON FORM 990,

PAGE 11, PART X, LINE 16, COLUMN B. CONSEQUENTLY, IN ACCORDANCE WITH IRS

INSTRUCTIONS, SCHEDULE D, PART VII HAS BEEN LEFT BLANK.

PART IX:

THE AMOUNT OF OTHER ASSETS ON FORM 990, PAGE 11, PART X, LINE 15 DOES NOT EQUAL OR EXCEED 5% OF THE TOTAL ASSETS ON FORM 990, PAGE 11, PART X, LINE 16, COLUMN B. CONSEQUENTLY, IN ACCORDANCE WITH IRS INSTRUCTIONS, SCHEDULE D, PART IX HAS BEEN LEFT BLANK.

PART XII, LINE 4B:

PAID OR ALLOCATED TO THE MEMBERS IS REPORTED AS AN INCREASE IN EQUITY AND NOT AS AN EXPENSE. THEREFORE, NET INCOME PER THE AUDITED FINANCIAL

STATEMENTS IS REPORTED GROSS OF THE AMOUNT OF PATRONAGE DIVIDENDS THAT ARE EITHER ALLOCATED OR TO BE ALLOCATED AT THE TIME THE AUDITED FINANCIAL

STATEMENTS ARE PREPARED. HOWEVER, BECAUSE THE ALLOCATION OF PATRONAGE

DIVIDENDS IS ONE ASPECT OF HOW THE COOPERATIVE FULFILLS ITS TAX EXEMPT

PURPOSE OF OPERATING ON A COOPERATIVE BASIS, THE AMOUNT OF PATRONAGE

DIVIDENDS EITHER ALLOCATED OR TO BE ALLOCATED TO THE MEMBERS IS REPORTED

ON FORM 990, PART IX, LINE 4 AS "BENEFITS PAID TO MEMBERS". PATRONAGE

DIVIDENDS ARE ALLOCATED ON A PATRONAGE BASIS AND DONE SO PURSUANT TO A

PRE-EXISTING OBLIGATION AS PROVIDED FOR IN THE "NON-PROFIT OPERATION"

ARTICLE OF THE COOPERATIVE'S BYLAWS.

SCHEDULE J (Form 990)

Compensation Information

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

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

➤ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury

Internal Revenue Service

CHOCTAW ELECTRIC COOPERATIVE, INC.

Employer identification number 73-0182325

Pa	RTI Questions Regarding Compensation		
		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		1
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	First-class or charter travel Housing allowance or residence for personal use		
	Travel for companions Payments for business use of personal residence		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		
	Discretionary spending account Personal services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's		
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to		
	establish compensation of the CEO/Executive Director, but explain in Part III.		
	Compensation committee Written employment contract		
	Independent compensation consultant X Compensation survey or study		
	Form 990 of other organizations X Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing		
•	organization or a related organization:		
а	Receive a severance payment or change-of-control payment?		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		
	contingent on the revenues of:		
а	The organization?		
	Any related organization?		
	If "Yes" on line 5a or 5b, describe in Part III.		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		
	contingent on the net earnings of:	-	
а	The organization?	_	
b	Any related organization?		-
	If "Yes" on line 6a or 6b, describe in Part III.		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		
	not described on lines 5 and 6? If "Yes," describe in Part III		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	1	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	_	-
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		
	Regulations section 53.4958-6(c)?	1	

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

Schedule J (Form 990) 2018

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Selection	(a)-(i)(a)	g lo
(1) KOONEY DUNCAN	8	185,000.	0	1,298.	72,456.	11,806.	270,560.	0
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							Sched	Schedule J (Form 990) 2018

Provide 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.

PART II, COLUMN C:	
INCLUDED IN THIS AMOUNT IS THE INCREASE IN ACTUARIAL	IN ACTUARIAL VALUE OF BENEFITS
PAYABLE UNDER A DEFINED BENEFIT RETIREMENT PLAN. THE	3 CONTRIBUTION RATE
FOR PARTICIPANTS IN THE NRECA R&S DEFINED BENEFIT PEN	PENSION PLAN ARE THE
SAME FOR ALL INDIVIDUALS IN THIS MULTI-EMPLOYER PLAN.	. THE CHANGE IN
ACTUARIAL VALUE FOR EACH PARTICIPANT, HOWEVER, VARIES	S WITH AGE. IN
OTHER WORDS, THE OLDER A PLAN PARTICIPANT IS, THE GRI	GREATER THE INCREASE
IN THAT INDIVIDUAL'S CHANGE IN ACTUARIAL VALUE, ALL	ALL OTHER THINGS BEING
EQUAL. BECAUSE THIS RELATES TO A MULTI-EMPLOYER PLAN,	, CASH CONTRIBUTION
TO THE PLAN IN LIEU OF THE ACTUARIAL INCREASE ARE EX	EXPENSED IN THE
FINANCIAL STATEMENTS.	
KOONEY DUNCAN:	
TOTAL REPORTED IN COLUMN C	\$ 72,456
LESS: ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN	(72,456)
ADD: CASH CONTRIBUTION TO DEFINED BENEFIT PLAN	56,960
EXPENSE TO THE COOPERATIVE	\$ 56,960
	Schedule J (Form 990) 2018

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CHOCTAW ELECTRIC COOPERATIVE, INC.

Employer identification number 73-0182325

FORM 990, PART VI, SECTION A, LINE 4:
DURING THE COOPERATIVE'S ANNUAL MEETING IN SEPTEMBER 2018, MEMBERS OF THE
COOPERATIVE VOTED AND APPROVED BYLAW AMENDMENTS TO CLARIFY THE FOLLOWING
ARTICLES AND SECTIONS:
ARTICLE I - MEMBERSHIP, SECTION 1.06
THIS SECTION WAS AMENDED TO ALLOW THE BOARD OF TRUSTEES TO MAKE SURE RATES
REMAIN FAIR TO ALL MEMBERS ON A NON-DISCRIMINATORY BASIS.
ARTICLE III - MEETINGS OF MEMBERS, SECTION 3.03
THIS SECTION WAS CHANGED TO CLARIFY WHICH SECRETARY IS BEING REFERENCED.
ARTICLE IV - TRUSTEES, SECTION 4.02
THE FOLLOWING SUBSECTIONS WERE AMENDED AND CLARIFIED TO:
(B) ADD DISTRICT REPRESENTATION;
(C) DELETE LANGUAGE AND REPOSITION AGE REQUIREMENT TO PLACE IN CONSECUTIVE
ORDER;
(D) DELETE "INDIVIDUALS BORN IN 1950 OR THEREAFTER";
(E) DELETE BUSINESS LANGUAGE CONCERNING SALES OF ELECTRICAL, PLUMBING,
FIXTURES OR SUPPLIES;
(H) DELETE OAEC AND NRECA PROGRAMS AS A CONDITION FOR BOARD CERTIFICATION
AND EFFECTIVE DATE. OAEC AND NRECA CERTIFICATION CLASSES GIVE THE BOARD OF
TRUSTEES THE KNOWLEDGE AND SKILLS NECESSARY TO FULFILL THEIR OBLIGATIONS
AND RESPONSIBILITIES TO CEC;
(T) REPOSITION THIS SUBSECTION FROM SECTION 4.08

Name of the organization CHOCTAW ELECTRIC COOPERATIVE, INC.

Employer identification number 73-0182325

ARTICLE IV - TRUSTEES, SECTION 4.04

THIS SECTION WAS CHANGED TO ADD THE WORD "MEETING" TO CORRECT A GRAMMAR ERROR.

ARTICLE IV - TRUSTEES, SECTION 4.06

THIS SECTION WAS CHANGED TO CLARIFY WHICH SECRETARY IS BEING REFERENCED.

ARTICLE IV - TRUSTEES, SECTION 4.10

THIS SECTION ADDED THAT TRUSTEES WILL GET THE CURRENT IRS RATE FOR FOOD.

ARTICLE V - MEETING OF TRUSTEES, SECTION 5.01

ARTICLE I, SECTION 1.10 OF THE BYLAWS WERE REPOSITIONED TO 5.01 AND RENAMED
"AGENDA", WHICH ALSO REPOSITIONED EXISTING SECTION 5.01 REGARDING MEMBER
RIGHT OF ATTENDANCE TO SECTION 5.02.

ARTICLE XV - AMENDMENTS, SECTION 15.01

THIS SECTION WAS AMENDED TO REMOVE LANGUAGE THAT HAD BEEN DELETED ("THE REVISED AMENDMENT WILL BE SUBMITTED FOR A MAJORITY VOTE OF THE MEMBERS AT THE ELECTION; PROVIDED FURTHER, THE BOARD OF TRUSTEES SHALL NOT CAUSE ANY PROPOSED BYLAW CHANGE TO BE NOTICED OR ACTED UPON, OR PERMIT ANY AMENDMENT TO A PROPOSED BYLAW CHANGE TO BE ACTED UPON, IF IT DETERMINES THAT SUCH, IF ADOPTED, WOULD BE ILLEGAL OR A LEGAL NULLITY") WHICH ALLOWS THE BOARD OF TRUSTEES TO REMOVE ILLEGAL PROPOSED AMENDMENTS THAT VIOLATE STATE OR FEDERAL LAW. THIS SECTION WAS FURTHER AMENDED TO ALLOW THE BOARD OF TRUSTEES TO HAVE THE OPPORTUNITY TO REMOVE PROPOSED AMENDMENTS THAT WILL HAVE A NEGATIVE FINANCIAL IMPACT ON THE COOPERATIVE.

Employer identification number Name of the organization 73-0182325 CHOCTAW ELECTRIC COOPERATIVE, INC. HTTPS://CHOCTAWELECTRIC.NET/BYLAWS FORM 990, PART VI, SECTION A, LINE 6: THE COOPERATIVE WAS FORMED BY THE MEMBERS TO PROVIDE ELECTRIC SERVICE AT COST ON A COOPERATIVE BASIS. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE COOPERATIVE VOTE ON THE BOARD OF TRUSTEES. ELECTIONS ARE DONE ON A ONE MEMBER ONE VOTE BASIS. FORM 990, PART VI, SECTION A, LINE 7B: THE FOLLOWING ACTS REQUIRE APPROVAL OF THE MEMBERS OF THE COOPERATIVE: 1. AMENDMENTS TO THE ARTICLES OF INCORPORATION 2. AMENDMENTS TO THE BYLAWS 3. DISPOSAL OF SUBSTANTIAL PORTION OF THE COOPERATIVE'S ASSETS 4. DISSOLUTION/LIQUIDATION OF THE COOPERATIVE 5. MERGER OR CONSOLIDATION OF THE COOPERATIVE WITH ANOTHER ORGANIZATION FORM 990, PART VI, SECTION A, LINE 8B: THE COOPERATIVE HAS NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. THEREFORE, AND PURSUANT TO FORM 990 INSTRUCTIONS, THE QUESTION HAS BEEN ANSWERED "NO". FORM 990, PART VI, SECTION B, LINE 11B: MANAGEMENT REVIEWED AND THEN PROVIDED A COPY OF THE FORM 990 TO THE BOARD FOR DISCUSSION AND REVIEW. THE DISCUSSION AND REVIEW WAS PERFORMED AT THE BOARD MEETING BEFORE FILING THE FORM 990.

Name of the organization CHOCTAW ELECTRIC COOPERATIVE, INC.

Employer identification number 73-0182325

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD OF DIRECTORS AND OFFICERS ARE REQUIRED TO REVIEW AND BE FAMILIAR WITH THE POLICIES OUTLINED IN THE COOPERATIVE'S CONFLICT OF INTEREST POLICY. THE BOARD OF DIRECTORS AND OFFICERS ARE REQUIRED TO DISCLOSE ANY ACTION OR SITUATION THAT MIGHT VIOLATE THE POLICY TO THE FULL BOARD OF DIRECTORS AS SOON AS POSSIBLE. THE CONFLICT OF INTEREST POLICY IS REVIEWED ON AN ANNUAL BASIS.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF TRUSTEES ASSESS PERFORMANCE AND USE A COMPENSATION SURVEY WHEN DETERMINING THE COMPENSATION OF THE CEO. THE SURVEY SHOWS COMPARATIVE SALARIES FOR GENERAL MANAGERS FROM COOPERATIVES LOCATED IN OKLAHOMA.

THE CEO ASSESSES PERFORMANCE AND USES A COMPENSATION SURVEY WHEN

DETERMINING THE COMPENSATION OF THE ORGANIZATION'S OTHER EMPLOYEE OFFICERS

OR KEY EMPLOYEES, IF ANY. THE SURVEY INCLUDES COMPARATIVE SALARIES FROM

SIMILAR COOPERATIVES THROUGHOUT OKLAHOMA.

FORM 990, PART VI, SECTION C, LINE 19:

THE COOPERATIVE WILL PROVIDE A COPY OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS TO ANY MEMBER WHO SUBMITS A REQUEST IN WRITING FOR A COPY OF SUCH DOCUMENT. ANNUALLY THE COOPERATIVE PROVIDES A COPY OF THE AUDITED BALANCE SHEET AND INCOME STATEMENT TO THE MEMBERS OF THE COOPERATIVE WITH THE ANNUAL REPORT. THE ANNUAL REPORT, BYLAWS AND AUDIT REPORT CAN BE FOUND ON THE COOPERATIVE'S WEBSITE.

FORM 990, PART VII, COLUMN F:

IN ORDER TO PROVIDE RETIREMENT BENEFITS TO ITS EMPLOYEES THE

Name of the organization

CHOCTAW ELECTRIC COOPERATIVE, INC.

Employer identification number 73-0182325

COOPERATIVE PARTICIPATES IN A MULTI-EMPLOYER DEFINED BENEFIT PLAN.

CONTRIBUTIONS TO THIS PLAN ARE BASED ON THE FULL FUNDING LIMIATION OF

THE PLAN. EMPLOYER CONTRIBUTIONS ARE AVAILABLE TO PARTICIPATING

EMPLOYEES, INCLUDING EMPLOYEE OFFICERS AND HIGHLY COMPENSATED

EMPLOYEES, MEETING THE ELIGIBILITY REQUIREMENTS OF THE PLAN.

THE COOPERATIVE ALSO PROVIDES HEALTH BENEFITS TO ALL ELIGIBLE EMPLOYEES

THROUGH A SELF-INSURANCE PLAN. THE AMOUNTS REPORTED ON PART VII,

COLUMN (F) FOR EMPLOYEE OFFICERS AND HIGHLY COMPENSATED EMPLOYEES ARE

COMPRISED OF THE THE ACTUARIAL INCREASE IN THE DEFINED BENEFIT PENSION

PLAN AND THE INSURANCE PREMIUM VALUES FOR CONTRIBUTIONS MADE TO THE

SELF-INSURANCE PLAN ON BEHALF OF AND FOR THEIR BENEFIT.

FORM 990, PART VIII, LINE 2:

PATRONAGE DIVIDENDS RESULT FROM THE PURCHASE OF WHOLESALE POWER FROM A

GENERATION & TRANSMISSION COOPERATIVE. PATRONAGE DIVIDENDS ALSO RESULT

FROM THE PAYMENT OF INTEREST FROM COOPERATIVE BANKS AND THE PURCHASE OF

SUPPLIES AND SERVICES FROM OTHER COOPERATIVE ORGANIZATIONS. THE

EXPENSES ASSOCIATED WITH PURCHASES FROM AND PAYMENTS TO SUCH

COOPERATIVE ORGANIZATIONS ARE A DIRECT COMPONENT OF COST OF THE

ELECTRIC SERVICE PROVIDED BY THE COOPERATIVE TO ITS MEMBERS.

FORM 990, PART IX:

THE ACCOUNTING RECORDS OF THE COOPERATIVE ARE MAINTAINED IN ACCORDANCE
WITH THE RUS UNIFORM SYSTEM OF ACCOUNTS (USOA) PRESCRIBED FOR RUS
ELECTRIC BORROWERS. THE USOA DOES NOT RECORD EXPENSES IN THE GENERAL
EXPENSE CATEGORIES PROVIDED ON PART IX LINES 1 - 23. THE COOPERATIVE
SEPARATELY REPORTS SALARIES AND WAGES, EMPLOYEE BENEFITS AND PAYROLL

CHOCTAW ELECTRIC COOPERATIVE, INC.

Employer identification number 73-0182325

TAXES THAT WILL BE ALLOCATED IN ACCORDANCE WITH THEIR ACCOUNTING

SYSTEM, BUT OTHER EXPENSES THAT ARE DESCRIBED IN LINES 1 - 23 ARE

REPORTED ON LINE 24 UNDER THE EXPENSE CATEGORIES REQUIRED BY THE USOA.

FORM 990, PART IX, LINE 1:

ALL GRANTS, SPONSORSHIPS AND/OR DONATIONS ARE MADE TO NON-PROFIT AND
CIVIC ORGANIZATIONS, AND ARE INTENDED TO IMPROVE THE COMMUNITIES IN
WHICH OUR MEMBERS RESIDE. EACH GRANT, SPONSORSHIP AND/OR DONATION MADE
DURING THE YEAR WAS BELOW THE REPORTING THRESHOLD OF SCHEDULE I, PART
II.

FORM 990, PART IX, LINE 4:

PURSUANT TO THE FORM 990 INSTRUCTIONS, THE AMOUNT OF PATRONAGE

DIVIDENDS PAID TO THE MEMBERS (HEREINAFTER REFERRED TO AS "PATRONS")

SHOULD BE REPORTED ON PART IX, LINE 4. THE PHRASE "PATRONAGE DIVIDENDS

PAID" REFERS TO THE PROCESS, SUBSEQUENT TO YEAR-END, BY WHICH THE

COOPERATIVE ALLOCATES PATRONAGE CAPITAL TO AND, THEREFORE, OPERATES AT

COST WITH ITS PATRONS.

THE COOPERATIVE'S TAX EXEMPT PURPOSE IS TO PROVIDE ELECTRICITY TO ITS

PATRONS AND TO DO SO ON A COOPERATIVE BASIS. TAX LAW DEFINES

"OPERATING ON A COOPERATIVE BASIS" AS SUBORDINATION OF CAPITAL,

DEMOCRATIC CONTROL, AND OPERATION AT COST. THE COOPERATIVE OPERATES AT

COST THROUGH THE ALLOCATION OF TRUE PATRONAGE DIVIDENDS (ALSO REFERRED

TO AS ALLOCATIONS OF PATRONAGE CAPITAL) TO ITS PATRONS. PATRONAGE

DIVIDENDS ARE CONSIDERED PAID IF THE ALLOCATION IS MADE (1) PURSUANT TO

A PRE-EXISTING OBLIGATION, (2) FROM THE MARGINS PRODUCED FROM THE

TRANSACTIONS DONE WITH OR FOR PATRONS, AND (3) IN A FAIR AND EQUITABLE

Employer identification number Name of the organization 73-0182325 CHOCTAW ELECTRIC COOPERATIVE, INC. MANNER ON THE BASIS OF PATRONAGE (I.E. PURCHASES). ADDITIONALLY, THE ALLOCATION OF PATRONAGE DIVIDENDS SHOULD BE MADE WITHIN A REASONABLE TIME PERIOD AFTER THE CLOSE OF THE COOPERATIVE'S YEAR-END OF DECEMBER EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE DIVIDEND IS 31. PROVIDED FOR IN THE NON-PROFIT OPERATION ARTICLE OF THE COOPERATIVE'S BYLAWS. THE AMOUNT REPORTED ON PART IX, LINE 4 REPRESENTS THE AMOUNT OF PATRONAGE CAPITAL THAT IS EITHER ALLOCATED OR TO BE ALLOCATED TO THE PATRONS RESULTING FROM THEIR PURCHASE OF ELECTRICITY FROM THE BECAUSE PATRONAGE DIVIDENDS COOPERATIVE FOR THE 2018 CALENDAR YEAR. ARE THE PROCESS BY WHICH THE COOPERATIVE OPERATES AT COST WITH ITS PATRONS AND THEREBY A KEY COMPONENT TO ACCOMPLISHING ITS EXEMPT PURPOSE, THE COOPERATIVE HAS REPORTED SUCH AMOUNTS AS AN EXPENSE FOR FORM 990 REPORTING. PATRONAGE DIVIDENDS ARE NOT AN EXPENSE FOR FINANCIAL STATEMENTS PREPARED IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, HOWEVER. FORM 990, PART IX, LINES 5-7: SALARIES AND WAGES ARE ALLOCATED TO ASSET, LIABILITY, AND EXPENSE ACCOUNTS BASED ON THE ACCOUNTING SYSTEM DESCRIBED ABOVE. THE FOLLOWING SCHEDULE RECONCILES AMOUNTS REPORTED ON LINES 5-7 TO THE TOTAL WAGES ACCRUED AND/OR PAID: \$ 3,762,372 TOTAL PER LINES 5-7 (50,230) LESS: TRUSTEE FEES REPORTED ON FORMS 1099-MISC (112,075)LESS: EMPLOYEE OFFICER BENEFITS INCLUDED IN LINE 5 PLUS: SALARIES AND WAGES CAPITALIZED DIRECTLY TO PLANT 660,268

Name of the organization CHOCTAW ELECTRIC COOPERATIVE, INC.	Employer identification number 73-0182325
PLUS: SALARIES AND WAGES CAPITALIZED/EXPENSED	
INDIRECTLY THROUGH CLEARING & OTHER ACCOUNTS	350,090
TOTAL WAGES ACCRUED AND/OR PAID	\$ 4,610,425
FORM 990, PART IX, LINE 24:	
ADMINISTRATIVE AND GENERAL EXPENSES IS COMPRISED OF THE	FOLLOWING:
ADMINISTRATIVE & GENERAL	\$ 652,927
EMPLOYEE PENSION AND BENEFIT	2,645
MANAGER & TRAINING	192,406
DUES & SUBSCRIPTIONS	166,229
OFFICE SUPPLIES	83,495
LEASE PAYMENT	12,920
UTILITIES AND MONTHLY CHARGES	282,512
OUTSIDE SERVICES EMPLOYED	149,513
INSURANCE	76,064
ANNUAL MEETING	64,335
TRUSTEES	246,891
MAINTENANCE OF GENERAL PLANT	145,791
MISCELLANEOUS GENERAL	45,381
TOTAL ADMIN & GENERAL EXP PER FINANCIAL STATEMENTS	\$ 2,121,109
LESS: RECLASS OF TRUSTEE FEES TO PART IX, LINE 5	(50,230)
LESS: RECLASS OF LABOR TO PART IX, LINES 5 & 7	(621,552)
LESS: RECLASS OF BENEFITS TO PART IX, LINES 8-10	(341,871)
TOTAL ADMIN & GENERAL EXPENSE PER FORM 990, PART IX	\$ 1,107,456

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization CHOCTAW ELECTRIC COOPERATIVE, INC.	Employer identification number 73-0182325
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PATRONAGE CAPITAL ASSIGNABLE	4,812,871.
PATRONAGE CAPITAL RETIRED - TOTAL	-1,074,370.
PATRONAGE CAPITAL RETIRED - UNCLAIMED	91,978.
NET CHANGE IN MEMBERSHIPS	960.
OTHER COMPREHENSIVE INCOME - PROVISION FOR PENSION &	
BENEFITS	-275,944.
TOTAL TO FORM 990, PART XI, LINE 9	3,555,495.
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