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 16 Open to Public

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Inspection

Α	For tr	e 2016 calendar year, or tax year deginning	and	i enaing						
В	Check i applicat	C Name of organization NATIONAL RURAL ELECTR	r.C.		D Employer identif	ication number				
	Addr	COOPERATIVE ASSOCIATION				•				
	Nam chan	e Doing business as			53-0	116145				
	Initia retur	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Room/suite							
	Final	, 4301 WILSON BLVD FIN8-			(703	3)907-5960				
	termi ated	City or town, state or province, country, and	I ZIP or foreign postal code		G Gross receipts \$	186,129,629.				
	Amei returi	ANDINGTON, VA AAAOS			H(a) Is this a group					
Ĺ.	Appli tion	F Name and address of principal officer: • ±±	MATHESON		for subordinate	s? Yes X No				
	pend	SAME AS C ABOVE			H(b) Are all subordinates	included? Yes No				
)◀ (insert no.)	or 527	If "No," attach a	a list. (see instructions)				
		te: ► NRECA. COOP			H(c) Group exemption					
			ssociation Other	L, Year	of formation: 1942	M State of legal domicile: DC				
LP.	art I	Summary			3 0 0 0 0 T 3 TT T	AT THE TOUR MED				
ø	1	Briefly describe the organization's mission or mos	t significant activities: MEMB	ERSHIE	ASSOCIATIO	ON DEDICATED				
Activities & Governance		TO REPRESENTING THE NATIO								
ern	2	Check this box lifthe organization disco		sed of more	3					
ò	3	Number of voting members of the governing body	•		3	47				
ૐ	4	Number of independent voting members of the go				856				
ties	5	Total number of individuals employed in calendar				030				
₹	6	Total number of volunteers (estimate if necessary)				7,062,145.				
Ac		Total unrelated business revenue from Part VIII, co				4 404 600				
	d	Net unrelated business taxable income from Form	1990-1, ilne 34		Prior Year	Current Year				
		Contributions and grants (Part VIII, line 1h)		\vdash	1,812,109.					
ïte	8			- 1	55,657,230.					
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4	1 and 7d)	·····	133,742.					
Ä	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8d			15,423,156.					
	12	Total revenue - add lines 8 through 11 (must equa			73,026,237.					
	13	Grants and similar amounts paid (Part IX, column			0.					
	14	Benefits paid to or for members (Part IX, column (0.	0.				
Ø	15	Salaries, other compensation, employee benefits			16,968,738.	113,950,529.				
ıse	1	Professional fundraising fees (Part IX, column (A),			0.	0.				
Expenses		Total fundraising expenses (Part IX, column (D), lir	_	0.						
ш	1	Other expenses (Part IX, column (A), lines 11a-11c	-		59,379,252.					
	18	Total expenses. Add lines 13-17 (must equal Part			76,347,990.	180,931,969.				
	19	Revenue less expenses. Subtract line 18 from line	12		-3,321,753.	-2,137,792.				
Net Assets or Fund Balances					ginning of Current Year					
sets	20	Total assets (Part X, line 16)	***************************************	<u> 1</u>	79,704,649.					
t As	21	Total liabilities (Part X, line 26)			92,446,227.					
캴	22	Net assets or fund balances. Subtract line 21 from	line 20		87,258,422.	89,129,913.				
	art II	Signature Block								
		lties of perjury, I declare that I have examined this return				ıy knowledge and belief, it is				
true	, corre	t, and complete. Declaration of preparer (other than offic	er) is based on all information of wi	hich preparer						
		Signature of officer	<i></i>		Date	5/9				
Sig	n	· -	ETNANCE		Βαιο					
Her	'e	VENEICIA LOCKHART, VP, Type or print name and title	FINANCE							
		, , ,		11	Date Check	PTIN				
Det.	4	Print/Type preparer's name	Preparer's signature]	if Calcon					
Paid		Firm's name			self-employ	/80				
	parer Only	Firm's name			Firm's EIN ▶					
J36	only	Firm's address			Phone no.					
N4~	, the !!	RS discuss this return with the preparer shown abo	ove? (see instructions)		i nono no.	Yes No				
IVICI	ון סנוו א	to algoriss this formit with the brebater shown and	vio, foconionaciono)			,,,,				

	m 990 (2016) COOPERATIVE ASSOCIATION	53-0116145	Page 2
Pa	art III Statement of Program Service Accomplishments	,	
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	NRECA'S PURPOSE IS TO ENGAGE IN THE COMPILATION AND DIS		
	INFORMATION WITH RESPECT TO RURAL ELECTRIFICATION AND THE		IG
	OF OTHER SERVICES TO RURAL ELECTRIC COOPERATIVES AND OTHER		
	CONNECTION WITH THE COORDINATION, ADVANCEMENT, AND DEVE	LOPMENT OF	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990·EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.	<u></u>	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	3.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses,	and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ including grants of \$) (Revenue	ie \$)
	REGULATORY, LEGAL, AND LEGISLATIVE: NRECA PROVIDES SUPP	ORT SERVICE	S TO
	MEMBERS RELATED TO COMPLIANCE, LEGAL, AND REGULATORY ISS		
	ADDITION, NRECA EDUCATES AND ADVOCATES TO MEMBERS OF COM	GRESS AND T	HEIR
	STAFFS, FEDERAL AGENCIES, AND THE ADMINISTRATION ON POLI	CY ISSUES	
	IMPACTING NRECA VOTING MEMBERS AND THE 42 MILLION CONSUM		
	SERVED BY NRECA VOTING MEMBERS, AND KEEPS OUR MEMBERSHIE		
	THE LEGISLATIVE PROCESS.		
41			
4b	(Code:) (Expenses \$ including grants of \$) (Revenue CONTINUE TRACE AND CONTINUE TRACE)
	CONSULTING, TRAINING, AND CONFERENCES: NRECA PROVIDES ME		
	ESSENTIAL INDUSTRY SPECIFIC TRAINING AS WELL AS DIRECTOR		AND
	EMPLOYEE TRAINING; CONSULTING RELATED TO THE ORGANIZATION		
	IMPROVEMENTS, AND INDUSTRY AND TECHNOLOGICAL CHANGES; AN		ES
	AND MEMBERSHIP MEETINGS, PROMOTING COLLABORATION AND NET	WORKING.	
		*	
			-
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	- \$	· · ·
	MULTIPLE EMPLOYER BENEFIT PLAN ADMINISTRATION: NRECA PRO		—— <i>'</i>
	ADMINISTRATION SERVICES ON A COST REIMBURSABLE BASIS TO		PT.E
	EMPLOYER BENEFIT PROGRAMS IN WHICH MOST NRECA MEMBERS CA		
	THEY CONSIST OF TWO RETIREMENT PROGRAMS, THE NRECA RETIR		
	PLAN, WHICH IS DEFINED BENEFIT PENSION PLAN AND IS EXEMP		
		ON PLAN, WHI	
	IS A DEFINED CONTRIBUTION PENSION PLAN AND IS EXEMPT FRO		
	UNDER IRS SECTION 501. THESE TWO PLANS SERVE MORE THAN 6		<u> </u>
	AND RETIRED EMPLOYEES OF MOST NRECA MEMBERS. THE THIRD P		
	NRECA GROUP BENEFIT PROGRAM, WHICH PROVIDES MEDICAL, DEN	TAL, VISION,	,
	DISABILITY, LIFE, TRAVEL, AND ACCIDENT INSURANCE TO MOST	NRECA MEMBE	ERS.
	THIS PLAN IS EXEMPT FROM INCOME TAX UNDER IRS SECTION 50		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$	1	
4e	Total program service expenses		
10	Total program do no expensed P	Earm OC	90 (2016)
		1 ((11) 00	~ (C(((())

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NATIONAL RURAL ELECTRIC Form 990 (2016) COOPERATIVE ASSOCIATION Part 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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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	x	
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	Х	
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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		х
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9	х	
40	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	3		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	- 10	163	15.5
	as applicable.			
я	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	7.12		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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 167 If "Yes," complete Schedule D, Part IX	11đ	X	
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			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			77
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			Х
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		Х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	i	47
18		18		Х
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
פו	complete Schedule G, Part III	19		Х
	Complete Controller of Factor	10	اسيسيا	

53-0116145

NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION

Page 4 Part IV | Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Х Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24h c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete 25b 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," X complete Schedule L, Part II 26 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 Х 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 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 Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Х 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Χ Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X Part V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Х 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity Х within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 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 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Form 990 (2016)

37

X

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

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

	MATIONAL KORAL ELECTRIC					
	1 990 (2016) COOPERATIVE ASSOCIATION		53-0116	145	5 F	age
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	ta	447		Algeria	
b			0			
С			ble gaming			
	(gambling) winnings to prize winners?			10		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			311	10000	
	filed for the calendar year ending with or within the year covered by this return	2a	856			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax reti			2b	Х	
~	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					
3a				За	Х	1
				3b	X	+
b				่อท	 -	
48	At any time during the calendar year, did the organization have an interest in, or a signature or other		=	١		X
	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	it)?	4a	400434	^
Ö	If "Yes," enter the name of the foreign country:		777 A F)			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			15/13/30 	1940	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans			5b	ļ	X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		ļ
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	he orga	nization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions or	gifts	-		
	were not tax deductible?			6b		<u>L</u>
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices pr	ovided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas requ	iired			
	to file Form 8282?			7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			. New York	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contract	?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		·	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by the		300	THE.	10000
	sponsoring organization have excess business holdings at any time during the year?	,		8		
9	Sponsoring organizations maintaining donor advised funds.			1900	4004	1883
	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	••••••		Yallani	141416	1000000
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		120370		
11	Section 501(c)(12) organizations. Enter:	100				
	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	110				
b		445				
40-	amounts due or received from them.)	11b		40-	an fed	TO SERVE
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	ļ	12a	47,544	- Paragraph
	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.		·	.es#888	Astigação	ani(60)
а	Is the organization licensed to issue qualified health plans in more than one state?	• • • • • • • • • • • • • • • • • • • •		13a	98(8946	Harana
	Note. See the instructions for additional information the organization must report on Schedule O.					
	Enter the amount of reserves the organization is required to maintain by the states in which the	I I		N. S.		
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c			4,000	**
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X

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

age 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sa	crieck is Schedule O contains a response or note to any line in this Part vi		***************************************				Δ				
361	ction A. Governing Body and Management					TV-2	No				
4.	Enter the number of voting members of the governing body at the end of the tax year	1a	I	47	100.5%	Yes	No				
16	If there are material differences in voting rights among members of the governing body, or if the governing	la		<u> </u>							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.										
		١.,		47							
	Enter the number of voting members included in line 1a, above, who are independent	<u>lb</u>	<u> </u>	4/							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	-	-		EMB						
	officer, director, trustee, or key employee?				2	X					
3	Did the organization delegate control over management duties customarily performed by or under the		-								
	of officers, directors, or trustees, or key employees to a management company or other person?				3	ــــــ	Х				
4	Did the organization make any significant changes to its governing documents since the prior Form				4		X				
5 Did the organization become aware during the year of a significant diversion of the organization's assets?											
6 Did the organization have members or stockholders?											
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	i							
	more members of the governing body?				7a	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s										
	persons other than the governing body?				7b	Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye			·····	114 154		300				
а	The governing body?	-	_		8a	Х					
b	Each committee with authority to act on behalf of the governing body?				8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R				<u>Y</u>	<u> </u>					
	The state of the s	0101101				Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			Γ	10a	103	X				
	If "Yes," did the organization have written policies and procedures governing the activities of such of			····· }	TOU	\vdash					
~	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b						
112	Has the organization provided a complete copy of this Form 990 to all members of its governing bod				11a	Х					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	y Delo	re ming the torn	''' }	ı ıa	36 655	434				
12a	Did the against in house quitter and est of interest of interest of 100				12a	x	787475				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	X					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y			···· }	IZD						
С					40.	x					
10	in Schedule O how this was done			···· }	12c	X					
13	Did the organization have a written whistleblower policy?				13	X					
14	Did the organization have a written document retention and destruction policy?			····	14	A	-47:127:4				
15	Did the process for determining compensation of the following persons include a review and approve	al by in	dependent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1	1935	1000	2000				
a	The organization's CEO, Executive Director, or top management official			}	15a	X					
d	Other officers or key employees of the organization			ļ	15b	Х	204(127)				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent w	ith a		WENE	PEAS					
	taxable entity during the year?				16a	de state oc	X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	,	•								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					1335					
_	exempt status with respect to such arrangements?	*******	,		16b						
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►VA										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Secti	on 501(c)(3)s o:	າly) aາ	ailab	le					
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain	in Sch	edule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, cor	ıflict o	interest policy	and	financ	ial					
	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 boo	oks an	d records: 📂								
	VENEICIA LOCKHART - (703)907-5960		-								
	4301 WILSON BLVD FIN8-110, ARLINGTON, VA 22203-18	60									

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, 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 (A)		org:	anıza			mpe	nsa			(E)
(A) Name and Title	(B) Average		not c	Pos	C) itior	3		(D) Reportable	(E) Reportable	(F) Estimated
Name and the	hours per	(do	not c	heck ss ne	more	than	one h an	compensation	compensation	amount of
	week	offi	cer ar	nd a d	irecto	or/trus	tee)	from	from related	other
	(list any	gg						the	organizations	compensation
	hours for	trustee or director				屋		organization	(W-2/1099-MISC)	from the
	related	stee	ruste	1	83	beusa		(W-2/1099-MISC)		organization
	organizations below	温井	fonal		ploye	25 85 12 85 12 85 13 15 15 15 15 15 15 15 15 15 15 15 15 15				and related organizations
	line)	Individual	institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) MEL COLEMAN	24.00	=			<u>x</u>	1-0			-2-79	
PRESIDENT		х		х				95,600.	0.	0.
(2) PHIL CARSON	17.00	Т				Т				
VICE PRESIDENT		X		Х				89,500.	0.	0.
(3) CURTIS WYNN	17.00	Г								
SECRETARY-TREASURER		Х		Х				80,550.	0.	0.
(4) ANTHONY ANDERSON	4.00									
DIRECTOR		Х						29,950.	0.	0.
(5) LAWRENCE BECKER	10.60									
DIRECTOR		Х						25,000.	0.	0.
(6) MARK BROWN	0.30									_
DIRECTOR	0.10	Х						0.	0.	0.
(7) BRYAN CASE	3.00							4		•
DIRECTOR		X	Ш	_				15,300.	0.	0.
(8) CHRIS CHRISTENSEN	5.00							00 000	ا ،	
DIRECTOR	0.00	Х		_				29,300.	0.	0.
(9) KENNETH COLBURN	9.00	,,						01 600		0
DIRECTOR	1 00	Х		_				21,600.	0.	0.
(10) MICHAEL CROSS	1.00	х		- 1				9,000.	о.	0.
DIRECTOR (11) MICHELLE DAVIA	4.00	Δ		\dashv				9,000.	U •	0.
DIRECTOR	4.00	х						24,550.	0.	0.
(12) MARION DENGER	20.00	4	\dashv					24,330.		0.
DIRECTOR	20.00	х						20,800.	0.	0.
(13) KEVIN DODDRIDGE	1.00		\dashv	┪	-	_		20,000.	0.	0.
DIRECTOR	1.00	х						15,300.	0.	0.
(14) DANIEL DYER	3.00			\dashv	\dashv	\dashv		1370001		
DIRECTOR		х						9,050.	0.	9,600.
(15) ROY FRIEDERSDORF	4.60			-	\dashv	一	\dashv	-,-50		-,
DIRECTOR	0.40	x	}					25,850.	0.	0.
(16) SANDRA GREEN	3.60			\dashv		\neg				
DIRECTOR	0.40	X						21,600.	0.	0.
(17) SCOTT HALLOWELL	5.00			_	一		\neg			
DIRECTOR		X						22,950.	0.	0.

632007 11-11-16

COOPERATIVE ASSOCIATION 53-0116145 Form 990 (2016) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one box, unless person is both an hours per compensation compensation amount of week officer and a director/trustee) from from related other (list any the organizations compensation Individual trustes or director (W-2/1099-MISC) hours for organization from the related Institutional trustee (W-2/1099-MISC) organization organizations and related (ey employee below organizations line) (18) CHRISTOPHER HAMON 9.00 DIRECTOR X 18,900 0 0. (19) WILLIAM HART 8.00 DIRECTOR 0. 33,150 0. (20) MARK HOFER 5.60 DIRECTOR 0.40 x 24,550 0. 0. 6.00 (21) DAVID IHA 27,700. 0 DIRECTOR Х 0. 6.00 (22) LYNN JACOBSON 5,400. DIRECTOR 16,800. 0. (23) KERRY KELTON 11.60 0.40 DIRECTOR Х 51,000 0. 0. (24) MEERA KOHLER 10.60 DIRECTOR 0.40 X 41,750 0 0. 5.00 (25) THOMAS MADSEN 7,800. 0. 14,050. DIRECTOR 5.00(26) JOSEPH MARTIN DIRECTOR 0 20,700. 0. 778,250. 0 29,050. 10,072,714. 933,905. 2,482,860. c Total from continuation sheets to Part VII, Section A 10,850,964. 933,905. 2 511 910. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 379 compensation from the organization Yes No

			100	110
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on			WAR
	line 1a? If "Yes," complete Schedule J for such individual	3	Х	<u></u>
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization	45.00		NAME:
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	L
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services	15/30		
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from

the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CROWELL & MORING LLP, 1001 PENNSYLVANIA		
AVE NW, WASHINGTON, DC 20004	LEGAL SERVICES	1,207,524.
ASGK PUBLIC STRATEGIES LLC, 222 W MERCH		
MART PLZ, STE 2400, CHICAGO, IL 60654	CONSULTING SERVICES	977,682.
HUGE LLC		
45 MAIN ST, STE 200, BROOKLYN, NY 11201	IT RELATED SERVICES	621,484.
CORESITE LP		
1050 17TH ST, STE 8, DENVER, CO 80266	COMPUTER SERVICES	591,530.
HUNTON & WILLIAMS LLP		
1900 K STREET NW, WASHINGTON, DC 20006	LEGAL SERVICES	586,859.
2 Total number of independent contractors (including but not limited to those liste \$100,000 of compensation from the organization \$3.9		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2016)

Form	990

Form 990 COOPERAT	T 4 T 1100								53-011	<u> </u>
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mpl	oyee	s, a	nd I	High	est	Compensated Employ	rees (continued)	
(A)	(B)	Г			C)			(D)	(E)	(F)
Name and title	Average			Pos	-	1		Reportable	Reportable	Estimated
	hours	(c	hecl	c all t	that	app	oly)	compensation	compensation	amount of
	per		Π					from	from related	other
	week	١				loyee		the	organizations	compensation
	(list any hours for	frect				dim		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	90.0	stee			sate		(W-2/1033-WIGO)		and related
	organizations	treste	al tru:		ye.	mpe				organizations
	below	ndividual trustee or director	nstitutional trustee	<u>ئ</u> ة	Key employee	Highest compensated employee	聲			_
	line)	듈	Insti	Officer	Key	훈	Former			
(27) THOMAS MCQUISTON	8.00									
DIRECTOR		X						34,750.	0.	0
(28) GALEN MILLS	6.00	П								
DIRECTOR		X						17,200.	0.	12,050
(29) JESSICA NELSON	7.00									
DIRECTOR		Х						18,250.	0.	0
(30) WILLIAM NOEL	6.00	Г								
DIRECTOR		X						18,000.	0.	0
(31) CURTIS NOLAN	6.60									
DIRECTOR	0.40	Х						25,200.	0.	0
(32) RANDY PAPENHAUSEN	6.00	Г								
DIRECTOR		Х						17,350.	0.	0
(33) MICHAEL PETERSON	4.00									
DIRECTOR		х						11,700.	0.	0
(34) GARY POTTER	5.00									
DIRECTOR		Х						23,650.	0.	0
(35) TOM PURKEY	5.00									
DIRECTOR		X	i					17,100.	0.	0
(36) REUBEN RITTHALER	5.00									
DIRECTOR		X			[38,150.	0.	0
(37) LANNY RODGERS	7.00									
DIRECTOR		Х						12,450.	0.	18,000
(38) KEITH ROSS	6.00									
DIRECTOR		Х						22,150.	0.	0
(39) RONALD SCHWARTAU	8.60				- 1					
DIRECTOR	0.40	X						23,075.	0.	11,875
(40) CHARLES SHORT	4.60									
DIRECTOR	0.40	X						32,900.	0.	0
(41) KELLEY SMITH	5.00		l							_
DIRECTOR		Х						22,750.	0.	0
(42) TIMOTHY SMITH	6.00							,	_	_
DIRECTOR		Х		_		[0.	0.	0
43) DAVID SPRADLIN	6.00			- 1		ļ				-
DIRECTOR	0.05	Х						23,650.	0.	0
(44) STEVEN WALTER	9.00			- [_
DIRECTOR	1.00	X						33,100.	0.	0
45) GREG WHITE	7.00		[25 25		-
DIRECTOR	2 22	X			_ļ	_	_	26,350.	0.	0
(46) MICHAEL WILLIAMS	3.00 1.00							17,100.		^
DIRECTOR						- 1		2 12 7 11 11	0.	0 .

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)	Π		(C				(D)	(F)		
Name and title	Average			Posi				Reportable	Reportable	Estimated	
	hours	(c	hecl	call t	nat a	app	oly)	compensation	compensation	amount of	
	per				П		Τ	from	from related	other	
	week	Ļ				loyee		the	organizations	compensation	
	(list any	or director				emp		organization	(W-2/1099-MISC)	from the	
	hours for related		te es			sated		(W-2/1099-MISC)		organization and related	
	organizations	ruste	1 trus		æ	mpen				organizations	
	below	Individual trustee	ttona		[]	st co				Organizations	
	line)	lagiv.	Institutional trustee	Officer	Key employee	Highest compensated employee	Ъппет				
(47) BRYAN WOLFE	20.60	-			+						
DIRECTOR		x						30,100.	0.	0.	
(48) JEFFREY CONNOR	51.80				\exists		l				
INTERIM CEO AND COO	1.20			X	- 1			511,592.	0.	76,415.	
(49) VENEICIA LOCKHART	45.80				\neg						
ASST TREAS; SR. VP, FINANCE	1.20			X				355,441.	0.	191,148.	
(50) JIM MATHESON	45.00										
CHIEF EXECUTIVE OFFICER	1.00			X	\perp			580,647.	0.	18,333.	
(51) JAMES BAUSELL	55.00										
SR. VP, COMMUNICATIONS					X			453,980.	0.	32,227.	
(52) PETER BAXTER	58.00	i						F00 F00		100 405	
SR. VP, INSURANCE & FINANCIAL SERVIC	1 00			_	X.			529,529.	0.	180,435.	
(53) MARC BRESLAW	1.00				_			004 000	•	04 005	
EXEC DIRECTOR, INT'L FOUNDATION	47.00	_	_		X			201,283.	0.	31,027.	
(54) KIRK JOHNSON	61.00			1.	,			265 006	0	107 004	
SR. VP, GOVERNMENT RELATIONS	40 00	\dashv	\dashv	<u> </u>	X			365,996.	0.	127,984.	
(55) MARTIN LOWERY	40.00				x			E0E 004	0.	110 002	
EXEC. VP, MEMBER & ASSOC. RELATIONS (56) MARY MCLAURY	42.00	-	\dashv		^┼			585,994.	<u> </u>	110,993.	
COO. TOUCHSTONE ENERGY	42.00				x l			247,966.	0.	91,611.	
(57) RICHARD MEYER	45.00	\dashv	\dashv	+	1			Z47,300 •	V •	91,011.	
SR. VP, GENERAL COUNSEL	43.00			- [.	x			356,332.	0.	131,833.	
(58) MARY PAT PARIS	45.00		-	+	-			330,334.	V •	TOT,000.	
VP ADMINISTRATION	45.00				x			222,714.	0.	73,189.	
(59) MICHELLE RINN	47.00			+	+		\dashv	222,723	0.	13,103.	
SR. VP HUMAN RESOURCES	1,100			- [-	X.			167,320.	0.	61,418.	
(60) SHAARA ROMAN	41.00	\dashv	\dashv	+	+	\dashv	\dashv	20113201		02,410.	
SR. VP, HUMAN RESOURCES					X]	222,990.	0.	60,988.	
(61) DANIELLE SIEVERLING	53.00	\dashv	\dashv	+	+			444,75501		00,300.	
CHIEF RISK AND COMPLIANCE OFFICER	3377			1:	χ			304,804.	0.	79,311.	
(62) JIM SPIERS	40.00	1	_	1		\dashv					
VP, BUSINESS AND TECH. STRATEGIES				2	ζ			358,958.	0.	86,854.	
(63) TOM STANGROOM	49.00	寸	1	1	+		7	, ,			
SR. VP & CIO					ζ	ı		410,587.	0.	194,722.	
(64) TRACEY STEINER	51.00	\dashv	寸	\top	1	7	\neg				
SR. VP, EDUCATION & TRAINING					ζ			290,977.	0.	139,745.	
(65) ROBERT DOUGAN	41.00				\top						
SR. DIRECTOR, RETIREMENT PROJECTS					2	x		363,394.	0.	110,844.	
(66) PATRICIA FENZEL	43.00	\dashv			\top	7					
SR. PRINCIPAL, IT PROJECT MANAGER					2	X		336,188.	0.	77,224.	
Total to Part VII, Section A, line 1c											

Form 990

Form 990 COOPERAT		53-0116145								
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)	Ī		(6	C)			(D)	(E)	(F)
Name and title	Average hours	Position (check all that apply)						Reportable compensation	Reportable compensation	Estimated amount of
	per	16	Tieci	T an	Па	l ahr	ינעיי ר	from	from related organizations	other
	week			l		yee.		the		compensation
	(list any	ector				Sa wa		organization	(W-2/1099-MISC)	from the
	hours for	or di	88			sated		(W-2/1099-MISC)	İ	organization and related
	related organizations	ruste	art la		<u>ag</u>	lager Hader				organizations
	below	Individual trustee or director	Institutional trustee	<u>_</u>	Key employee	Highest compensated employee	뉼			
	line)	ğ	hst	Officer	Key	흎	Former			
(67) STEVE SANKER	66.00									
VP, IF&S RELATIONSHIP MGT.		<u> </u>				X		407,196.	0.	79,638.
(68) MONICA SCHMIDT	47.00									
VP, NATIONAL CONSULTING GROUP	10.00					X		287,870.	0.	127,504.
(69) JOHN SZCZUR	40.00							607 150	_	140 005
VP, INVESTMENT STRAT, & PERF.	0.00	ļ		_	<u> </u>	X	<u> </u>	697,152.	0.	143,885.
(70) JO ANN EMERSON	0.00	ļ					х	1 221 026	0.	60 004
FORMER CHIEF EXECUTIVE OFF (71) PATRICK GIOFFRE	0.00	-			-		^	1,231,026.	0.	69,994.
FORMER EXEC VP, INTERNAL SERVICES	0.00	ł					Х	117,803.	0.	0.
(72) STEPHEN KASZYNSKI	51.00	 						117,0000	3.0	
FORMER CEO, HOMESTEAD FUNDS							х	0.	933,905.	143,613.
•									-	
				Ì						
									:	
				-						
									İ	
										-
FOR 12										
			4	_						
			ı							
				-	\dashv	\dashv	—			
				l						
-	_		\dashv				\dashv			
			Ī							
Total to Part VII, Section A, line 1c								10,072,714.	933,9052	,482,860.
								, - ,	,	

COOPERATIVE ASSOCIATION 53-0116145 Form 990 (2016) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (B) (C) Total revenue Related or Unrelated exempt function business revenue revenue Contributions, Giffs, Grants and Other Similar Amounts 1 a Federated campaigns b Membership dues 1b Fundralsing events 1c d Related organizations 1d 2,222,312. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noneash contributions included in lines 1a-1f: \$ h Total. Add lines 1a-1f 2,222,312 Business Code 2 a REIMBURSED COSTS 524292 103,742,645 Program Service 103,742,645 MEMBERSHIP DUES 900099 31,513,567, 31,513,567 9,958,279 TRAINING & PROFESSIONAL SERVICES 541900 6,619,758 3,338,521 ADVERTISING INCOME 511120 1,882,571 1,882,571 SUBSCRIPTION INCOME 511120 1,083,121 1,083,121, 900099 12,142,109 10,965,134. 1,176,975 All other program service revenue 160,322,292 Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 178,981 178,981 Income from investment of tax-exempt bond proceeds 88,139 752,217 664.078 Royalties 5 (i) Real (ii) Personal 6 a Gross rents 13,211,145 7,335,452 b Less: rental expenses 5 875 693 c Rental income or (loss) 5,875,693. 5,875,693 d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a MEETINGS & CONFERENCES 541900 9,442,682, 9,442,682 All other revenue

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Form **990** (2016)

7.062.145

9,442,682

178,794,177,

Total. Add lines 11a-11d

Total revenue. See instructions.

169,509,720

Form 990 (2016) COOPERATIVE A

	Statement of Functional Expens				1 1 10 101 1
Sec	tion 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respo not Include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	nse or note to any line ir (A) Total expenses	this Part IX(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		САРСИЗСЗ	gonia expones	
	and domestic governments. See Part IV, line 21				
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	Benefits paid to or for members				
5	Compensation of current officers, directors,	10 001 005			
	trustees, and key employees	10,881,025.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	69,367,579.			
7	Other salaries and wages Pension plan accruals and contributions (include	05,307,375			
8	section 401(k) and 403(b) employer contributions)	18,162,830.			
9	Other employee benefits	10,266,208.			
10	Payroll taxes	5,272,887.			
11	Fees for services (non-employees):	37272744.4			
a	Management	184,065.			
b	Legal	2,414,868.			
C	Accounting	131,541.			
d		572,289.			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses ол Sch O.)	14,896,631.			
12	Advertising and promotion	481,245.			
13	Office expenses	3,862,991.			
14	Information technology	1,796,949.			
15	Royalties	0 260 770			
16	Occupancy	2,368,770.			
17	Travel	6,010,935.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	6,167,680.			
19	Conferences, conventions, and meetings	0,107,000.			
20	Interest Payments to affiliates				
21 22	Depreciation, depletion, and amortization	6,288,862.			
23	Insurance	445,295.			
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.)				
а	UBIT	486,512.			
b	EQUIPMENT MAINTENANCE	3,700,609.			
С	CONTRACTED PERSONNEL	1,846,835.			
d	ELECTRONIC SUBSCRIPTION	1,562,414.			
е	All other expenses	13,762,949.			
25		180,931,969.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Par	tΧ	Balance Sheet					
		Check if Schedule O contains a response or not	e to a	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				11	
	2	Savings and temporary cash investments			22,059,388.	2	16,863,976.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			31,602,376.	4	35,027,613.
i	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compense Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	fied pe	ersons (as defined under		(3)	
l		section 4958(f)(1)), persons described in section	4958	(c)(3)(B), and contributing			
- 1		employers and sponsoring organizations of sect					
S		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	-			7	
₹	8	Inventories for sale or use			41,467.	8	39,673.
	9	Duan aid assesses and defensed about			4,428,292.		5,520,917.
		Land, buildings, and equipment: cost or other				3,575	
		basis. Complete Part VI of Schedule D	10a	157,967,244.			
	h	Less: accumulated depreciation	10b	157,967,244. 69,756,915.	87,740,386.	10c	88,210,329.
	11	Investments · publicly traded securities			143,762.	11	
	12	Investments - other securities. See Part IV, line 1			21,022,312.	12	13,334,179.
	13	Investments - program-related. See Part IV, line			ME, OLL, OLL,	13	20,001,2,00
i i	14					14	
- 1	15	Intangible assets Other assets. See Part IV, line 11			12,666,666.	15	12,490,470.
	16	Total assets. Add lines 1 through 15 (must equa			179,704,649.	16	187,608,149.
	17	Accounts payable and accrued expenses			21,982,661.	17	19,795,839.
	18	Grants payable			12,502,002	18	25,750,0050
- 1	19				36,822,690.	19	44,559,734.
	20	Deferred revenue			30,022,030	20	12/005/1021
	21	Escrow or custodial account liability. Complete F		of Cabadula D	370,139.	21	355,630.
F	22	Loans and other payables to current and former				21	
ĕ	22	key employees, highest compensated employee					
Liabilities		0 11 5 18 10 1 11 1				00	
<u>.</u> 2	23	Secured mortgages and notes payable to unrela				22 23	
- 1	23 24	Unsecured notes and loans payable to unrelated				24	<u>"</u>
1	2 4 25	Other liabilities (including federal income tax, pay				24	
	20	parties, and other liabilities not included on lines					
		0.1.1.5			33,270,737.	25	33,767,033.
	26	Schedule D Total liabilities. Add lines 17 through 25				26	98,478,236.
+	20	Organizations that follow SFAS 117 (ASC 958)			JAJTTOJAAT	20	50,470,250.
,,		complete lines 27 through 29, and lines 33 and		k nere			
ĕ,	07						
ᇣ [27 00	Unrestricted net assets				27	
		Temporarily restricted net assets				28	
<u> </u>		Permanently restricted net assets Organizations that do not follow SFAS 117 (AS		N shook hove N X		29	
ř		and complete lines 30 through 34.	U 900	o), Check here			
9					0	00	
is		Capital stock or trust principal, or current funds			0.	30	0.
₹ }		Paid-in or capital surplus, or land, building, or equ			87,258,422.	31	89,129,913.
۶ I		Retained earnings, endowment, accumulated inc			87,258,422.	32	89,129,913.
		Total net assets or fund balances			179,704,649.	33	187,608,149.
:	34	Total liabilities and net assets/fund balances	******		117,104,047.	34	Form 990 (2016)

NATIONAL RURAL ELECTRIC

53-0116145 Page 12 COOPERATIVE ASSOCIATION Form 990 (2016) Part XI Reconciliation of Net Assets X Check if Schedule O contains a response or note to any line in this Part XI 178,794,177. 1 Total revenue (must equal Part VIII, column (A), line 12) 180,931,969. 2 Total expenses (must equal Part IX, column (A), line 25) 2 -2,137,792. Revenue less expenses. Subtract line 2 from line 1 3 3 87,258,422. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 Net unrealized gains (losses) on investments 5 5 6 Donated services and use of facilities 6 7 Investment expenses 8 8 Prior period adjustments 4,009,283. Other changes in net assets or fund balances (explain in Schedule O) 9 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, 89,129,913. 10 Part XII Financial Statements and Reporting X Check if Schedule O contains a response or note to any line in this Part XII No 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. X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 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: Consolidated basis Both consolidated and separate basis Separate basis X b Were the organization's financial statements audited by an independent accountant? 2b 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: X Consolidated basis Both consolidated and separate basis Separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

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

Form 990 (2016)

За

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

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

Tax) (see separate instructions), then	ı			
 Section 501(c)(4), (5), or (6) organiza 				
	AL RURAL ELECTRIC		Empl	loyer identification number
	ATIVE ASSOCIATION			53-0116145
Part I-A Complete if the or	ganization is exempt und	er section 501(c)	or is a section 527 o	rganization.
 Provide a description of the organi Political campaign activity expendi Volunteer hours for political campa 	itures			50,800.
Part I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).	
1 Enter the amount of any excise tax	Incurred by the organization unde	er section 4955	▶\$	
2 Enter the amount of any excise tax	incurred by organization manage	rs under section 4955	▶\$	
3 If the organization incurred a section	on 4955 tax, did it file Form 4720 f	or this year?		Yes No
4a Was a correction made?			***************************************	Yes INo
b If "Yes," describe in Part IV.				1741
Part I-C Complete if the org	•	, ,,		
1 Enter the amount directly expende				50,800.
2 Enter the amount of the filing organ		-		
exempt function activities				
3 Total exempt function expenditures		•		F0 000
line 17b			▶\$	50,800.
4 Did the filing organization file Form				
5 Enter the names, addresses and er				
made payments. For each organize contributions received that were pr				
political action committee (PAC). If		, ,	•	te segregated fulld of a
	,			(a) Amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
	RICHMOND, VA	F4 040F002	15 000	_
	23219 ALBUQUERQUE, NM	54-0495203	15,000.	0.
	ALBUQUERQUE, NM 87108	85-0032555	10,800.	0.
	TALLAHASSEE, FL	05-0032555	10,000.	0.
	32301	59-0683241	15,000.	0.
	TALLAHASSEE, FL	33 0003244	23,0001	· ·
	32301	59-0772903	10,000.	0.
· · · · · · · · · · · · · · · · · · ·				
•]		
	111 1111		1 1118101111111111111111111111111111111	

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

Schedule C (Form 990 or 990-EZ) 2016

LHA

SEE PART IV FOR CONTINUATION

NATIONAL RURAL ELECTRIC

Schedule C (Form 990 or 990-EZ) 2016 Part II-A Complete if the organization of the complete in the organization of the complete in the organization of the complete in the complete in the organization of the complete in	COOPERATIV ganization is ex	E ASSOCIATION SECTION OF THE PROPERTY OF THE P	ON on 501(c)(3) and fi	53-0 led Form 5768 (e	116145 Page 2 lection under
section 501(h)).					
		affiliated group (and list i	in Part IV each affiliate	d group member's nan	ne, address, EIN,
	re of excess lobbyir	ig expenditures). . and "limited control" pr	ovisions apply		
Lim	its on Lobbying Ex			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinio	n (arass roots lobbyina)			
b Total lobbying expenditures to infl					:
c Total lobbying expenditures (add l					
d Other exempt purpose expenditur	es				
 Total exempt purpose expenditure 	es (add lines 1c and	1d)		112 011 1200	
f Lobbying nontaxable amount. Ent	er the amount from	the following table in bo	th columns.		
If the amount on line 1e, column (a)	or (b) is: The le	obbying nontaxable an	nount is:		
Not over \$500,000	20%	of the amount on line 1e),		
Over \$500,000 but not over \$1,00		000 plus 15% of the ex			
Over \$1,000,000 but not over \$1,5		000 plus 10% of the ex			
Over \$1,500,000 but not over \$17		000 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,00	0,000.			
		The state of the s			
g Grassroots nontaxable amount (er					
h Subtract line 1g from line 1a. If zer	•				
i Subtract line 1f from line 1c. If zeroj If there is an amount other than zero					
j If there is an amount other than ze reporting section 4911 tax for this				ſ	Yes No
reporting section 4317 tax for this		veraging Period Under		············	
(Some organizations t	nat made a section		have to complete all	of the five columns b	elow.
	Lobbying Exp	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots celling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures	<u>are en area a la versa la partir de la la la la la la la la la la la la la </u>				

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 2016 COOPERATIVE ASSOCIATION 53-011614 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	{	a)	(1	b)
	e lobbying activity.	Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Ĭ	Other activities?	100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
j	Total. Add lines 1c through 1i				error poster et
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			United to	
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	NEW TENEN			a to take turbers.
n d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	F04(-)	(F)		
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on au i(c)	(o), or se	ection	
	501(c)(6).			Yes	No
				ies	X
1	Were substantially all (90% or more) dues received nondeductible by members?				X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from to TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).			ction	23
Га	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				a S is
	answered "Yes."	110, 01	i (b) i di	L 111 7 13 111	10 0, 10
1	Dues, assessments and similar amounts from members		1	30,513	3,567.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		3000		,,,,,,
_	expenses for which the section 527(f) tax was paid).	oui			
9	Current year		2a	2.750	0,000.
	Carryover from last year			_,_,	,
	Total		2c	2.750	0,000.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				764.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3.				
7	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	y on thous	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	-1,346	5,764.
Par	t IV Supplemental Information		•	<u> </u>	
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part II	-A. lines 1 a	and 2 (see	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.	7,	. ,		
	RT I-A, LINE 1:				
COL	TRIBUTIONS TO STATE POLITICAL PARTY COMMITTEES				
	MANUFACTURE CONTRACTOR				***************************************
PAF	RT I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INF	ORMATI	ON:		
<u>DEI</u>	MOCRATIC PARTY OF VIRGINIA				
919	EAST MAIN STREET, SUITE 2050 RICHMOND, VA 23219				
		Sakadu	la C (Earm	DOU OR DOL	いにてい りかすん

632043 11-10-16

NATIONAL RURAL ELECTRIC 53-0116145 Page 4 Schedule C (Form 990 or 990 EZ) 2016 COOPERATIVE ASSOCIATION Part IV | Supplemental Information (continued) DEMOCRATIC PARTY OF NEW MEXICO 322 ADAMS ST. SE ALBUQUERQUE, NM 87108 REPUBLICAN PARTY OF FLORIDA 420 E JEFFERSON STREET TALLAHASSEE, FL 32301 FLORIDA DEMOCRATIC PARTY 214 S. BRONOUGH ST. TALLAHASSEE, FL 32301

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION

Employer identification number 53-0116145

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.	
		(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 advisors in	writing that the assets held in donor advised fu	ınds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		-
	impermissible private benefit?	***************************************	Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part l	V, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a historical	ly important land area
	Protection of natural habitat	Preservation of a certified I	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	_ 1		2a
b			1 1
С			
d			
	listed in the National Register	•	2d
3	Number of conservation easements modified, transferred, rele		nization during the tax
	year >		-
4	Number of states where property subject to conservation eas	sement is located ➤	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation e	asements during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizati	ion's financial statements that describes the o	rganization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statement a	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi	ibition, education, or research in furtherance o	f public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descrit	oes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under SFAS 11	_	
а	Revenue included on Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2016

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	NATIONA	G RURAL EL	ECTR]	.C					
Sch	edule D (Form 990) 2016 COOPERA!	TIVE ASSOC	ITAI!	N			53-	011614	5 Page 2
Pa	rt III Organizations Maintaining C	ollections of A	rt, Histo	orical T	reasures,	or Othe	r Similar A	ssets(contin	iued)
3	Using the organization's acquisition, accession	n, and other recor	ds, check	any of the	following th	at are a si	gnificant use o	f its collection	n items
	(check all that apply):								
а	Public exhibition	C	1 <u> </u>	oan or exc	change progr	ams			
b	Scholarly research	e	, 🗀 c	ther					
c	Preservation for future generations								
4	Provide a description of the organization's co	llections and expla	in how the	y further	the organizat	ion's exen	npt purpose in	Part XIII.	
5	During the year, did the organization solicit or	receive donations	of art, his	torical trea	asures, or oth	er similar	assets		
	to be sold to raise funds rather than to be ma	intained as part of	the organ	zation's c	ollection?			Yes	No
Pa	rt IV Escrow and Custodial Arrang	jements. Compl	ete if the o	organizatio	on answered	"Yes" on	Form 990, Parl	IV, line 9, or	
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodia	ın or other interme	diary for c	ontributio	ns or other a	ssets not i	ncluded		
	on Form 990, Part X?							Yes	X No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fo	ollowing ta	ble:					
								Amount	
C	Beginning balance						1c		
d	Additions during the year								
е	Distributions during the year						1e	B	
f	Ending balance						1f		
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21, for es	crow or c	ustodial acco	unt liabilit	y?	X Yes	└─ No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.								X
Pa	t V Endowment Funds. Complete if	the organization ar			orm 990, Par	t IV, line 10	D		
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back (d) Three years b	ack (e) Four	years back
1a	Beginning of year balance								
b	Contributions								
c	Net investment earnings, gains, and losses								
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance					i			
2	Provide the estimated percentage of the curre		e (line 1g,	column (a	a)) held as:				
	Board designated or quasi-endowment > _		_%						
	Permanent endowment	%							
c	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c shou								
3a	Are there endowment funds not in the posses	sion of the organiza	ation that	are held a	nd administe	red for the	e organization	г	
	by:								Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations								
b	If "Yes" on line 3a(ii), are the related organization							3b	L
4	Describe in Part XIII the intended uses of the		wment fu	nds.					
Par	t VI Land, Buildings, and Equipme						4.0		
	Complete if the organization answered								
	Description of property	(a) Cost or o			or other (other)	. ,	cumulated eclation	(d) Book	value

▶ 88,210,329. Schedule D (Form 990) 2016

11,916,966.

55,726,413. 8,399,901. 12,167,049.

11,916,966.

88,282,173. 19,131,564.

38,636,541.

32,555,760. 10,731,663.

26,469,492.

1a Land

b Buildings ______
c Leasehold improvements _____

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

53-0116145 Page 3 COOPERATIVE ASSOCIATION Schedule D (Form 990) 2016 Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) Financial derivatives 12,311,637. COST (2) Closely-held equity interests (3) Other 827,307. COST (A) CAPITAL TERM CERTIFICATES COLLATERAL CERTIFICATES OF DEPOSIT 195,235. COST (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) 13,334,179 Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1)(2)(3)(4)(5)(6)(7) (8) (9)Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. Part IX Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value (a) Description (1) PATRONAGE CAPITAL CERTIFICATES 523,495. 10,941,880. DEFERRED COMPENSATION FUND (EMPLOYEES) 355,630. TENANT ESCROW EMPLOYEE AND EXECUTIVE OPTION PURCHASE PLAN 669,465. (4) (5)(6)(7)(8)12,490,470. 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. (b) Book value (a) Description of liability (1) Federal income taxes POST RETIREMENT BENEFITS OTHER

THAN PENSIONS 19,172,495. DEF COMP FUND (EMPLOYEES) 10,941,881. EMPLOYEE & EXEC OPT PLAN 662,989 2,868,237. COOPERATIVE RESEARCH NETWORK FUND (6)121,431 OTHER RESTRICTED FUNDS (7) (8) 33,767,033. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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 🔯

NATIONAL RURAL ELECTRIC

Schedule D (Form 990) 2016 COOPERATIVE ASSOCIATION

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Complete if the organization answered "Yes" on Form 990, Part IV, line		1 1000 533 607
1 Total revenue, gains, and other support per audited financial statements		1 226,533,687.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 !	
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		_
c Recoveries of prior year grants	10 000 000	
d Other (Describe in Part XIII.)	2d 47,739,510	
e Add lines 2a through 2d		_{2e} 47,739,510.
3 Subtract line 2e from line 1		₃ 178,794,177.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	l t	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4b	
c Add lines 4a and 4b		4c 0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 178,794,177.
Part XII Reconciliation of Expenses per Audited Financial Sta		r Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line		1 1004 060 106
Total expenses and losses per audited financial statements		1 224,962,196.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
a Donated services and use of facilities		4
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		2e 44,030,227.
3 Subtract line 2e from line 1		3 180,931,969.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4b	
c Add lines 4a and 4b		4c U.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	***************************************	5 180,931,969.
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any		4; Part X, line 2; Part XI,
PART IV, LINE 2B:		
SECURITY DEPOSITS/ESCROW AMOUNTS ARE HELD	FOR BUILDING TENAL	NTS
		<u></u>
PART X, LINE 2:		
NRECA ADOPTED THE PROVISIONS OF FASB INTER	PRETATION NO. 48,	ACCOUNTING FOR
UNCERTAINTY IN INCOME TAXES, DURING THE YE	AR ENDING DECEMBER	R 31, 2007.
FOR THE PERIOD FROM NRECA'S INCEPTION TO D	ECEMBER 31, 2016,	NO
UNRECOGNIZED TAX PROVISION OR BENEFIT EXIS	TS.	
DADE UT TIME OF ORIGINA AND THE CONTRACTOR		
PART XI, LINE 2D - OTHER ADJUSTMENTS:		
REV FROM SUBS NOT INCLUDED IN FORM 990 LES	S TENANT EXPENSES	
ON PART VII, 6B		47,739,510.
632054 08-29-16		Schedule D (Form 990) 2016

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.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

53-0116145

Internal Revenue Service Name of the organization

Department of the Treasury

NATIONAL RURAL ELECTRIC

COOPERATIVE ASSOCIATION

Questions Regarding Compensation

Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use ☐ First-class or charter travel X Travel for companions Payments for business use of personal residence X Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (such as, maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 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? 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. X Written employment contract X Compensation committee X Compensation survey or study X Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations 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: a Receive a severance payment or change-of-control payment? X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? X c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? If "Yes" on line 5a or 5b, describe in Part Ill. 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: a The organization? 6b b Any related organization? If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53,4958-6(c)?

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

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

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

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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 V	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	other deferred compensation	Denetits	(a)-(b)(a)	in column (B) reported as deferred on prior Form 990
(1) JEFFREY CONNOR	Θ	379,754.	200.	131,638.	40,349.	36,066.	588,007.	0
INTERIM CEO AND COO	(II)				0	0	•0	0
(2) VENEICIA LOCKHART	Θ	319,316.	30,700.	5,425.	157,991.	33,157.	546,589.	• 0
ASST TREAS; SR. VP, FINANCE	(ii)			• 0		0	0	0
(3) JIM MATHESON	ε	478,166.	100,200.	2,281.	2,323.	16,010.	.086,865	0
CHIEF EXECUTIVE OFFICER	Ξ		• 0			0	0	0
(4) JAMES BAUSELL	(i)	296,76	• 0	157,215.	13,566.	18,661.	486,207.	0
	Ξ					1	0	0
PETER BAXTER	Ξ	468,79	45,200.	15,530.	144,531,	35,904.	709,964.	0
;>	Ξ		0.					• 0
MARC BRESLAW	Ξ	150,21	0	51,064.	9,732.	21,295.	232,310.	• 0
υl	Ξ		0.				0	0
(7) KIRK JOHNSON	Ξ	359,17	200.	6,620.	98'835	29,152.	493,980.	0
12.	Ξ		• 0					0
(8) MARTIN LOWERY	Ξ	496,26	200.	89,526.	81,094.	. 668, 62	. 186,987	0
EXEC. VP, MEMBER & ASSOC. RELATIONS	Ξ		0.					0
	ε	244,25	200.	3,513.	77,683.	13,928.	339,577.	0
COO, TOUCHSTONE ENERGY	Ξ		0		0	• 0	0	0
(10) RICHARD MEYER	Ξ	324,67	200	31,453.	91,384.	40,449.	488,165.	0
SR. VP, GENERAL COUNSEL	Ξ			0.				0
(11) MARY PAT PARIS	Ξ	214,14	6,575.	1,991.	.868,35	16,291.	295,903.	• 0
VP, ADMINISTRATION	€		0	.0	0.			• 0
(12) MICHELLE RINN	Ξ	166,25	200.	866.	40,064.	21,354.	228,738.	0
SR. VP, HUMAN RESOURCES	Ξ		0.			0.	• 0	0
(13) SHAARA ROMAN	Ξ	33,58	0	189,410.	59,740.	1,248.	.83,978	0
SR. VP, HUMAN RESOURCES	▣		0			0.		0
(14) DANIELLE SIEVERLING	Ξ	298,125.	1,000.	5,679.	72,628.	6,683.	384,115.	0
CHIEF RISK AND COMPLIANCE OFFICER	≘							0
) JIM SPIERS	Ξ	307,521.	17,160.	34,277.	59,247.	27,607.	445,812.	0
VP, BUSINESS AND TECH. STRATEGIES	▣	1	0					• 0
TOM	Ξ	398,67	200.	11,715.	159,320.	35,402.	.605,309	0.
SR. VP & CIO	冟	0	0	0	0	0.	• 0	0.

Schedule J (Form 990) 2016

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Schedule J (Form 990) 2016

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	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	other deferred compensation	benefits	(B)(l)-(D)	in column (B) reported as deferred on prior Form 990
			COMPENSATION	compensation				
(17) TRACEY STRINER	(3)	285,455.	200.	5,322.	134,039.	5,706.	430,722.	0
SR. VP, EDUCATION & TRAINING	(ii)		0	ļ		0	0	0.
(18) ROBERT DOUGAN	(i)	217,230.	200.	145,964.	82,222.	28,622.	474,238.	0.
SR. DIRECTOR, RETIREMENT PROJECTS	Œ		0	.0	0	0		0
(19) PATRICIA FENZEL	ε	194,571.	200.	141,417.	61,239.	15,985.	413,412	0
SR. PRINCIPAL, IT PROJECT MANAGER	(ii)		0			1	0	0
(20) STEVE SANKER	Ξ	323,132.	200.	83,864.	51,616.	28,022.		0
VP, IFES RELATIONSHIP MGT.	≘		0	0.	0	0	0	0
(21) MONICA SCHMIDT	ε	283,834.	350.	3,686.	102,981.	24,523.	415,374.	0
VP, NATIONAL CONSULTING GROUP	(II)						0.	0
(22) JOHN SZCZUR	Θ	349,095.	265,475.	82,582.	108,853.	35,032.	841,037.	• 0
VP, INVESTMENT STRAT. & PERF.	(ii)	• 0	0	0	0	0	0	0
(23) JO ANN EMERSON	€	7,652.	0	1,223,374.	67,239.	2,755.	1,301,020.	0
FORMER CHIEF EXECUTIVE OFF	(ii)	• 0	0	0	0	0		0
(24) PATRICK GIOFFRE	(i)	• 0	• 0	117,803.	0.	0.	117,80	0
FORMER EXEC UP, INTERNAL SERVICES	(II)	0	0	0	0	0		0
(25) STEPHEN KASZYNSKI	(i)	0	0	0	0	0	0	0.
FORMER CEO, HOMESTEAD FUNDS	(ii)	.088,898	523,181.	11,894.	116,287.	27,326.	1,077,518.	0
	Θ							4
	(ii)							
	Ξ							
	Ξ							
	Ξ							
	(ii)							
	(i)							
	(<u>ii</u>)							
	Ξ							
	Ξ							
	€							
	€							
	(E)							

Schedule J (Form 990) 2016

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 I, LINE 1A:
TRAVEL FOR COMPANIONS - ACCORDING TO NRECA BOARD POLICY, THE SPOUSES OF THE
PRESIDENT AND CEO CAN ACCOMPANY THEM ON A TRIP WHEREVER THERE WILL BE
OFFICIAL FUNCTIONS FOR WHICH SPOUSES ARE RESPONSIBLE FOR ATTENDING.
TAX IDENTIFICATION AND GROSS UP PAYMENTS: NRECA GROSSES UP PAYMENTS MADE TO
STAFF UNDER THE EXECUTIVE 401(K) BONUS PLAN AND ON ELIGIBLE RELOCATION
EXPENSES.
PART I, LINES 4A-C:
PART I, LINE 4A: THE FOLLOWING CURRENT AND FORMER EMPLOYEES RECEIVED A
SEVERANCE PAYMENT. THESE AMOUNTS ARE INCLUDED AND REPORTED IN PART II,
COLUMN B(III): MARC BRESLAW (\$47,000); JO ANN EMERSON (\$1,167,000); SHAARA
ROMAN (\$188,983)
PART I, LINE 4B: THE FOLLOWING CURRENT AND FORMER EMPLOYEES RECEIVED
PAYMENTS FROM AN EXECUTIVE NONOUALIFIED RETIREMENT PLAN. THESE AMOUNTS ARE

THESE AMOUNTS ARE PAYMENTS FROM AN EXECUTIVE NONQUALIFIED RETIREMENT PLAN.

INCLUDED AND REPORTED IN PART II, COLUMN B(III): JAMES BAUSELL (\$150,553)

ROBERT DOUGAN (\$142,736); PATRICIA FENZEL (\$138,660); MARTIN LOWERY

Schedule J (Form 990) 2016

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NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION

Schedule J (Form 990) 2016 COOPERATIVE ASSOCIATION	53-0116145	Page 3
Part III Supplemental Information	ı	
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.	this part for any additional information.	
(\$61,744); RICHARD MEYER (\$18,489); STEVE SANKER (\$76,221); JIM SPIERS		
(\$27,220); JOHN SZCZUR (\$75,000)		
PART I, LINE 4C: THE FOLLOWING FORMER EMPLOYEE RECEIVED A PAYMENT ON AN		
EQUITY-BASED COMPENSATION ARRANGEMENT. THESE AMOUNTS ARE INCLUDED AND		
REPORTED IN PART II, COLUMN B(III): PATRICK GIOFFRE (\$117,803)		
	Schedule J (Form 990) 2016	990) 2016

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

OMB No. 1545-0047

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. Open To Public Department of the Treasury ▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990. internal Revenue Service Inspection NATIONAL RURAL ELECTRIC Employer identification number Name of the organization 53-0116145 COOPERATIVE ASSOCIATION Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes Enter the amount of tax incurred by the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$\rightarrow\$\$\$\$\$\$\$\$\$\$\$\$\$ Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (h) Approved by board or (b) Relationship (d) Loan to or (i) Written (a) Name of (c) Purpose (e) Original (f) Balance due (g) In from the agreement? interested person with organization of loan principal amount default? organization? committee? То From Yes No Yes No Yes No Total Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (d) Type of (e) Purpose of (a) Name of interested person (c) Amount of (b) Relationship between assistance assistance assistance interested person and the organization

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

Schedule L (Form 990 or 990-EZ) 2016

Schedule L (Form 990 or 990-EZ) 2016 COOPERATIVE ASSOCIATION

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (b) Relationship between interested (c) Amount of (d) Description of (a) Name of interested person organization's person and the organization transaction transaction revenues? Yes Νо COOPERATING ENERGY SERVICEFOR PROFIT SUBSIDIA 275,501.ADMINISTRAT Х CORPORATION ANFOR SUBSIDIA16,420,055.ROYALTY PAY X RE ADVISERS PROFIT SUBSIDIA14,343,087.ADMINISTRAT X COOPERATING BENEFIT ADMINIFOR PROFIT ELECTRIC COOPERATIVE LIFE FOR PROFIT SUBSIDIA 0.ADMINISTRAT X NRECA UNITED FOR PROFIT SUBSIDIA 25,746.EXPENSE REI X COOPERATING INSURANCE SERVIFOR PROFIT SUBSIDIA 451,509.ADMINISTRAT X 865,753. VARIOUS SER ARKANSAS ELECTRIC COOPERATFOR PROFIT X MEMBER O BASIN ELECTRIC POWER COOPEFOR PROFIT MEMBER 0 920,166. VARIOUS SER Х KAMO POWER FOR PROFIT MEMBER 362,771. VARIOUS SER X SHO-ME POWER FOR PROFIT MEMBER 226,473.VARIOUS SER X Part V Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions). SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: COOPERATING ENERGY SERVICES (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT SUBSIDIARY-2 OFCS AND 1 KEY EE SERVE AS OFCS AND DIRS (C) AMOUNT OF TRANSACTION \$ 275,501. (D) DESCRIPTION OF TRANSACTION: ADMINISTRATIVE SERVICES AGREEMENT (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF INTERESTED PERSON: RE ADVISERS CORPORATION AND RE INVESTMENT CORPORATION (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT SUBSIDIARY- 2 KEY EES AND 1 FRM OFC SERVE AS OFCS AND DIRS

- (C) AMOUNT OF TRANSACTION \$ 16,420,055.
- (D) DESCRIPTION OF TRANSACTION: ROYALTY PAYMENTS AND ADMISTRATIVE

SERVICES AGREEMENT

- (E) SHARING OF ORGANIZATION REVENUES? = NO
- (A) NAME OF PERSON: COOPERATING BENEFIT ADMINISTRATORS
- (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

FOR PROFIT SUBSIDIARY-1 OFFICER AND 1 KEY EMPLOYEE SERVE AS DIRECTORS

Schedule L (Form 990 or 990-EZ) 2016

Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions). (C) AMOUNT OF TRANSACTION \$ 14,343,087. (D) DESCRIPTION OF TRANSACTION: ADMINISTRATIVE SERVICES AGREEMENT (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: ELECTRIC COOPERATIVE LIFE INSURANCE (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT SUBSIDIARY-1 OFFICER SERVES AS A DIRECTOR (C) AMOUNT OF TRANSACTION \$ -0-(D) DESCRIPTION OF TRANSACTION: ADMINISTRATIVE SERVICES AGREEMENT (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: NRECA UNITED (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT SUBSIDIARY-2 OFFICERS AND 1 KEY EE SERVE AS OFCS AND DIRS (C) AMOUNT OF TRANSACTION \$ 25,746. (D) DESCRIPTION OF TRANSACTION: EXPENSE REIMBURSEMENT (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: COOPERATING INSURANCE SERVICES (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT SUBSIDIARY-1 OFFICER SERVES AS A DIRECTOR AMOUNT OF TRANSACTION \$ 451,509. (D) DESCRIPTION OF TRANSACTION: ADMINISTRATIVE SERVICES AGREEMENT SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: ARKANSAS ELECTRIC COOPERATIVE CORPORATION (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT MEMBER OF NRECA WITH SHARED DIRECTOR MEL COLEMAN

Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions). (C) AMOUNT OF TRANSACTION \$ 865,753. (D) DESCRIPTION OF TRANSACTION: VARIOUS SERVICES PROVIDED TO MEMBER (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: BASIN ELECTRIC POWER COOPERATIVE (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT MEMBER OF NRECA WITH SHARED DIRECTOR REUBEN RITTHALER (C) AMOUNT OF TRANSACTION \$ 920,166. (D) DESCRIPTION OF TRANSACTION: VARIOUS SERVICES PROVIDED TO MEMBER (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: KAMO POWER (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT MEMBER OF NRECA WITH SHARED DIRECTOR TIMOTHY SMITH (C) AMOUNT OF TRANSACTION \$ 362,771. (D) DESCRIPTION OF TRANSACTION: VARIOUS SERVICES PROVIDED TO MEMBER SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: SHO-ME POWER (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT MEMBER OF NRECA WITH SHARED DIRECTOR CHRISTOPHER HAMON AMOUNT OF TRANSACTION \$ 226,473. (C) DESCRIPTION OF TRANSACTION: VARIOUS SERVICES PROVIDED TO MEMBER (D) (E) SHARING OF ORGANIZATION REVENUES? = NO (A) NAME OF PERSON: WESTERN FARMERS EC (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: FOR PROFIT MEMBERSHIP WITH SHARED DIRECTOR TIMOTHY SMITH

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).
(C) AMOUNT OF TRANSACTION \$ 575,121.
(D) DESCRIPTION OF TRANSACTION: VARIOUS SERVICES PROVIDED TO MEMBER
(E) SHARING OF ORGANIZATION REVENUES? = NO
SCHEDULE L, PART IV RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION
(A) COOPERATING ENERGY SERVICES
(B) 2 OFFICERS (JEFFREY CONNOR AND VENEICIA LOCKHART) AND 1 KEY
EMPLOYEE (MARTIN LOWERY) SERVE AS OFFICERS AND DIRECTORS.
(A) RE ADVISERS CORPORATION AND RE INVESTMENT CORPORATION
(B) 2 KEY EMPLOYEES (DANIELLE SIEVERLING AND MARTIN LOWERY) AND 1
FORMER OFFICER (STEPHEN KASZYNSKI) SERVE AS OFFICERS AND DIRECTORS
(A) COOPERATING BENEFIT ADMINISTRATORS
(B) 1 OFFICER (VENEICIA LOCKHART) AND 1 KEY EMPLOYEE (PETER BAXTER)
SERVE AS DIRECTORS.
(A) ELECTRIC COOPERATIVE LIFE INSURANCE COMPANY
(B) 1 OFFICER (VENEICIA LOCKHART) SERVES AS A DIRECTOR.
(A) NRECA UNITED
(B) 2 OFFICERS (JEFFREY CONNOR AND VENEICIA LOCKHART) AND 1 KEY
EMPLOYEE (MARTIN LOWERY) SERVE AS OFFICERS AND DIRECTORS.
(A) COOPERATING INSURANCE SERVICES
(B) 1 OFFICER (VENEICIA LOCKHART) SERVES AS A DIRECTOR.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

➤ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION

Employer identification number 53-0116145

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: UTILITIES AND THE CONSUMERS THEY SERVE. NRECA HAS MORE THAN 900 VOTING MEMBERS, A MAJORITY OF WHICH ARE ELECTRIC COOPERATIVES THAT SERVE 42 MILLION CONSUMERS IN 47 STATES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: RURAL ELECTRIFICATION IN THE UNITED STATES OF AMERICA, ITS TERRITORIES AND POSSESSIONS, FOR THE PRIMARY AND MUTUAL BENEFIT OF THE MEMBERS OF THE ASSOCIATION AND THEIR CONSUMER MEMBERS. NRECA'S MISSION IS TO PROMOTE, SUPPORT AND PROTECT THE COMMUNITY AND BUSINESS INTERESTS OF ELECTRIC COOPERATIVES.

FORM 990, PART VI, SECTION A, LINE 2:

BUSINESS RELATIONSHIPS EXIST BETWEEN SOME NRECA OFFICERS AND KEY EMPLOYEES WHO ALSO SERVE AS DIRECTORS OR OFFICERS OF THE FOLLOWING NRECA SUBSIDIARIES AND AFFILIATED ENTITIES: NRECA UNITED; COOPERATING ENERGY SERVICES; RE ADVISERS CORPORATION; RE INVESTMENT CORPORATION; COOPERATING BENEFIT ADMINISTRATORS; ELECTRIC COOPERATIVE LIFE INSURANCE COMPANY; AND COOPERATING INSURANCE SERVICES. REFER TO SCHEDULE L, PART V FOR IDENTIFIED PERSONS.

FORM 990, PART VI, SECTION A, LINE 6:

ALL NRECA VOTING MEMBERS MUST BE ENTITIES WHOSE OPERATIONS ARE CONSISTENT, AS DETERMINED BY THE BOARD OF DIRECTORS, WITH THE INTERNATIONAL COOPERATIVE ALLIANCE COOPERATIVE PRINCIPLES AND THE OBJECTIVES OF NRECA AND FALL INTO

ONE OF THE FOLLOWING THREE CATEGORIES: (1) DISTRIBUTION (ELECTRIC

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

Schedule O (Form 990 or 990-EZ) (2016)

DISTRIBUTION COOPERATIVES OR NONPROFIT ASSOCIATIONS, NONPROFIT

CORPORATIONS, PUBLIC UTILITY DISTRICTS, OR GOVERNMENT CORPORATIONS OR

AUTHORITIES LOCATED IN A STATE, TERRITORY, POSSESSION OR COMMONWEALTH OF

THE U.S. AND PRIMARILY ENGAGED IN FURNISHING ELECTRICITY AT RETAIL TO THEIR

CONSUMERS); (2) GENERATION AND TRANSMISSION (COOPERATIVES OR NONPROFIT

ASSOCIATIONS, NONPROFIT CORPORATIONS, OR PUBLIC UTILITY DISTRICTS LOCATED

IN A STATE, TERRITORY, POSSESSION OR COMMONWEALTH OF THE U.S. AND PRIMARILY

ENGAGED IN THE MARKETING, GENERATION AND/OR TRANSMISSION OF WHOLESALE BULK

ELECTRICITY FOR SALE TO OTHERS FOR THE PURPOSE OF RESALE); AND (3) SERVICE

MEMBERS (ORGANIZATIONS NOT ACTUALLY ENGAGED IN THE MARKETING, GENERATION,

TRANSMISSION OR DISTRIBUTION OF ELECTRICITY, BUT A SIGNIFICANT NUMBER OF

WHOSE VOTING MEMBERS CONSIST OF NRECA DISTRIBUTION, OR GENERATION AND

FORM 990, PART VI, SECTION A, LINE 7A:

THE NRECA BOARD OF DIRECTORS IS COMPOSED OF 47 PERSONS, ONE FROM EACH STATE WHERE THERE IS AN OPERATING ELECTRIC SYSTEM WITH MEMBERSHIP IN NRECA.

DIRECTORS, EACH OF WHOM MUST BE A MEMBER, DIRECTOR, OFFICER, OR EMPLOYEE OF AN NRECA MEMBER SYSTEM, ARE ELECTED EVERY TWO YEARS BY THE MEMBER SYSTEMS

IN EACH STATE. THEIR TERMS RUN FROM THE CLOSE OF EACH NRECA ANNUAL MEETING (USUALLY HELD IN MARCH) TO THE CLOSE OF THE ANNUAL MEETING TWO YEARS HENCE. THE NRECA PRESIDENT, VICE PRESIDENT, AND SECRETARY TREASURER ARE ELECTED EVERY TWO YEARS BY THE BOARD FROM AMONG ITS MEMBERS. THE CHIEF EXECUTIVE OFFICER IS ALSO SELECTED BY THE BOARD.

FORM 990, PART VI, SECTION A, LINE 7B:

NRECA VOTING MEMBERS ARE DESCRIBED IN THE SCHEDULE O, PART VI, SECTION A,

LINE 6 DESCRIPTION. THE FOLLOWING GOVERNANCE DECISIONS REQUIRE THE APPROVAL
632212 08-26-16 Schedule O (Form 990 or 990-EZ) (2016)

Employer identification number 53-0116145

OF NRECA VOTING MEMBERS: (1) ARTICLES OF INCORPORATION AMENDMENTS; (2)

BYLAW ADOPTION, AMENDMENT, OR REPEAL, WHICH INCLUDES CHANGES TO THE METHODS

OF CALCULATING THE DUES OF DISTRIBUTION MEMBERS, OF GENERATION AND

TRANSMISSION MEMBERS, AND OF STATEWIDE MEMBERS; (3) EXPULSION OF NRECA

MEMBERS; (4) REMOVAL OF A NRECA DIRECTOR IS SUBJECT TO THE APPROVAL OF

NRECA VOTING MEMBER LOCATED IN THE STATE FROM WHICH THE DIRECTOR WAS

ELECTED; (5) A SALE, LEASE, EXCHANGE, OR CERTAIN DISPOSITIONS OF ASSETS

LEAVING THE ASSOCIATION WITHOUT A SIGNIFICANT CONTINUING BUSINESS ACTIVITY;

(6) MERGER; (7) DOMESTICATION IN A FOREIGN JURISDICTION; AND (8)

DISSOLUTION. EACH NRECA VOTING MEMBER HAS ONE VOTE.

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

THE DIRECTOR OF CORPORATE ACCOUNTING AND SENIOR VP OF FINANCE REVIEW THE

FORM 990 AND SUPPORTING WORK PAPERS IN DETAIL. THE FORM 990 IS THEN

PROVIDED TO THE NRECA BOARD OF DIRECTORS THROUGH THEIR ELECTRONIC BOARD

PORTAL FOR THEIR REVIEW AND COMMENTS IN ADVANCE OF THE RETURN BEING FILED.

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

EACH KEY EMPLOYEE IS SUBJECT TO A CONFLICT OF INTEREST POLICY AND REQUIRED TO ANNUALLY COMPLETE AND SUBMIT A CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM TO THE SENIOR VP OF FINANCE WHO, WITH ASSISTANCE AS NEEDED FROM HUMAN RESOURCES AND/OR THE GENERAL COUNSEL, INVESTIGATES POTENTIAL OR ACTUAL CONFLICTS. THE CEO, OR HIS OR HER DESIGNEE, HAS FINAL AUTHORITY FOR DETERMINING WHETHER OR NOT A CONFLICT HAS OCCURRED. IF THE CEO IS IMPLICATED, THE BOARD'S ADMINISTRATIVE COMMITTEE IS THE FINAL AUTHORITY. IN ADDITION TO THE CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM, EACH KEY EMPLOYEE ANNUALLY SUBMITS A FORM 990 QUESTIONNAIRE TO THE SENIOR VP OF FINANCE. EACH DIRECTOR IS REQUIRED TO ANNUALLY COMPLETE AND SUBMIT A SCHEDULE OF FORM 990 or 990-EZ) (2016)

CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM. DIRECTOR FORMS DISCLOSING ANY MATERIAL FACT KNOWN TO THE DIRECTOR REGARDING ANY POTENTIAL OR ACTUAL VIOLATION OF THE POLICY ARE SUBMITTED TO THE OFFICE OF GENERAL COUNSEL, NRECA PRESIDENT, NRECA VICE PRESIDENT, AND NRECA SECRETARY-TREASURER. UPON REQUEST OF THE PRESIDENT, EXECUTIVE COMMITTEE, OR ANY FIVE DIRECTORS, THE BOARD DETERMINES WHETHER A DIRECTOR COMPLIES WITH THE POLICY. IN MAKING THIS DETERMINATION, THE BOARD NOTIFIES THE DIRECTOR, A COMMITTEE IS CREATED AND APPOINTED TO INVESTIGATE AND MAKE A RECOMMENDATION, THE DIRECTOR MAY COMMENT, AND THE DIRECTOR MAY BE REQUIRED TO BE ABSENT DURING CONSIDERATION. IF THE BOARD DETERMINES THAT A DIRECTOR FAILS TO COMPLY WITH THE POLICY, THEN, UNLESS THE BOARD DETERMINES OTHERWISE FOR GOOD CAUSE, OR THE DIRECTOR COMPLIES WITH THE POLICY WITHIN 30 DAYS, THE DIRECTOR IS DISQUALIFIED AND NO LONGER A DIRECTOR. IN ADDITION TO THE CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM, EACH DIRECTOR ANNUALLY COMPLETES AND SUBMITS A FORM 990 QUESTIONNAIRE.

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

LINE 15A (CEO COMPENSATION): THE CEO EVALUATION COMMITTEE OF THE BOARD IS RESPONSIBLE FOR MAKING RECOMMENDATIONS TO THE BOARD CONCERNING FORMAT AND METHODS TO PROPERLY EVALUATE THE PERFORMANCE OF THE CEO. AN OUTSIDE CONSULTANT (E.G., QUATT ASSOCIATES) REVIEWS INDEPENDENT COMPENSATION STUDIES ANNUALLY TO VERIFY THE CEO'S COMPENSATION IS WITHIN A COMPETITIVE RANGE FOR THE CEOS OF COMPARABLE ORGANIZATIONS AND PROVIDES THIS INFORMATION TO THE COMMITTEE. THE COMMITTEE REVIEWS COMPETITIVE SALARY SURVEY DATA PROVIDED BY THE OUTSIDE CONSULTANTS AND DEVELOPS A COMPENSATION RECOMMENDATION THAT IS PRESENTED TO THE BOARD. THE BOARD REVIEWS AND APPROVES THE CEO'S COMPENSATION ANNUALLY.

LINE 15B (OTHER OFFICERS/KEY EMPLOYEE COMPENSATION): NRECA'S HUMAN

RESOURCES DEPARTMENT HAS A MARKET PAY TOOL THAT USES CURRENT PAY DATA FROM PURCHASED COMPENSATION STUDIES TO ANALYZE SALARIES FOR POSITIONS WITHIN THE ORGANIZATION. NRECA HAS WRITTEN POLICIES AND PROCEDURES GOVERNING ITS SALARY INCREASE PROCESS. THE SALARY INCREASE PROCESS IS INTENDED TO ENABLE MANAGERS TO MAKE RATIONAL DECISIONS CONCERNING SALARY ACTIONS WITHIN THE ASSOCIATION'S BUDGETING CONSTRAINTS. HOWEVER, IT DOES NOT GUARANTEE AN INCREASE TO ANY EMPLOYEE. THE SALARY PROCESS IS COMPRISED OF THE FOLLOWING STEPS: (1) APPROVAL OF NRECA'S SALARY BUDGET BY THE NRECA BOARD OF DIRECTORS; (2) COMPLETION OF WRITTEN ANNUAL PERFORMANCE SUMMARIES FOR EACH EMPLOYEE BY HIS/HER MANAGER; (3) RECOMMENDATION OF SALARY INCREASES OR LUMP SUM AWARDS FOR INDIVIDUAL EMPLOYEES BASED UPON PERFORMANCE/CONTRIBUTION; (4) ANALYSIS, REVIEW, AND APPROVAL OF SALARY INCREASE RECOMMENDATIONS BY HUMAN RESOURCES AND THE CHIEF EXECUTIVE OFFICER; AND (5) COMMUNICATION OF SALARY INCREASE DECISIONS TO STAFF.

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

THE NRECA ARTICLES OF INCORPORATION, BYLAWS AND AUDITED FINANCIAL

STATEMENTS ARE AVAILABLE TO NRECA VOTING MEMBERS ON THE MEMBER-ONLY SECTION

OF COOPERATIVE.COM, WHICH IS A WEBSITE FOR NRECA MEMBERS AND AFFILIATED

ENTITIES. NRECA NOTIFIES VOTING MEMBERS WHEN THE AUDITED FINANCIAL

STATEMENTS FOR THE PRECEDING FISCAL YEAR HAVE BEEN POSTED ON

COOPERATIVE.COM. NRECA DISTRIBUTES A COPY OF ITS ANNUAL REPORT TO EACH

NRECA VOTING MEMBER AND MAKES THE ANNUAL REPORT AVAILABLE TO THE PUBLIC ON

ELECTRIC.COOP. NRECA WILL ALSO PROVIDE COPIES OF ITS FORM 990 TO THE

GENERAL PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

NET INCOME OF SUBSIDIARIES

4,009,283.

Schedule O (Form 990 or 9)90·EZ) (2016)			Page 2
Name of the organization	NATIONAL RURAL	LELECTRIC	•	Employer identification number
	COOPERATIVE AS	SSOCIATION		53-0116145
FORM 990, PAR	T XII, LINE 2C:			
mitta poografia				2046
THIS PROCESS I	HAS NOT CHANGED	FROM THE PRI	OR YEAR BUT IN 2	2016 THE BOARD
ADOPTED POLICY	Y AMENDMENTS TO	CLARIFY AUDI	T RESPONSIBILITI	ES FOR NRECA
113011123 10210.			T TUDE ORDED THE	
AND OTHER ORGA	ANIZATIONS.			
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		11111111		
	0 10 1000			

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▼ Attach to Form 990.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. NATIONAL RURAL ELECTRIC

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

COOPERATIVE ASSOCIATION

Name of the organization

Department of the Treasury Internal Revenue Service

2016 Open to Public Inspection

OMB No. 1545-0047

Employer identification number 53-0116145

(8)	(5)	(2)	(1-)				
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state or	(u) Total income	(e) ne End-of-year assets		(†) Direct controlling	
of disregarded entity		foreign country)				entity	
							•
111111111111111111111111111111111111111							
						٠	
Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.	ations. Complete if the organization ar	ıswered "Yes" on Form 990	, Part IV, line 34 be	scause it had one	or more related tax-exe	əmpt	
(a)	(q)	(0)	(q)	(e)	(4)	(5)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	(b)(13)
of related organization		foreign country)	section	status (if section	entity	controlled entity?	
NRECA INTERNATIONAL FOUNDATION - 52-1409279				((c)(a)100		Yes	۶ ا
4301 WILSON BLVD				509(A)(C)			_
ARLINGTON, VA 22203	CHARITIABLE ACTIVITES	VIRGINIA	501(C)(3)	TI Edal	400 M	×	
NRECA INTERNATIONAL - 52-1387851						1	
4301 WILSON BLVD	INTERNATIONAL RURAL						
ARLINGTON, VA 22203	BLECTRIFICATION	/IRGINIA	501(C)(3)	170(B)(1)(A)	NE ECO	×	
FUNDACION ENERGETICA BOLIVIANA							
						_	

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Schedule R (Form 990) 2016

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NRECA

501(C)(6)

VIRGINIA

WOOD POLE TESTING

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

ARLINGTON, VA 22203

4301 WILSON BLVD

×

NRECA

N/A

SOLIVIA

ELECTRIFICATION BOLIVIAN RURAL

ARLINGTON, VA 22203 NRECA WOOD QUALITY CONTROL INC - 52-1446660

4301 WILSON BLVD

Schedule R (Form 990)

53-0116145

Part II Continuation of Identification of Related Tax-Exempt Organizations

(g) Section 512(b)(13) controlled organization? Yes No × (f) Direct controlling entity NRECA Public charity status (if section 501(c)(3)) 509 (A) (3) TYPE I Exempt Code section 501(C)(3) ਉ Legal domicile (state or foreign country) VIRGINIA AWARDING OF SCHOLARSHIPS Primary activity <u>a</u> 46-1424031, 4301 WILSON BLVD, ARLINGTON, VA 22203 GLENN ENGLISH NAT'L LEADERSHIP COOP FND -Name, address, and EIN of related organization

NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION Schedule R (Form 990) 2016

53-0116145 Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

Page 2

	•	
(i) (k) General or Percentage managing ownership		
General or managing partner?		
9 E B B S		
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		
(h) Disproportionate allocations?		
(g) Share of picture of end-of-year assets		
(f) Share of total income		
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		
(a) Direct controlling entity		
(C) Legal domicile (state or foreign country)		
(b) Primary activity		
(a) Name, address, and EIN of related organization		

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

(a)	(q)	(3)	(p)	(e)	(£)	(B)	(h)	18	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp., S corp., or trust)	Share of total income	of year	Percentage ownership	Section 512(b)(13) controlled entity?	(S) (13) (13) (5) (13)
		country)		,		2000		Yes	۷ No
COOPERATING INSURANCE SERVICES - 52-1076274									
4301 WILSON BLVD	,								
ARLINGTON, VA 22203	INSURANCE AGENT	VA	NRECA UNITED	C CORP	43 243	741 642	100.00%	×	
BLECTRIC COOPERATIVE LIFE INSURANCE CO -	LIFE &						┸	1	
86-0262046, 4301 WILSON BLVD, ARLINGTON, VA	HOSPITALIZATION			-					
22203	TNSURANCE	ΥĀ	NRECA	C CORP	67,316,	1,790 217.	100.00%	×	
COOPERATING BENEFIT ADMINISTRATORS -					/		┸	1	
52-1327041, 4301 WILSON BLVD, ARLINGTON, VA									
22203	CLAIMS ADMINISTRATOR	VA	NRECA UNITED	C CORP	12,935,950,	5.140 281.	100.00%	×	
COOPERATING ENERGY SERVICES - 52-1490710							┸	1	
4301 WILSON BLVD	SOFTWARE INTEGRATION							-	
ARLINGTON, VA 22203	DEVELOPMENT	VA	NRECA UNITED	C CORP	279 467.	10 000	100 00%	×	
RE INVESTMENT CORPORATION - 52-1679315							┸	1	
4301 WILSON BLVD	•					,			
ARLINGTON, VA 22203	INVESTMENT BROKER	VA	NRECA UNITED	C CORP	0	139,180.	100,00% X	×	
632162 09-06-16		43				Sche	ΙZ	6	2016

Schedule R (Form 990) 2016

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990)

Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(2)	[4]	3	17.7						1
Name, address, and EIN	ctivity	Legal domicile	(a) Direct controlling	(e) Type of entity	(f) Share of total		(h) Percentage	Section 512(b)(13)	_
3		foreign country)		(C corp, S corp, or trust)		end-of-year assets	ownership		.
RE ADVISERS CORPORATION - 52-1694000								3	
4301 WILSON BLVD		<u></u>	RE INVESTMENT						
203	INVESTMENT ADVISER	VA	INC	C CORP	22,676,941.	23,017,306,	100,00%	×	
NRECA UNITED INC - 52-1765915									
-									
ARLINGTON, VA 22203	HOLDING COMPANY	VA	ELCO	C CORP	300,000	340 669	100.00%	×	
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04-01-16		7 †							

COODEDAMITE ACCOUNTS

Schedule R (Form 990) 2016 COOPERATIVE ASSOCIATION

Page 3

53-0116145

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Schedule R (Form 990) 2016 å × × × × × × M × × Yes × × Ξ 우 <u>5</u> 유 ပ္ 70 ø 9 ÷ £ 4 무 ş (d) Method of determining amount involved Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Reimbursement paid by related organization(s) for expenses Loans or loan guarantees by related organization(s) 2 if the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. 186,312. ACCOUNTING RECORDS 24,540.ACCOUNTING RECORDS 454,313.ACCOUNTING RECORDS 821,961. ACCOUNTING RECORDS 159,516. ACCOUNTING RECORDS 11,247,584. ACCOUNTING RECORDS Reimbursement paid to related organization(s) for expenses During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? (c) Amount involved (b) Transaction type (a-s) Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) Ľ α z O Z ļ Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Lease of facilities, equipment, or other assets from related organization(s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Lease of facilities, equipment, or other assets to related organization(s) Other transfer of cash or property from related organization(s) Gift, grant, or capital contribution from related organization(s) Other transfer of cash or property to related organization(s) Giff, grant, or capital contribution to related organization(s) (1) NRECA INTERNATIONAL FOUNDATION (2) NRECA INTERNATIONAL FOUNDATION (3) NRECA INTERNATIONAL FOUNDATION d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a)
Name of related organization Purchase of assets from related organization(s) Exchange of assets with related organization(s) (5) NRECA INTERNATIONAL INTERNATIONAL INTERNATIONAL (4) NRECA (6) NRECA 632163 09-06-16

Schedule R (Form 990)

Part V

53-0116145

Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(d) Method of determining amount involved 132,696. ACCOUNTING RECORDS 465,356.ACCOUNTING RECORDS 344,312.ACCOUNTING RECORDS 451,928. ACCOUNTING RECORDS 4,748,317. ACCOUNTING RECORDS 655,129. ACCOUNTING RECORDS 647,021.ACCOUNTING RECORDS 2,292,620. ACCOUNTING RECORDS 92,027. ACCOUNTING RECORDS 70,153. ACCOUNTING RECORDS 113,321. ACCOUNTING RECORDS 307,282. ACCOUNTING RECORDS 2,222,461. ACCOUNTING RECORDS 2,672,976. ACCOUNTING RECORDS 334,200. ACCOUNTING RECORDS 10,218,898. ACCOUNTING RECORDS 664,238.ACCOUNTING RECORDS 22,845.ACCOUNTING RECORDS (c) Amount involved (b) Transaction type (a-r) Ц 0 α Ø Н Ħ 0 O) щ 0 Ø 口 Q ᆸ O ď, z α BENEFIT ADMINISTRATORS (12)COOPERATING BENEFIT ADMINISTRATORS BENEFIT ADMINISTRATORS (14)COOPERATING BENEFIT ADMINISTRATORS INC (8) NRECA WOOD QUALITY CONTROL INC (9)NRECA WOOD QUALITY CONTROL INC (10)COOPERATING INSURANCE SERVICES (15)COOPERATING ENERGY SERVICES SERVICES SERVICES QUALITY CONTROL Name of other organization (24)GLENN ENGLISH FOUNDATION ENERGY (17)COOPERATING ENERGY INC INC (20)RE ADVISERS INC INC INC (23)RE ADVISERS INC (19)RE INVESTMENT (18)RE INVESTMENT (11)COOPERATING (13)COOPERATING (21)RE ADVISERS (22)RE ADVISERS (16)COOPERATING WOOD (7)NRECA

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Schedule R (Form 990)

53-0116145

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Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7)NRECA UNITED	õ	25,746.	25,746.ACCOUNTING RECORDS
(8)			
(6)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
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(24)			
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632225 04-01-16

Schedule R (Form 990) 2016

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

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

•	(E)	entage ership							: : - ;															:	
		or Perc	٥	•		_		 _					 			 	\perp					_			
)	8	General managi partner	Yes No				•	 -		•				-			+		 	H		\dashv			
	Θ	Oode V-UBI General of Percentage floations of Schedule K-1 parmary ownership	(Form 1065)												_										•
		por- te am ons? of	2			\vdash		+			\dashv			-					 			+			
	Ξ	Dispro tiona allocatio	Kes										 								 	1			
	(6)	Share of end-of-year	asseis																						
	Θ	Share of total	al loor ii												••••										
	(e)	partners sec. 501(c)(3) orgs.?	Yes No															-			 	$\frac{1}{2}$			-
8		der 50gri	ě					 _			\dashv		 -						\dashv			+			
stment partnershi	(G)	(related, unrelated, excluded from tax under	95000018 3 (4-3 14)																						
sion for certain inve	(0)	(state or foreign country)																							
il ucuons regarding excit		Frimary activity																					-		
That was not a related organization, see instructions regarding exclusion for certain investment partnerships.	(a) Name advanta EINI	of entity																							

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Schedule R (Form 990) 2016

Part VII Supplemental Information.	
Provide additional information for responses to questions on Schedule R. See instructions.	
PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUS	5T:
NAME OF RELATED ORGANIZATION:	
ELECTRIC COOPERATIVE LIFE INSURANCE CO	
DIRECT CONTROLLING ENTITY: NRECA	<u></u>
NAME OF RELATED ORGANIZATION:	
COOPERATING BENEFIT ADMINISTRATORS	
DIRECT CONTROLLING ENTITY: NRECA UNITED	
NAME OF RELATED ORGANIZATION:	
COOPERATING ENERGY SERVICES	<u>-</u>
DIRECT CONTROLLING ENTITY: NRECA UNITED	
NAME OF RELATED ORGANIZATION:	
RE INVESTMENT CORPORATION	
DIRECT CONTROLLING ENTITY: NRECA UNITED	
NAME OF RELATED ORGANIZATION:	
RE ADVISERS CORPORATION	
DIRECT CONTROLLING ENTITY: RE INVESTMENT INC	
NAME OF RELATED ORGANIZATION:	
NRECA UNITED INC	
DIRECT CONTROLLING ENTITY: ELCO	