# EXTENDED TO NOVEMBER 16, 2020

(Rev. January 2020) Department of the Treasury Internal Revenue Service

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

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

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

OMB No. 1545-0047 Open to Public

Inspection

Α	For the	e 2019 calendar year, or tax year beginning and er	nding	_			
В	Check if applicabl	C Name of organization		D Employer identifi	cation number		
	Addre chang	PEDERNALES ELECTRIC COOPERATIVE, INC.					
	Name chang			74-08284	12		
	Initial return Final return	, , , , , , , , , , , , , , , , , , , ,	loom/suite	E Telephone numbe 800-868-			
	termin	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	622,206,078.		
	Amen	JOHNSON CITY, TX 78636		H(a) Is this a group re	eturn		
	Application pendi			for subordinates	?Yes X No		
_		SAME AS C ABOVE		H(b) Are all subordinates in			
		empt status:	527		list. (see instructions)		
		te: WWW.PEC.COOP	1. 1/	H(c) Group exemption			
		organization: X Corporation Trust Association Other	L Year o	of formation: 1938 N	A State of legal domicile: $TX$		
P		Summary	OVIDE	CARR DRIT	7 DT 17 7 NTD		
Governance	1	Briefly describe the organization's mission or most significant activities: ${\hbox{{\tt TO}}}$ ${\hbox{{\tt PRO}}}$ ${\hbox{{\tt LOW-COST}}}$ ${\hbox{{\tt ELECTRIC}}}$ ${\hbox{{\tt SERVICE}}}$ ${\hbox{{\tt TO}}}$ ${\hbox{{\tt THE}}}$ ${\hbox{{\tt MEMBERS}}}$	OF TH	E COOPERATI	VE.		
rna	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	ssets.		
ove		Number of voting members of the governing body (Part VI, line 1a)			6		
Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			6		
SS		Total number of individuals employed in calendar year 2019 (Part V, line 2a)			919		
ŻĘ		Total number of volunteers (estimate if necessary)			0		
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.		
⋖	1	Net unrelated business taxable income from Form 990-T, line 39			0.		
				Prior Year	Current Year		
Φ	8	Contributions and grants (Part VIII, line 1h)		0.	0.		
'n		Program service revenue (Part VIII, line 2g)		36,052,353.	615,616,491.		
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-1,145,911.	709,617.		
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,778,821.	4,889,810.		
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		39,685,263.	621,215,918.		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		224,650.	124,329.		
		Benefits paid to or for members (Part IX, column (A), line 4)		59,087,770.	58,810,586.		
Ś		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		60,718,435.	68,789,928.		
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
çpe	1	Total fundraising expenses (Part IX, column (D), line 25)	0.				
ш	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			494,114,184.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6	38,277,235.			
	19	Revenue less expenses. Subtract line 18 from line 12		1,408,028.	-623,109.		
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year		
sets	20	Total assets (Part X, line 16)		1,703,015,359.	1,808,003,892.		
ASS	21	Total liabilities (Part X, line 26)		1,015,360,614.	1,073,523,827.		
Field	22	Net assets or fund balances. Subtract line 21 from line 20	6	87,654,745.	734,480,065.		
Pa	art II	Signature Block					
Unc	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of m	y knowledge and belief, it is		
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	ch preparer	has any knowledge.			
Sign		Signature of officer		Date			
He	re	RANDY KRUGER, CFO					
		Type or print name and title					
		Print/Type preparer's name Preparer's signature		Date Check	X PTIN		
Pai	d	WILLIAM M. MILLER WILLIAM M. MILLE	R0	9/28/20 if self-employ	<sub>ed</sub> P00439459		
Pre	parer	Firm's name ▶ BOLINGER, SEGARS, GILBERT AND MOS	SS LL	P Firm's EIN >	75-0882037		
Use	Only	Firm's address 8215 NASHVILLE AVENUE					
		LUBBOCK, TX 79423		Phone no. (8	06)747-3806		
Ма	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No		

Га	Classification of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	WE ARE COMMITTED TO DELIVERING SAFE, RELIABLE AND LOW-COST ENERGY
	SOLUTIONS FOR THE BENEFIT OF OUR MEMBERS.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$
	PROVIDING ELECTRIC ENERGY TO OUR MEMBERS ON A COOPERATIVE BASIS THROUGH
	THE ALLOCATION OF PATRONAGE CAPITAL. THERE WERE 329,702 ACTIVE SERVICES
	AT YEAR END.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
	·
4 -1	Ohber massage and item (Describe on Cabadula O.)
4d	Other program services (Describe on Schedule O.)
_	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses

# Form 990 (2019) PEDERNALES E 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		Х
2	If "Yes," complete Schedule A	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		
	during the tax year? If "Yes," complete Schedule C, Part II	4	N/	A
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	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			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			7.7
	or in 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, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	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 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		Х	
	Schedule D, Parts XI and XII	12a	Λ	
D	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	406		х
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13 14a	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,	174		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
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		77	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

Part IV	Ch	ecklist of Required Schedules (continued)

			Yes	No					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on								
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х					
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current								
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete								
	Schedule J								
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the								
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete								
	Schedule K. If "No," go to line 25a	24a		Х					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease								
	any tax-exempt bonds?	24c							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
	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	N/	A					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and								
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete								
	Schedule L, Part I	25b	N/	A					
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current								
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%								
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х					
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,								
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled								
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х					
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV								
	instructions, for applicable filing thresholds, conditions, and exceptions):								
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If								
	"Yes," complete Schedule L, Part IV	28a		Х					
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х					
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//								
	"Yes," complete Schedule L, Part IV	28c		Х					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation								
	contributions? If "Yes," complete Schedule M	30		Х					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х					
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		Х					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations								
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and								
	Part V, line 1	34	Х	L_					
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х						
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity								
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?								
	If "Yes," complete Schedule R, Part V, line 2	36	N/	A					
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization								
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х					
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?								
	Note: All Form 990 filers are required to complete Schedule O	38	Х						
Pai	Statements Regarding Other IRS Filings and Tax Compliance			_					
	Check if Schedule O contains a response or note to any line in this Part V			Ш					
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?	1c	000						
		_	* ** **	0010					

# PEDERNALES ELECTRIC COOPERATIVE, INC. Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

22 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 2a 9.19  3 It all east one is reported on line 2a, did the organization file all required federal employment tax returns?  3 It all east one is reported on line 2a, did the organization file all required federal employment tax returns?  3 It all east one is reported on line 2a, did the organization file all required federal employment tax returns?  3 It all east one is reported on line 2a, did the organization file all required federal employment tax returns?  3 It all east one is reported on line 2a, did the organization for expected or delie (see instructions)  3 It is was the required to the see in the control of the con			_			Yes	No						
bill fall least one is reported on line 2a, did the organization file all required to e-rife (see instructions)  Note if the sum of lines is and 2a is greater than 250, you may be required to e-rife (see instructions)  3a Did the organization have unreliated business gross income of \$1,000 or more during the year?  3a Did the organization have unreliated business gross income of \$1,000 or more during the year of the complex of the comple	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,											
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to -rifle (see instructions) 3a		filed for the calendar year ending with or within the year covered by this return	2a	919									
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?  5b If 1'Yes', has it filled a Form 980T for this year? If 'Wo' to line' 36, provide an explanation on Schedule O  4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c If 'Yes' to line for the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c If 'Yes' to line for so sh, did the foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c If 'Yes' to line for so sh, did the foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c If 'Yes' to line for so sh, did the foreign country (such as a bank account, securities account, or other financial Accounts (FBAR).  5c If 'Yes' to line for so sh, did the foreign country (such as a bank account, securities and provided the superaction of the comparization to Financial Accounts (FBAR).  5c If 'Yes' so line for so sh, did the organization the foreign country (such as a such as a such accounts (FBAR).  5c If 'Yes' so line for so sh, did the organization the organization control of the comparization control of the comparization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c Organizations that may receive deductible contributions under section 170(c).  6c If 'Yes' so line organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the foreign accounts of the subner of the subner of the good of services provided?  7c If If 'Yes' indicate the number of Forms 8292 filed during the year  7d If 'Yes' indicate the number of Forms 8292 filed during the year  8d If 'Yes' indicate the number of Forms 8292 filed during the year  9d If 'Y	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		<b>2</b> b	X							
b if "Yes," rise if titled a Form 990-T for this year? If "No" to life 3b, provide an explanation on Schedule 0  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts?  5b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR).  5c es instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5c es instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5c es instructions of printing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5c Was the organization a party to a prohibited tax shelter transaction?  5c If "Yes" to line Se or Sb, did the organization file Form 8888-17  6a Does the organization shelt were not tax deductible as charitable contributions?  5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible on the party of the comparization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c).  6b If "Yes," did the organization notity the donor of the value of the goods or services provided to the payor" and the payor of the form 82822 (and the organization notity the donor of the value of the goods or services provided by the sponsarization receive an ontribution of cause of the goods or services provided to the payor" and the organization received an ontribution of cause of the goods or services provided by the sponsoring organization network and suited interest the payor of the organization received an ontribution of the payor of the good or services of the organization file a form 1099-C?  77 If the organization received an con		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)											
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account, in a freign country (such as a bank account, securities account, or other financial account)?  5b I *Yes,* enter the name of the foreign country ▶  5c enistructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5d Was the organization to a provide the organization file for missage of the organization in the organization that it was or is a party to a prohibited tax shelter transaction?  5c If *Yes* to line Sa or 55, did the organization file Form 88867.  6d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6d If *Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6d Object the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible?  6d Object the organization that may receive deductible contributions under section 170(c).  8d If *Yes,* did the organization notify the donor of the value of the goods or services provided?  8d If *Yes,* indicate the number of Forms 8282 filed during the year  9d If *Yes,* indicate the number of Forms 8282 filed during the year  10 bid the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract?  10 bid the organization received an contribution of organization, during the year; any premiums, directly or indirectly, on a personal benefit contract?  11 bid the organization received an contribution of oras, boats, alignates, or other vehicles, did the organization free most of the vehicles, of the organization file form 8899 as required?  11 bid the organization received an contribution of oras, boats, alignates, or their vehicles, did the o	3a												
financial account, in a foreign country (such as a bank account, securities account, or other financial account)?  b if "Yes," enter the name of the foreign country See instructions for filing requirements for finCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b Did any stable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes" to line Sa or Sb, did the organization file Form 8888-17  6a Does the organization shall were not tax deductible as charitable contributions?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," did the organization notify the donor of the value of the goods or services provided?  7 Did the organization receive apprentin excess of S5 made party as contribution and partly for goods and services provided to the peyor?  7 To the organization receive apprentin excess of S5 made party as contribution of the was required to the Form 8282?  7 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7 Did the organization received a contribution of qualified intellectrual property, did the organization file Form 8990 as required?  9 Sponsoring organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098 C?  8 Sponsoring organization make any taxable distributions power, delife the organization file a Form 1098 C?  9 Sponsoring organization make any taxable distributions under section 4966?  N/A 9 Sponsoring organization make any taxable distributions under section 4966?  N/A 9 Section 501(c)(7) organizations. Enter:  a Gross income from themes or shareholders  b Cross income from themes or shareholders  b Cross inco	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O											
b if Yes, "enter the name of the foreign country ►  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year?  5b IV any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes 1 to lies Saor 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c IV 1 to lies Saor 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c IV 1 to lies Saor 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c IV 1 to lies organization that may receive deductible contributions under section 170(c).  5c IV 1 to lie organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  5c IV 1 to lie Form 8282?  5d IV 1 to organization received a protective or indirectly, to pay premiums on a personal benefit contract?  7d IV 1 to dit the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required?  7d IV 1 the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required?  7d IV 1 the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required?  7d IV 1 the organization have excess business holdings at any time during the year?  8 Sponsoring organization make any texable distributions under section 4966?  9 Sponsoring organization make any texable distributions and a controlled person?  9 Sponsoring organization make any texable distributions and the sponsoring organization make any texable distributions and the sponsoring organization mem	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other ${\bf r}$	authori	ty over, a									
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5 c C If "Yes" to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5 c D Des the organization shelt were not tax deductible as charitable contributions?  6 d Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible:  6 d V Tyes," indicated the unapproximation for the expression of the expression													
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sponsoring organization have excess business holdings at any time during the year? N/A 8  Sponsoring organizations maintaining donor advised funds.  a Did the sponsoring organization make any taxable distributions under section 4966? N/A 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A 9b Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 115 Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders 11a 617, 833, 376.  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 60, 554, 466.  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b 15 H** ("Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b 15 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state? N/A 13a Note: See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? N/A 13a 13b 15 Liter the amount of reserves on hand 13c 14b 15 Is the organization receive any payments for indoor tanning services during the tax year? 14a X 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X 15 K	h												
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	16		nt incon	ne?	16		Х						

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion A. Governing Body and Management										
000	tion 7th dovorning body and management		Yes	No							
10	Enter the number of voting members of the governing body at the end of the tax year 1a 1	5	163	140							
ıa	If there are material differences in voting rights among members of the governing body, or if the governing	4									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b	5									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
_	officer, director, trustee, or key employee?										
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	2		X							
Ü	of officers, directors, trustees, or key employees to a management company or other person?	3		X							
4		4	Х								
5	3 3 3 3 1										
6	Did the organization have members or stockholders?	5 6	Х	Х							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	٣									
<i>,</i> a		7a	х								
b	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u>-"</u>									
		7b	х								
8	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
	The governing body?	8a	х								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00									
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
	tion Division (mis econom Broqueste information asset periode not required by the internal revenue econom		Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a	1.00	X							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100									
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13	Х								
14	Did the organization have a written document retention and destruction policy?	14	Х								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a	Х								
b	Other officers or key employees of the organization	15b	Х								
	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 arrangement with a										
	taxable entity during the year?	16a		Х							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt 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 ► NONE										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(	3)s only	/) avail	able							
	for public inspection. Indicate how you made these available. Check all that apply.	•									
	X Own website Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fina	ncial								
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's books and records										
	RANDY KRUGER, CFO - 830-868-4984										
	201 SOUTH AVENUE F, JOHNSON CITY, TX 78636										

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

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

X

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

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

oxdot Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box	not c	Pos heck ess pe	more rson	than	h an	(D)  Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JULIE PARSLEY	47.00	-		Х				101 115	0.	42 000
CHIEF EXECUTIVE OFFICER (2) EDWARD A DAUTERIVE	65.00			^				494,145.	0.	42,099.
CHIEF OPERATIONS OFFICER	03.00	1		x				427,566.	0.	61,804.
(3) DON BALLARD	50.00			Α				427,500.	0.	01,004.
GENERAL COUNSEL	30.00	1		x				428,393.	0.	42,042.
(4) JOHN DAVIS	46.00									
CHIEF FINANCIAL OFFICER		1)		x				390,165.	0.	64,164.
(5) LAWANDA PARNELL	50.00							,		
CHIEF INFORMATION OFFICER				X	<b>-</b>	1		405,066.	0.	16,498.
(6) WAYNE MCKEE	60.00									
VP - OPERATIONS		1			Х			362,390.	0.	49,882.
(7) BRIDGET HEADRICK	44.00									
VP - COMPLIANCE & REGULATORY					Х			317,612.	0.	61,295.
(8) DAVID THOMPSON	60.00									
VP - MARKETS					Х			297,683.	0.	67,681.
(9) MAURICIO VIESCA	47.00	1								
EVP - PUBLIC AFFAIRS	F0 00				Х			303,905.	0.	54,558.
(10) RICHARD ARELLANO	50.00	1						210 410	0	45 004
VP - SAFETY & SUPPORT SVCS	<u> </u>				Х			312,412.	0.	45,084.
(11) WESLEY BURNS	50.00	4			,,			200 221	0	FC F00
VP - HUMAN RESOURCES	F 00				Х			299,331.	0.	56,589.
(12) TIMOTHY NANCE	55.00	4			х			210 610	0.	10 100
VP - MEMBER SERVICES (13) FREDDY WOLFF	48.00				Δ	-		310,610.	0.	40,498.
VP - CONTROLLER	40.00	1			х			311,005.	0.	37,597.
(14) AISHA HAGEN	40.00				^			311,003.	0.	31,331.
ASSOCIATE GENERAL COUNSEL	40.00	1			х			292,147.	0.	45,601.
(15) BRIAN GEDRICH	50.00							272,1476	0.	43,001.
VP - ENGINEERING		1			Х			285,674.	0.	48,270.
(16) ROBERT PETERSON	50.00				<del></del>					
PRINCIPAL DESIGN & FIELD ENGINEER		1				x		285,283.	0.	27,613.
(17) DENNIS HINSON	55.00							, ,		-
DIRECTOR - INFORMATION TECHNOLOGY		1				Х		261,024.	0.	26,241.
020007 01 00 00	•		_		_	•				Form <b>990</b> (2010)

Form **990** (2019)

Page 8

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (A) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation ndividual trustee or director the hours for organization (W-2/1099-MISC) from the related Institutional trustee (W-2/1099-MISC) organization organizations (ey employee and related below organizations Officer line) 60.00 (18) STEPHEN MALDONADO 0. 46,189. X 223,746. DIRECTOR - REGIONAL OPERATIONS (19) JOE LOCKHART 40.00 X 216,096. 0 . 44,235. DIRECTOR - REGIONAL OPERATIONS 48.00 (20) NATHAN BURNS X 18,368. 216,179 0. DIRECTOR - REGIONAL OPERATIONS (21) EMILY PATAKI 12.00 X 37,300. 0 . VICE PRESIDENT 0. 24.10 (22) PAUL GRAF Х 37,200. 0 . 0. PRESIDENT Х 10.00 (23) MILTON RISTER X Х 36,800. 0. 0. SECRETARY/TREASURER (24) RANDY KLAUS 13.00 X 36,200. 0 . 0. DIRECTOR 13.00 (25) AMY LEA SJ AKERS X 36,100. 0. 0. DIRECTOR 8.00 (26) JAMES OAKLEY 36,000. DIRECTOR Х 0 0. 6,660,032. 0. 896,308. 1b Subtotal 27,600. 0. c Total from continuation sheets to Part VII, Section A 896,308. 6,687,632. 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 compensation from the organization

			Yes	No
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		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
T&D SOLUTIONS LLC / VOLT POWER LLC	ELECTRIC DIST LINE	
P.O. BOX 847280, DALLAS, TX 75284	CONSTRUCTION	8,714,745.
JAMES POWER LINE CONSTRUCTION	ELECTRIC DIST LINE	
43 SHOOTING CLUB RD, BOERNE, TX 78006	CONSTRUCTION	7,320,837.
HYDE CONSTRUCTION INC.		
13130 NUTTY BROWN RD, AUSTIN, TX 78737	CONSTRUCTION	3,754,068.
JRD LLC, 10103 N DIVISION ST, STE 106,		
SPOKANE, WA 99218	CONSTRUCTION	3,492,083.
FRONT LINE POWER CONSTRUCTION LLC		
4202 CHANCE LANCE, ROSHARON, TX 77583	3,302,258.	
2 Total number of independent contractors (including but not limited to those lis		
\$100,000 of compensation from the organization > 75		

Name and title  Average hours for robust for robust for robust for (JAM-OCT)  TESTORE POWERS  DIRECTOR (JAM-OCT)  (A)  (B)  Average hours for robust for r	Form 990		ES ELEC'	ľR.	IC	CC	001	PEI	RA'.	rive, inc.	74-082	8412
Name and title  Average per week (list any hours for related organizations below line)  Inversify (127) JIM POWERS  TIRECTOR (JAN-OCT)  TIME POWERS  TIME PO	Part VII	Section A. Officers, Directors, Tru	stees, Key Er	nplo	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)	
per week (ist any hours for related organizations below line)  127) JIM POWERS  15.00  X  X  27, JUM POWERS  15.00  INCOMESS  15.00  INCOMESS  INC			Average	(cl		Pos	ition		oly)	Reportable compensation	Reportable compensation	
DIRECTOR (JAN-OCT)  X  27,600.  0.			week (list any hours for related organizations below line)							from the organization	from related organizations	other compensation
			15.00	Х						27,600.	0.	0
27, 600												
27.600												
								4				
27, 600												
				,								
27, 600												
27. 500												
27, 600												
27.600												
27. 600												
27. 600												
27, 600												
27, 600												
27, 600												
27 600												
Total to Part VII. Section A. line 1c	Total to Pa	art VII, Section A, line 1c					·			27,600.		

Form 990 (2019) PEDERNAL
Part VIII Statement of Revenue

		Check if Schedule O contains a response of	or note to any lin	ne in this Part VIII			X
			,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
S S	1 -	Federated campaigns 1a					
ru qu		Membership dues 1b					
ه ق							
ifts		3					
nia Big		· · · · · · · · · · · · · · · · · · ·					
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (contributions) 1e					
ığ E	т	All other contributions, gifts, grants, and					
등		similar amounts not included above 1f					
ng p	_	Noncash contributions included in lines 1a-1f					
9 C	r	Total. Add lines 1a-1f	<b></b>				
_		all na on ni nampi armi	Business Code	500 104 440	500 104 440		
je	2 8		221000	588,124,448.	588,124,448.		
ne Z	k	·	221000	10,006,857.	10,006,857.		
m S	C	TRANSMISSION ACCESS	221000	9,727,588.	9,727,588.		
Program Service Revenue	c		221000	5,196,223.	5,196,223.		
or_	e	PATRONAGE DIVIDENDS	221000	2,080,747.	2,080,747.		
-		All other program service revenue	221000	480,628.	480,628.		
	Ç	Total. Add lines 2a-2f		615,616,491.			
	3	Investment income (including dividends, interes					
		other similar amounts)		278,796.	20,688.		258,108.
	4	Income from investment of tax-exempt bond pr	roceeds				
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a	382,157.				
	k	Less: rental expenses 6b	62,759.				
	c	Rental income or (loss) 6c	319,398.				
	c	Net rental income or (loss)		319,398.	319,398.		
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a	1,358,222.				
	k	Less: cost or other basis					
ne		and sales expenses	927,401.				
Other Revenue	c	Gain or (loss)	430,821.				
Be	c	Net gain or (loss)	•	430,821.			430,821.
her	8 8	Gross income from fundraising events (not					
₹		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a					
	k	Less: direct expenses 8b					
	c	Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
		Part IV, line 199a					
	k	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns	·				
		and allowances 10a					
	k	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory					
<u></u>			Business Code				
Miscellaneous Revenue	11 a	POLE ATTACHMENT INCOME	221000	4,570,412.			4,570,412.
ane nuc	k			. ,			· ·
jš P		All other revenue					
2		Total. Add lines 11a-11d	<b></b>	4,570,412.			
	12	Total revenue. See instructions		621,215,918.	615,956,577.	0.	5,259,341.

## Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses			
1	Grants and other assistance to domestic organizations		·					
	and domestic governments. See Part IV, line 21	124,329.						
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	58,810,586.						
5	Compensation of current officers, directors,	, ,						
	trustees, and key employees	6,218,966.						
6	Compensation not included above to disqualified				,			
	persons (as defined under section 4958(f)(1)) and							
	persons described in section 4958(c)(3)(B)							
7	Other salaries and wages	44,256,999.						
8	Pension plan accruals and contributions (include							
	section 401(k) and 403(b) employer contributions)	7,759,195. 7,047,735.						
9	Other employee benefits	7,047,735.						
10	Payroll taxes	3,507,033.						
11	Fees for services (nonemployees):							
а	Management							
b	Legal							
С	Accounting							
d	Lobbying							
е	Professional fundraising services. See Part IV, line 17							
f	Investment management fees							
g	Other. (If line 11g amount exceeds 10% of line 25,							
	column (A) amount, list line 11g expenses on Sch 0.)							
12	Advertising and promotion							
13	Office expenses							
14	Information technology							
15	Royalties							
16	Occupancy							
17	Travel							
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	35,573,681.						
20	Interest	33,313,001.						
21	Payments to affiliates	57,620,272.						
22	Depreciation, depletion, and amortization	37,020,272.						
23	Other expenses. Itemize expenses not covered							
24	above (List miscellaneous expenses on line 24e. If							
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)							
а	PURCHASED POWER	335,208,958.						
a b	DISTRIBUTION EXPENSE	35,644,911.						
C	CONSUMER EXPENSE	12,299,430.						
d	ADMIN & GENERAL EXPENSE	12,214,159.						
e	All other expenses	5,552,773.						
25		621,839,027.						
26	<b>Joint costs.</b> Complete this line only if the organization	, , , , , , , , , , , , , , , , , , , ,						
-	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation.							
	Check here if following SOP 98-2 (ASC 958-720)							

Form 990 (2019)
Part X | Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,354,840.	1	768,768.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	24,989,583.	4	22,089,406.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	19,443,659.	8	17,921,711.
Ä	9	Prepaid expenses and deferred charges	3,444,612.	9	3,692,108.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D <b>10a</b> 1,958,137,918.			
	b	Less: accumulated depreciation 10b 310,728,192.	1,549,196,172.	10c	1,647,409,726.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	13,845,105.	13	14,853,345.
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	89,741,388.	15	101,268,828.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,703,015,359.	16	1,808,003,892.
	17	Accounts payable and accrued expenses	63,466,756.	17	75,469,130.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	540.050	20	0.16.444
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	519,050.	21	246,111.
es	22	Loans and other payables to any current or former officer, director,			
ij		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	701 044 100	22	702 010 160
_	23	Secured mortgages and notes payable to unrelated third parties	781,844,129.	23	793,219,162.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	160 520 670		204 500 424
		of Schedule D	169,530,679.		1,073,523,827.
	26	Total liabilities. Add lines 17 through 25	1,015,360,614.	26	1,073,523,627.
S S		Organizations that follow FASB ASC 958, check here			
Š	07	and complete lines 27, 28, 32, and 33.		07	
3al	27	Net assets without donor restrictions  Net assets with donor restrictions		27 28	
Ē	28	Organizations that do not follow FASB ASC 958, check here		20	
Ξ		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds	12,784,618.	29	13,456,187.
ets	30	Paid-in or capital surplus, or land, building, or equipment fund	0.	30	0.
Ass	31	Retained earnings, endowment, accumulated income, or other funds	674,870,127.	31	721,023,878.
Net Assets or Fund Balances	32	Total net assets or fund balances	687,654,745.	32	734,480,065.
Z	33	Total liabilities and net assets/fund balances	1,703,015,359.	33	1,808,003,892.
	100	Total industrios direction description balances	= , , . = . ,	-	

	· · · ·					
Pa	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments	1 2 3 4 5 6 7	621 621	, 21 , 83 -62	5,9 9,0 3,1	18. 27. 09.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	47	, 44	8,4	29.
10	· · · · · · · · · · · · · · · · · · ·					
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					<u> X</u>
1 2a	Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed.			<b>2</b> a	Yes	No X
b	separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	re basis,		2b	Х	
	Keparate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on ScI As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	nedule O.	Ī	2c	Х	
	Act and OMB Circular A-133?	-		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ired audit	: [	oh.		

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

PEDERNALES ELECTRIC COOPERATIVE, INC.

Employer identification number 74-0828412

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	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 advi-	sed funds
	are the organization's property, subject to the organization's	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	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Par			
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply).	
	Preservation of land for public use (for example, recreation)		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified 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	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic st		
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		e organization during the tax
	year▶		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cor	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	tion easements in its revenue and expens	e statement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial staten	nents that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its final	incial statements that describes these iter	ms.
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a Land		20,786,079.		20,786,079.			
<b>b</b> Buildings		80,825,458.	15,760,748.	65,064,710.			
c Leasehold improvements							
<b>d</b> Equipment		1,751,068,854.	294,958,591.	1,456,110,263.			
e Other		105,457,527.	8,853.	105,448,674.			
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)							

Schedule D (Form 990) 2019

Concado B	(1 01111 000) =010					,
Part VII	Investments	- Other Sec	urities	S.		

00110				TT Tugo
Par	t VII Investments - Other Securities.			
	Complete if the organization answered "Yes"			
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) F	nancial derivatives			
<b>(2)</b> C	losely held equity interests			
<b>(3)</b> O	ther			
(A)				
(B)				
(C				
(D)				
(E)				
(F)				
(G				
(H			_	
Total.	(Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Par	t 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	d-of-year market value
(1	)			
(2				
(3				
(4				
(5				
(6				
(7				
(8				
(9				
	(Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
	t IX Other Assets.			
	Complete if the organization answered "Yes"	on Form 990 Part IV line	11d See Form 990 Part X line 15	
	·	Description	114. 666 1 6111 666, 1 41174, 1116 16.	(b) Book value
(1	ACCRUED INIDITION DELIGINATE			26,250,305.
(2	DESCRIPTION DESCRIPTION OF THE PERSON OF THE	RETTREMENT PL	AN EXPENSE	58,880,411.
(3	TODA THE C DOWN COOK DE			16,099,689.
(4	A CODUED THEFT CE /DILLED CHIP		RECOEFFICIE TIPPET	38,423.
		KECHI VIIDHE		30,423.
(5				
(6				
(7				
(8				
(9 Tatal		1E \		101,268,828.
Par	. (Column (b) must equal Form 990, Part X, col. (B) line t X Other Liabilities.	; 15.)		101,200,020.
Fai		on Forms 000 Boot IV line	11. av 11f Can Farra 000 Part V lina 05	
	Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, line	TTE OF TIT. See Form 990, Part X, line 25	(b) Book value
1.	* * * * * * * * * * * * * * * * * * * *			(b) book value
(1	ACCRUTED OPERATING MANUEL C	DDDC		10 104 224
(2	ACCUPATION DESCRIPTION FOR			10,194,224.
(3	AND DENIETES	PENSION		00 060 200
(4	,			88,060,322.
(5	,			5,811,779.
(6	,			04.044.=0:
(7				34,014,504.
(8	,	ENEFITS		
(9	DEFERRED CREDIT			36,539,821.
Total	. (Column (b) must equal Form 990, Part X, col. (B) line	25.)	·····	204,589,424.
2	schility for upportain tay positions. In Dort VIII. provide	the tout of the feetnets to	the ergenization's financial statements	that rangets tha

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

onedate b (1 only 600) 2010					
Part XI Reconciliation	of Revenue per Au	dited Financia	al Statements With	Revenue per	Return

га	TAI   neconclitation of nevertide per Addited Financial States	Hellis Milli Venel	iue pei nei	uii	1.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.				
1	Total revenue, gains, and other support per audited financial statements		<u> </u>	1	621,215,	918.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1		<u>.</u>	3	621,215,	918.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
_	Add lines 4a and 4b			ŀc		0.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				621,215,	918.
Pa	rt XII Reconciliation of Expenses per Audited Financial State		enses per Re	etu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12					
1	Total expenses and losses per audited financial statements			4 I	563,028,	
2			_	-		441.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1		•		441.
а	Donated services and use of facilities	2a		_		441.
a b	• • •	2a		-		441•
a b c	Donated services and use of facilities	2a   2b   2c				441•
b c d	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a   2b   2c   2d				
b c d	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a   2b   2c   2d	2	2e		0.
b c d	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a   2b   2c   2d	2	2e	563,028,	0.
b c d	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a   2b   2c   2d	2	2e	563,028,	0.
b c d e	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a   2b   2c   2d	2	2e	563,028,	0.
b c d e 3 4 a b	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a   2b   2c   2d	2	2e		0.
b c d e 3 4 a b	Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a   2b   2c   2d   4a   4b   58,81	0,586.	2e 3	563,028, 58,810, 621,839,	0. 441.

#### Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART IV, LINE 2B:

PURSUANT TO SECTION 74.3013 OF THE TEXAS PROPERTY CODE, THE COOPERATIVE

ESTABLISHED AN ECONOMIC DEVELOPMENT FUND WITH AMOUNTS DESIGNATED UNCLAIMED

UNDER STATE LAW. AMOUNTS DEPOSITED INTO THE ECONOMIC DEVELOPMENT FUND ARE

APPROVED BY THE STATE OF TEXAS AND CAN ONLY BE USED FOR THE STIMULATION

AND IMPROVEMENT OF BUSINESS AND COMMERCIAL ACTIVITY FOR ECONOMIC

DEVELOPMENT IN RURAL COMMUNITIES. ANY AMOUNTS SO DEPOSITED INTO THE

ECONOMIC DEVELOPMENT FUND ARE STILL PAYABLE TO THE PERSON TO WHOM THE

ORIGINAL PAYMENT WAS MADE BUT UNCLAIMED.

ALSO PURSUANT TO SECTION 74.3013 OF THE TEXAS PROPERTY CODE, THE

DESIGNATED UNCLAIMED UNDER STATE LAW. AMOUNTS DEPOSITED INTO THE ENERGY

EFFICIENCY ASSISTANCE FUND ARE APPROVED BY THE STATE OF TEXAS AND CAN ONLY

BE USED TO ASSIST MEMBERS OF AN ELECTRIC COOPERATIVE IN REDUCING THEIR

ENERGY CONSUMPTION AND ELECTRICITY BILLS. ANY AMOUNTS SO DEPOSITED INTO

THE ENERGY EFFICIENCY ASSISTANCE FUND ARE STILL PAYABLE TO THE PERSON TO

WHOM THE ORIGINAL PAYMENT WAS MADE BUT UNCLAIMED.

ALSO PURSUANT TO SECTION 74.3013 OF THE TEXAS PROPERTY CODE, THE

COOPERATIVE HAS ESTABLISHED A SCHOLARSHIP FUND WITH AMOUNTS DESIGNATED

UNCLAIMED UNDER STATE LAW. THE AMOUNTS DEPOSITED INTO THE SCHOLARSHIP FUND

ARE APPROVED BY THE STATE OF TEXAS AND CAN ONLY BE USED FOR SCHOLARSHIPS

TO ENABLE STUDENTS FROM RURAL AREAS TO ATTEND COLLEGE, TECHNICAL SCHOOL,

OR OTHER POST SECONDARY EDUCATION INSTITUTION. ANY AMOUNTS SO DEPOSITED

INTO THE SCHOLARSHIP FUND ARE STILL PAYABLE TO THE PERSON TO WHOM THE

ORIGINAL PAYMENT WAS MADE BUT UNCLAIMED.

#### PART X, LINE 2:

THE COOPERATIVE FOLLOWS THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA.

THE PRIMARY TAX POSITION OF THE COOPERATIVE IS ITS FILING STATUS AS A TAX

EXEMPT ENTITY. THE COOPERATIVE DETERMINED THAT IT IS MORE LIKELY THAN NOT

THAT ITS TAX POSITIONS WILL BE SUSTAINED UPON EXAMINATION BY THE INTERNAL

REVENUE SERVICE (IRS) AND THAT ALL TAX BENEFITS ARE LIKELY TO BE REALIZED

UPON SETTLEMENT WITH TAXING AUTHORITIES.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PATRONAGE CAPITAL ALLOCATED OR TO BE ALLOCATED

58,810,586.

Part XIII Supplemental Information (continued)

Part X Other Liabilities. See Form 990, Part X, line 25.	
(a) Description of liability	(b) Amount
UNCLAIMED PROPERTY DEFERRED CREDIT	7,768,068.
PEC POWER OF CHANGE ROUNDUP & COMMUNITY GRANTS LIABILITY	96,801.
TRANSMISSION COST OF SERVICE OVER-RECOVERY	5,995,281.
LCRA FUEL & POWER COST RECOVERY FACTOR REGULATORY LIABILITY	16,108,624.
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#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	.דכ דו.דרייםו	C COOPERATI	WE INC				Employer identification number 74-0828412
Part I General Information on Grants		C COOLERALI	VE, INC.				74 0020412
Does the organization maintain record criteria used to award the grants or as     Describe in Part IV the organization's	sistance?orocedures for mon	toring the use of grant	funds in the Unite	ed States.			Yes X No
Part II Grants and Other Assistance recipient that received more that	_				anization answered "	Yes" on Form 990, Par	t IV, line 21, for any
1 (a) Name and address of organization or government		(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
PEC UNITED CHARITIES P.O. BOX 1 JOHNSON CITY, TX 78636	74-2491188	501(C)(3)	100,000.	0.			ANNUAL CONTRIBUTION TO SUPPORT THE CHARITIES'
					_		
2 Enter total number of section 501(c)(3	) and government o	rganizations listed in th	ne line 1 table				▶1.

3 Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
SCHEDULE I, PART IV:					
PURSUANT TO ITS COMMUNITY SUPPORT	POLICY,	THE COOPER	ATIVE SUPP	ORTS	
EMPLOYEE GIVING CORPORATE MATCHING	PROGRAM	, SCHOOLS,	CHARITIES	, CIVIC	
ORGANIZATIONS, VOLUNTEER FIRE DEPA	RTMENTS .	AND THE LI	KE IN THE		
TWENTY-FOUR COUNTY AREA IN WHICH I	T PROVID	ES ELECTRI	CITY TO IT	S	
MEMBERS. SUPPORT THROUGH GRANTS AN	D DONATI	ONS IS PRO	VIDED THRO	UGH	
VARIOUS PROGRAMS, INCLUDING THE PE	C COMMUN	ITY GRANTS	PROGRAM,		
EDUCATIONAL SUPPORT PROGRAM, MEMBE	R ASSIST	ANCE PROGR	AM AND SPE	CIAL	
REQUESTS. THE COOPERATIVE'S WEBSIT	E, WWW.P	EC.COOP/OU	R-COMMUNIT	Υ,	

### **SCHEDULE J** (Form 990)

**Compensation Information** 

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

PEDERNALES ELECTRIC COOPERATIVE, INC. Employer identification number 74-0828412

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

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

Schedule J (Form 990) 2019

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.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) JULIE PARSLEY	(i)	411,173.	60,000.	22,972.	28,000.	14,099.	536,244.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) EDWARD A DAUTERIVE	(i)	321,743.	59,647.	46,176.	17,710.	44,094.	489,370.	0.
CHIEF OPERATIONS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DON BALLARD	(i)	324,076.	58,478.	45,839.	28,000.	14,042.	470,435.	0.
GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOHN DAVIS	(i)	299,658.	52,674.	37,833.	28,000.	36,164.	454,329.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) LAWANDA PARNELL	(i)	325,011.	57,685.	22,370.	3,708.	12,790.	421,564.	0.
CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) WAYNE MCKEE	(i)	253,928.	64,184.	44,278.	16,388.	33,494.	412,272.	0.
VP - OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) BRIDGET HEADRICK	(i)	237,243.	43,684.	36,685.	24,788.	36,507.	378,907.	0.
VP - COMPLIANCE & REGULATORY	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DAVID THOMPSON	(i)	226,645.	33,289.	37,749.	24,318.	43,363.	365,364.	0.
VP - MARKETS	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MAURICIO VIESCA	(i)	239,669.	44,247.	19,989.	24,952.	29,606.	358,463.	0.
EVP - PUBLIC AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) RICHARD ARELLANO	(i)	239,197.	33,289.	39,926.	24,318.	20,766.	357,496.	0.
VP - SAFETY & SUPPORT SVCS	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) WESLEY BURNS	(i)	237,116.	32,969.	29,246.	24,318.	32,271.	355,920.	0.
VP - HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) TIMOTHY NANCE	(i)	236,835.	33,289.	40,486.	16,453.	24,045.	351,108.	0.
VP - MEMBER SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) FREDDY WOLFF	(i)	239,559.	33,289.	38,157.	24,318.	13,279.	348,602.	0.
VP - CONTROLLER	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) AISHA HAGEN	(i)	239,582.	33,289.	19,276.	24,318.	21,283.	337,748.	0.
ASSOCIATE GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) BRIAN GEDRICH	(i)	233,050.	29,979.	22,645.	19,731.	28,539.	333,944.	0.
VP - ENGINEERING	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) ROBERT PETERSON	(i)	231,302.	30,245.	23,736.	14,584.	13,029.	312,896.	0.
PRINCIPAL DESIGN & FIELD ENGINEER	(ii)	0.	0.	0.	0.	0.	0.	0.

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	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(17) DENNIS HINSON	(i)	123,734.	16,331.	120,959.	12,664.	13,577.	287,265.	0.
DIRECTOR - INFORMATION TECHNOLOGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(18) STEPHEN MALDONADO	(i)	187,048.	15,311.	21,387.	12,199.	33,990.		0.
DIRECTOR - REGIONAL OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(19) JOE LOCKHART	(i)	171,128.	13,970.	30,998.		26,336.		0.
DIRECTOR - REGIONAL OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(20) NATHAN BURNS	(i)	172,286.	13,503.	30,390.	11,125.	7,243.		0.
DIRECTOR - REGIONAL OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
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 4A:
THE FOLLOWING INDIVIDUAL RECEIVED A SEVERANCE PAYMENT THAT IS INCLUDED IN
OTHER REPORTABLE COMPENSATION IN PART II, COLUMN B (III):
DENNIS HINSON - \$ 101,911

#### SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

PEDERNALES ELECTRIC COOPERATIVE, INC. Employer identification number 74-0828412

FORM 990, PART I, LINE 19:

THE NET LOSS REPORTED ON PART I, LINE 19 INCLUDES AN EXPENSE FOR PATRONAGE DIVIDENDS ALLOCATED TO THE PATRONS BASED ON NET OPERATING INCOME(LOSS). IN GENERAL, WHEN AN ELECTRIC COOPERATIVE BASES THE PATRONAGE DIVIDEND CALCULATION ON ITS NET OPERATING INCOME(LOSS), PAGE 1, PART I, LINE 19 - REVENUE LESS EXPENSES - WILL REFLECT THE AMOUNT OF NON-OPERATING INCOME(LOSS) NOT ALLOCATED. FOR THE CURRENT YEAR, PAGE 1, PART I, LINE 19, HOWEVER, REPORTS NET LOSS OF \$623,109, WHICH INCLUDES THE INCOME STATEMENT EFFECT OF ACCRUED UNBILLED REVENUE.

THE GAAP BASIS FINANCIAL STATEMENTS INCLUDE AN ACCRUAL FOR UNBILLED REVENUE BECAUSE THE COOPERATIVE'S BILLING CYCLE DOES NOT END ON THE LAST DAY OF THE MONTH. THEREFORE, IT HAS REVENUE IN DECEMBER OF EACH YEAR THAT IT HAS EARNED BUT WILL NOT BILL UNTIL THE FIRST BILLING CYCLE OF THE FOLLOWING YEAR. THE COOPERATIVE ESTIMATES THIS REVENUE AND RECORDS IT AS ACCRUED UNBILLED REVENUE IN ORDER TO MATCH THE REVENUE WITH THE YEAR EARNED. HOWEVER, THE COOPERATIVE ALLOCATES THE REVENUE TO MEMBERS IN THE YEAR IT IS BILLED RATHER THAN WHEN ACCRUED. THIS TIMING DIFFERENCE IS FAIR AND EQUITABLE BECAUSE IT MATCHES THE PATRONAGE DIVIDEND ALLOCATED WITH THE BILLING RECORDS USED TO ALLOCATE THE MARGINS.

DUE TO THE TIMING OF WHEN THE COOPERATIVE ALLOCATES ACCRUED UNBILLED REVENUE, PAGE 1 , PART I, LINE 19 ANNUALLY REPORTS NET INCOME EQUAL TO THE NET INCREASE IN ACCRUED UNBILLED REVENUE OR A NET LOSS EQUAL TO THE NET DECREASE IN UNBILLED REVENUE PLUS NON-OPERATING MARGINS RETAINED.

Name of the organization  PEDERNALES ELECTRIC COOPERATIVE, INC.	Employer identification number 74-0828412
THE FOLLOWING SCHEDULE IS PROVIDED TO FURTHER EXPLAIN TH	E IMPACT OF
THIS TRANSACTION:	
ADD: ACCRUED UNBILLED REVENUE 12/31/19	\$26,250,305
LESS: ACCRUED UNBILLED REVENUE 12/31/18	(27,772,229)
ADD: NON-OPERATING MARGINS	898,815
(A) - NET LOSS ON PAGE 1, PART I, LINE 19	\$ (623,109)
(B) - BENEFITS PAID TO MEMBERS (I.E. PATRONAGE DIVIDENDS	3),
PART I, LINE 14	\$58,810,586
TOTAL 2019 NET MARGIN PER FINANCIAL STATEMENTS (A + B)	\$58,187,477
FORM 990, PART VI, SECTION A, LINE 4:	
DURING THE YEAR, THE BYLAWS OF THE COOPERATIVE WERE AMEN	DED. THE FOLLOWING
IS A SUMMARY OF CHANGES:	
ARTICLE I - MEMBERS	
SECTION 1, MEMBERSHIP PROCEDURE, WAS AMENDED TO ALSO INC	LUDE "ENERGY" IN
THE DEFINITION OF ELECTRIC SERVICE.	
ARTICLE II - MEETINGS OF MEMBERS	
SECTION 1, ANNUAL MEETING, WAS AMENDED TO STATE THE PURP	OSES OF THE ANNUAL
MEENTING ADE NO ANNOTINGE THE ELECTION OF DIDECTORS AND TO	ANCACH CHCH OHUED

SECTION 1, ANNUAL MEETING, WAS AMENDED TO STATE THE PURPOSES OF THE ANNUAL MEETING ARE TO ANNOUNCE THE ELECTION OF DIRECTORS AND TRANSACT SUCH OTHER BUSINESS AS LISTED IN THE NOTICE OF THE ANNUAL MEETING.

SECTION 5, MEMBER MEETING QUORUM, WAS AMENDED TO CLARIFY THAT A QUORUM IS

NOT RELIANT ON MEMBERS BEING PRESENT IN PERSON AT A MEMBER MEETING.

Name of the organization PEDERNALES ELECTRIC COOPERATIVE, INC.

Employer identification number 74-0828412

SECTION 8, BALLOTS, WAS AMENDED TO CLARIFY THAT MEMBER VOTING BY BALLOT
WILL NOT TAKE PLACE IN PERSON AT MEMBER MEETINGS. ALL BALLOTS MUST BE FILED
FOR CERTIFICATION WITH THE ELECTION SERVICE PROVIDER NO LATER THAN 7 DAYS
BEFORE A MEMBER MEETING TO BE VALID AT SAID MEETING.

SECTION 9, RECORD DATE, WAS AMENDED TO STATE THAT THE RECORD DATE FOR

VOTING IS 8 DAYS BEFORE THE DATE OF THE MEMBER MEETING AND A PARTY/PERSON

MUST BECOME A MEMBER ON SUCH DATE IN ORDER TO VOTE IN THE ANNUAL DIRECTOR

ELECTION.

A COMPLETE COPY OF THE BYLAWS CAN BE FOUND ON THE COOPERATIVE'S WEBSITE AT:

HTTPS://WWW.PEC.COOP/ABOUT-US/YOUR-COOPERATIVE/DOCUMENT-CENTER/

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

THE COOPERATIVE WAS FORMED BY THE MEMBERS TO PROVIDE ELECTRIC SERVICE OR ENERGY AT COST ON A COOPERATIVE BASIS.

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

THE MEMBERS OF THE COOPERATIVE VOTE ON THE BOARD OF DIRECTORS. ELECTIONS

ARE DONE ON A ONE MEMBER ONE VOTE BASIS THROUGH USE OF SINGLE MEMBER VOTING

DISTRICTS VOTING METHODOLOGY.

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

THE FOLLOWING ACTS REQUIRE APPROVAL OF THE MEMBERS OF THE COOPERATIVE:

- 1. DISSOLUTION/LIQUIDATION OF THE COOPERATIVE
- 2. MERGER OR CONSOLIDATION OF THE COOPERATIVE WITH ANOTHER ORGANIZATION
- 3. DISPOSAL OF A SUBSTANTIAL PORTION OF THE COOPERATIVE'S ASSETS
- 4. AMENDMENTS TO ARTICLES OF INCORPORATION

Name of the organization PEDERNALES ELECTRIC COOPERATIVE, INC.

Employer identification number 74-0828412

ADDITIONALLY, PEC BYLAWS RESERVE TO MEMBERSHIP THE POWER TO REMOVE

DIRECTORS FROM THE BOARD BY MAJORITY VOTE EITHER BY FULL MEMBERSHIP OR BY

DISTRICT. IF THE VOTE IS FOR THE FULL MEMBERSHIP, THE PETITION MUST BE

SIGNED BY 5% OF THE MEMBERSHIP. IF THE VOTE IS LIMITED TO THE DIRECTOR'S

DISTRICT, THEN THE PETITION MUST BE SIGNED BY 15% OF THE MEMBERS OF THE

RESPECTIVE DISTRICT.

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

MANAGEMENT PRESENTED A COPY OF THE FORM 990 TO THE BOARD FOR REVIEW AND APPROVAL. THIS ACTION WAS TAKEN AT THE BOARD MEETING BEFORE FILING THE FORM 990.

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

THE CONFLICT OF INTEREST POLICY REQUIRES ANNUAL AND ONGOING COMPLETION OF A CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM BY ALL DIRECTORS, OFFICERS, KEY EMPLOYEES, OR MANAGERS OF THE COOPERATIVE. THE FORM, WHICH IS PART OF THE POLICY, INCLUDES AN AFFIRMATION THAT THE INDIVIDUAL WILL INFORM THE BOARD OF ANY NEW CONFLICT AFFECTING THEMSELVES OR ANY OTHER PERSON.

EACH YEAR, THESE DOCUMENTS ARE SOLICITED AND GATHERED BY THE CUSTODIAN OF THESE RECORDS, WHICH INCLUDES THE BOARD'S SECRETARY FOR BOARD MEMBERS AND THE COOPERATIVE'S ETHICS OFFICER AND HUMAN RESOURCES DEPARTMENT FOR APPLICABLE EMPLOYEES. APPLICABLE PERSONS WHO JOIN THE COOPERATIVE ARE SUBJECT TO ADHERE TO THE POLICY AND ARE REQUIRED TO FILE THE FORM AT THE OUTSET OF THEIR EMPLOYMENT OR DIRECTORSHIP. THE COMPLETED BOARD OF DIRECTORS DISCLOSURE AFFIRMATIONS ARE FORMALLY ACCEPTED BY THE BOARD PRESIDENT IN A MEETING OPEN TO THE PUBLIC AND ARE PART OF THE PUBLIC MINUTES OF THE COOPERATIVE.

Name of the organization PEDERNALES ELECTRIC COOPERATIVE, INC. Employer identification number 74-0828412

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

COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER IS ANNUALLY REVIEWED AND

ADJUSTED BASED ON THE CEO PERFORMANCE EVALUATION POLICY. PURSUANT TO THE

POLICY, THE VICE PRESIDENT OF THE BOARD IS DELEGATED THE RESPONSIBILITY FOR

FACILITATING THE ANNUAL PERFORMANCE EVALUATION PROCESS. SUCH ANNUAL PROCESS

INCLUDES AN EVALUATION BY EACH DIRECTOR OF THE CEO'S ACHIEVEMENT OF

CORPORATE METRICS AS DEFINED IN THE COOPERATIVE'S CURRENT STRATEGIC PLAN,

THE ACHIEVEMENT OF CURRENT YEAR STRATEGIC INITIATIVES AND THE FULFILLMENT

OF HIS/HER PRIMARY MANAGEMENT RESPONSIBILITIES. THE CEO ALSO PERFORMS A

SELF-ASSESSMENT WITH RESPECT TO THE SAME CRITERIA. THE VICE PRESIDENT

COMPILES AND DISCUSSES THE RESULTS WITH THE BOARD IN EXECUTIVE SESSION.

THE CONSENSUS ARRIVED AT FOLLOWING THESE DISCUSSIONS AND THE SETTING OF

GOALS FOR THE CEO FOR THE UPCOMING YEAR ARE USED FOR ADJUSTING

COMPENSATION.

COMPENSATION FOR GENERAL COUNSEL IS ANNUALLY REVIEWED AND ADJUSTED BASED ON THE GENERAL COUNSEL PERFORMANCE EVALUATION POLICY. PURSUANT TO THE POLICY, THE VICE PRESIDENT OF THE BOARD IS DELEGATED THE RESPONSIBILITY FOR FACILITATING THE ANNUAL PERFORMANCE EVALUATION PROCESS. SUCH ANNUAL PROCESS INVOLVES (1) AN EVALUATION BY THE BOARD OF THE ACHIEVEMENT OF GOVERNANCE AND BOARD SUPPORTED RESPONSIBILITIES, (2) AN EVALUATION BY THE CEO OF THE ACHIEVEMENT OF CORPORATE LEGAL RESPONSIBILITIES AND RELATED STRATEGIC INITIATIVES, AND (3) A SELF-ASSESSMENT BY GENERAL COUNSEL OF THE ACHIEVEMENT OF BOTH GOVERNANCE/DIRECTOR RESPONSIBILITIES AND CORPORATE LEGAL RESPONSIBILITIES AND DISCUSSES THE RESULTS WITH THE BOARD AND CEO IN EXECUTIVE SESSION. THE CONSENSUS ARRIVED AT FOLLOWING THESE DISCUSSIONS AND THE SETTING OF GOALS FOR THE GENERAL COUNSEL FOR THE UPCOMING YEAR ARE USED FOR ADJUSTING COMPENSATION.

THE COMPENSATION FOR ALL OTHER EMPLOYEES OF THE COOPERATIVE, INCLUDING THOSE MEETING THE DEFINITION OF EMPLOYEE OFFICERS AND KEY EMPLOYEES, IS GOVERNED BY THE EMPLOYEE COMPENSATION POLICY AND IS SET BASED ON A COMPREHENSIVE COMPENSATION ASSESSMENT THAT IS RUN ANNUALLY TO DETERMINE MARKET VALUE FOR THE RESPECTIVE POSITIONS. THE CEO IS RESPONSIBLE FOR IMPLEMENTING THE POLICY AND MAY USE OUTSIDE CONSULTANTS AND EXPERTS TO PROVIDE OBJECTIVE ASSESSMENTS AND BENCHMARKING COMPARISONS TO INDUSTRY-WIDE COMPENSATION TRENDS AND SURVEYS IN ORDER TO SET THE MARKET VALUE OF EACH RESPECTIVE POSITION. SUCH BENCHMARKING COMPARISONS INCLUDE OTHER COOPERATIVES, PUBLIC UTILITIES AND PRIVATELY-OWNED OR INVESTOR-OWNED UTILITIES AS COMPARED TO THE SIZE AND COMPLEXIBILITY OF THE COOPERATIVE. COMPENSATION IS THEN TARGETED FOR 75% OF A POSITION'S MARKET VALUE. OTHER FACTORS FOR SETTING COMPENSATION INCLUDE THE NATURE AND QUALIFICATIONS FOR THE JOB, TRAINING, EXPERIENCE, INDIVIDUAL PERFORMANCE WITH RESPECT TO PERFORMANCE METRICS, FINANCIAL RESOURCES OF THE COOPERATIVE AND OTHER RELEVANT FACTORS.

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

THE COOPERATIVE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, ALL

OTHER BOARD OPERATING POLICIES AND FINANCIAL STATEMENTS FOR THE MOST

RECENTLY COMPLETED CALENDAR YEAR ARE AVAILABLE TO THE PUBLIC ON THE

COOPERATIVE'S WEBSITE AT

HTTPS://WWW.PEC.COOP/ABOUT-US/YOUR-COOPERATIVE/DOCUMENT-CENTER/.

MEMBERS OF THE COOPERATIVE MAY BE ABLE TO REQUEST EXISTING RECORDS NOT

POSTED ON THE WEBSITE THROUGH THE OPEN RECORDS REQUEST PROCESS OUTLINED ON
THE COOPERATIVE'S WEBSITE.

Name of the organization PEDERNALES ELECTRIC COOPERATIVE, INC.

Employer identification number 74-0828412

FORM 990, PART VII, COLUMN F:

IN ORDER TO PROVIDE RETIREMENT BENEFITS, THE COOPERATIVE PROVIDES A

DEFINED BENEFIT PLAN TO EMPLOYEES MEETING THE ELIGIBILITY REQUIREMENTS.

HOWEVER, THE PLAN WAS CLOSED TO NEW PARTICIPANTS AFTER JANUARY 1, 2006.

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

SUCH PLAN. ADDITIONALLY, THE COOPERATIVE PARTICIPATES IN A DEFINED

CONTRIBUTION PLAN UNDER SECTION 401(K) OF THE INTERNAL REVENUE CODE.

EMPLOYER CONTRIBUTIONS TO THE PLAN ARE AVAILABLE TO PARTICIPATING

EMPLOYEES, INCLUDING OFFICERS AND HIGHLY COMPENSATED EMPLOYEES, MEETING

THE ELIGIBILITY REQUIREMENTS OF THE PLAN.

THE COOPERATIVE ALSO PROVIDES HEALTH, DENTAL, VISION, AND LIFE

INSURANCE TO ALL ELIGIBLE EMPLOYEES THROUGH A QUALIFIED PLAN. THE

AMOUNT REPORTED ON PART VII COLUMN (F) FOR THE OFFICERS AND HIGHLY

COMPENSATED EMPLOYEES IS COMPRISED OF THE ACTUARIAL INCREASE ASSOCIATED

WITH PARTICIPATION IN THE DEFINED BENEFIT PLAN, IF APPLICABLE, THE TOTAL

AMOUNT CONTRIBUTED BY THE COOPERATIVE TO THE 401(K) PLAN AND INSURANCE

PAID ON BEHALF OF AND FOR BENEFIT OF THE OFFICERS AND HIGHLY

COMPENSATED EMPLOYEES.

IN ADDITION TO THE ABOVE PLANS, THE COOPERATIVE ALSO PROVIDES POSTRETIREMENT MEDICAL BENEFITS THROUGH AN UNFUNDED WELFARE BENEFIT PLAN.
THE VALUE OF THESE BENEFITS HAS NOT BEEN ESTIMATED.

FORM 990, PART VIII, LINE 2:

PATRONAGE DIVIDENDS RESULT FROM THE PAYMENT OF INTEREST FROM

COOPERATIVE BANKS AND THE PURCHASE OF SUPPLIES AND SERVICES FROM OTHER

COOPERATIVE ORGANIZATIONS. THE EXPENSES ASSOCIATED WITH PURCHASES FROM

Name of the organization PEDERNALES ELECTRIC COOPERATIVE, INC.

Employer identification number 74-0828412

AND PAYMENTS TO SUCH COOPERATIVE ORGANIZATIONS ARE A DIRECT COMPONENT
OF COST OF THE ELECTRIC SERVICE PROVIDED BY THE COOPERATIVE TO ITS
MEMBERS.

#### FORM 990, PART IX:

THE COOPERATIVE UTILIZES THE UNIFORM SYSTEM OF ACCOUNTS (USOA)

ESTABLISHED BY THE RURAL UTILITIES SERVICE (RUS). IN ACCORDANCE WITH

FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS

CODIFICATION (ASC) 980, REGULATED OPERATIONS, THE COOPERATIVE RECORDS

CERTAIN ASSETS AND LIABILITIES IN ACCORDANCE WITH THE ECONOMIC EFFECTS

OF THE RATE MAKING PROCESS. THE USOA DOES NOT RECORD EXPENSES IN THE

GENERAL EXPENSE CATEGORIES PROVIDED ON PART IX LINES 1-23. FOR FORM 990

REPORTING PURPOSES, THE COOPERATIVE SEPARATELY REPORTS DONATIONS,

SALARIES AND WAGES, EMPLOYEE BENEFITS AND PAYROLL TAXES THAT ARE

ALLOCATED IN ACCORDANCE WITH ITS ACCOUNTING SYSTEM. OTHER EXPENSES

DESCRIBED IN LINES 1-23, HOWEVER, ARE REPORTED ON LINE 24 UNDER THE

EXPENSE CATEGORIES REQUIRED BY THE USOA.

### FORM 990, PART IX, LINE 4:

PURSUANT TO THE FORM 990 INSTRUCTIONS, THE AMOUNT OF PATRONAGE

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

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

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

COOPERATIVE ALLOCATES PATRONAGE CAPITAL TO AND, THEREFORE, OPERATES AT

COST WITH ITS PATRONS.

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

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

Name of the organization **Employer identification number** PEDERNALES ELECTRIC COOPERATIVE, INC. 74-0828412 ON A COOPERATIVE BASIS" AS SUBORDINATION OF CAPITAL, DEMOCRATIC CONTROL, AND OPERATION AT COST. THE COOPERATIVE OPERATES AT COST THROUGH THE ALLOCATION OF TRUE PATRONAGE DIVIDENDS (ALSO REFERRED TO AS ALLOCATIONS OF PATRONAGE CAPITAL) TO ITS PATRONS. PATRONAGE DIVIDENDS ARE CONSIDERED PAID IF THE ALLOCATION IS MADE (1) PURSUANT TO A PRE-EXISTING OBLIGATION, (2) FROM THE MARGINS PRODUCED FROM THE TRANSACTIONS DONE WITH OR FOR PATRONS, AND (3) IN A FAIR AND EQUITABLE MANNER ON THE BASIS OF PATRONAGE (I.E. PURCHASES). ADDITIONALLY, THE ALLOCATION OF PATRONAGE DIVIDENDS SHOULD BE MADE WITHIN A REASONABLE TIME PERIOD AFTER THE CLOSE OF THE COOPERATIVE'S YEAR-END OF DECEMBER 31. EACH ONE OF THESE REQUIREMENTS FOR A TRUE PATRONAGE DIVIDEND IS PROVIDED FOR IN THE NONPROFIT OPERATION ARTICLE OF THE COOPERATIVE'S

THE AMOUNT REPORTED ON PART IX, LINE 4 REPRESENTS THE AMOUNT OF

PATRONAGE CAPITAL THAT IS ALLOCATED TO THE PATRONS RESULTING FROM THEIR

PURCHASE OF ELECTRICITY FROM THE COOPERATIVE FOR THE 2019 CALENDAR

YEAR. BECAUSE PATRONAGE DIVIDENDS ARE THE PROCESS BY WHICH THE

COOPERATIVE OPERATES AT COST WITH ITS PATRONS AND THEREBY A KEY

COMPONENT TO ACCOMPLISHING ITS EXEMPT PURPOSE, THE COOPERATIVE HAS

REPORTED SUCH AMOUNTS AS AN EXPENSE FOR FORM 990 REPORTING. PATRONAGE

DIVIDENDS ARE NOT AN EXPENSE FOR FINANCIAL STATEMENTS PREPARED IN

ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, HOWEVER.

FORM 990, PART IX, LINES 5-7:

SALARIES AND WAGES ARE ALLOCATED TO ASSET, LIABILITY, AND EXPENSE

ACCOUNTS BASED ON THE ACCOUNTING SYSTEM DESCRIBED ABOVE. THE FOLLOWING

BYLAWS.

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization PEDERNALES ELECTRIC COOPERATIVE, INC.	Employer identification number 74-0828412
SCHDULE RECONCILES AMOUNTS REPORTED ON LINES 5-7 TO TOTAL	L WAGES ACCRUED
AND/OR PAID:	
TOTAL PER LINES 5-7	\$50,475,965
LESS: DIRECTOR FEES REPORTED ON FORMS 1099-MISC	(247,200)
LESS: EMPLOYEE OFFICER BENEFITS INCLUDED IN LINE 5	(226,607)
LESS: KEY EMPLOYEE BENEFITS INCLUDED IN LINE 5	(507,055)
PLUS: SALARIES & WAGES CAPITALIZED DIRECTLY TO PLANT	30,687,594
PLUS: SALARIES & WAGES CAPITALIZED/EXPENSED INDIRECTLY	
THROUGH CLEARING & OTHER ACCOUNTS	2,294,742
TOTAL WAGES ACCRUED AND/OR PAID	\$82,477,439
FORM 990, PART IX, LINE 24A:	
THE COOPERATIVE'S WHOLESALE POWER SUPPLIERS ARE THE LOWER	R COLORADO
RIVER AUTHORITY, AEP ENERGY PARTNERS, INC., CALPINE ENERGY	GY, AND EXELON
CORPORATION (CONSTELLATION). THE \$335,208,958 OF PURCHASI	ED POWER
EXPENSE, REPORTED ON LINE 24A, IS COMPRISED OF PAYMENTS I	MADE TO
WHOLESALE POWER SUPPLIERS AND AN ALLOCATION OF POWER SUPP	PLY EXPENSES.
FORM 990, PART IX, LINE 24D:	
ADMINISTRATIVE AND GENERAL EXPENSES ARE COMPRISED OF THE	FOLLOWING:
ADMINISTRATIVE & GENERAL	\$13,353,995
OFFICE SUPPLIES	6,526,410
PROFESSIONAL SERVICES	2,714,319
INJURIES & DAMAGES	534,246
PENSION & BENEFITS	58,569

Name of the organization  PEDERNALES ELECTRIC COOL	PERATIVE, INC.	Employer identification number 74-0828412
MISCELLANEOUS GENERAL		3,092,943
RENTS		690,616
MAINTENANCE OF GENERAL PLANT		32,023
TOTAL ADMIN & GENERAL EXP PER FINANCIA	AL STATEMENTS	\$27,003,121
LESS: RECLASS OF DIRECTOR FEES TO PART	IX, LINE 5	(247,200)
LESS: RECLASS OF LABOR TO PART IX, LIN	IES 5 & 7	(10,500,693)
LESS: RECLASS OF BENEFITS TO PART IX,	LINES 8-10	(4,041,069)
TOTAL ADMIN & GENERAL EXPENSE PER FORM	1 990, PART IX	\$12,214,159
FORM 990, PART IX, LINE 24E:		
OTHER EXPENSES ARE COMPRISED OF THE FO	DLLOWING:	
TRANSMISSION EXPENSE		\$ 3,618,495
SALES EXPENSE		301,908
OTHER DEDUCTIONS		1,632,370
TOTAL OTHER EXPENSES PER FORM 990, LI	IE 24E	\$ 5,552,773
FORM 990, PART XI, LINE 9, CHANGES IN	NET ASSETS:	
PATRONAGE CAPITAL ALLOCATED OR TO BE A	LLOCATED	58,810,586.
PATRONAGE CAPITAL RETIRED - TOTAL		-49,970,079.
PATRONAGE CAPITAL RETIRED - DISCOUNT		37,936,353.
NET CHANGE IN MEMBERSHIPS		671,569.
TOTAL TO FORM 990, PART XI, LINE 9		47,448,429.
FORM 990, PART XII, LINE 2C:		
THE BOARD OF DIRECTORS ASSIGNED MEMBER	RS TO AN AUDIT COMMI	TTEE TO
OVERSEE THE FINANCIAL STATEMENT AUDIT	AND SELECT THE INDE	PENDENT
932212 09-06-19	Scheo	dule O (Form 990 or 990-EZ) (2019)

#### 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.

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

2019 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

PEDERNALES ELECTRIC COOPERATIVE, INC.

Employer identification number 74-0828412

		<b>_</b>					
(a)	(b)	(c)	(e)	)	-		
Name, address, and EIN (if applicable)	Primary activity	Legal domicile (state of	me End-of-yea	r assets Direct			
of disregarded entity		foreign country)				entity	
			>				
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization a	answered "Yes" on Form 990	0, Part IV, line 34, l	because it had on	e or more related tax-e	kempt	
	(b)	(c)	(d)	(e)	(f)	(	<b>g)</b> 512(b)(13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling		512(b)(13) rolled
of related organization		foreign country)	section	status (if section	one or more related tax-exen  (f)  Direct controlling entity	en	tity?
				501(c)(3))		Yes	No
PEDERNALES ELECTRIC COOPERATIVE SCHOLARSHIP	TO PROVIDE SCHOLARSHIPS				PEDERNALES		
FUND - 74-2897600, 201 S. AVENUE F, JOHNSON	FOR POST-SECONDARY				ELECTRIC		
CITY, TX 78636	EDUCATION	TEXAS	501(C)(3)	PF	COOPERATIVE, INC	. X	

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.

	. , ,	,		<del> </del>			1		1	1	<u> </u>
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(i)	(j	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disproportiona		Code V-UBI	Gener	el or Percentag
of related organization		(state or	entity	(related, unrelated,	income	end-of-year		itions?	amount in box	mana	Percentag ownership er?
		foreign country)		Predominant income (related, unrelated, excluded from tax under sections 512-514)		assets		No	1 Lo oi contoadio	Vos	No
		oodiid y)					163	140	11 1 (1 01111 1000)	103	140
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Part IV 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(k contr ent	ti) ction b)(13) rolled tity?
		country)	country)		or tracty			Yes	No

Page 3

Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

1	During the tax year, did the organization engage in any of the following transactions	s with one or more r	elated organizations listed	in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a		X
	Gift, grant, or capital contribution to related organization(s)				1b		X
С	Gift, grant, or capital contribution from related organization(s)				1c		Х
	Loans or loan guarantees to or for related organization(s)				1d		Х
е	Loans or loan guarantees by related organization(s)				1e		Х
f	Dividends from related organization(s)				1f		X
	Sale of assets to related organization(s)				1g		Х
	Purchase of assets from related organization(s)				1h		Х
i	Exchange of assets with related organization(s)				1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х
_	•						
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х
- 1	Performance of services or membership or fundraising solicitations for related orga	nization(s)			11		Х
m	Performance of services or membership or fundraising solicitations by related orga	nization(s)			1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organizati	ion(s)			1n		Х
o	Sharing of paid employees with related organization(s)	( )			10	Х	
р	Reimbursement paid to related organization(s) for expenses				1p		Х
a	Reimbursement paid by related organization(s) for expenses				1a	Х	
'	(c)						
r	Other transfer of cash or property to related organization(s)				1r		Х
s	Other transfer of cash or property from related organization(s)				1s		Х
	If the answer to any of the above is "Yes," see the instructions for information on w					1	
		(b)		(d)			
	(a) Name of related organization	Transaction	(c) Amount involved	Method of determining amount inv	olved		
		type (a-s)		Ĭ			
	PEDERNALES ELECTRIC COOPERATIVE						
(1)	SCHOLARSHIP FUND	0	0.	N/A LESS THAN \$50,000			
	PEDERNALES ELECTRIC COOPERATIVE						
(2)	SCHOLARSHIP FUND	Q	0.	N/A LESS THAN \$50,000			
• /							
(3)							
• /							
(4)							
.,							
(5)							
. ,							
(6)							
	3 09-10-19	•		Schedule	R (For	m 990	2019

Page 4

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

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

(a)	(b)	(c)	(d)	(e) Are all partners sec 501(c)(3) orgs.?	(f)	(g)	(h	1)	(i)	(j	(k	k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners sec	Share of	Share of	Dispro	opor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gener	el or Percei	entage
of entity		(state or foreign	(related, unrelated, lexcluded from tax under	501(c)(3) oras.?	total	end-of-year	allocat	ions?	amount in box 20 Lof Schedule K-1	partr	er? owne	ership
		country)	sections 512-514)	Yes No	income	assets	Yes	Nο	(Form 1065)	Yes	NO	
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