Form 990

Department of the Treasury Internal Revenue Service

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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.



AF	or τη	e 2020 calendar year, or tax year beginning and	ending		
B c	heck if	e: C Name of organization		D Employer identifie	cation number
	Addre	B SOUTHWESTERN ELECTRIC COUPERATIVE INC.			
	Name Chang	e Doing business as		37-05255	75
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final	, 525 US ROUTE 40		800-637-8	
	termir ated			G Gross receipts \$	63,419,459.
	Amen	GREENVILLE, IL 02240		H(a) Is this a group re	turn
	Applie diam	F Name and address of principal officer: DODD1 WILDIAMS OK		for subordinates	? Yes X No
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
		empt status: 501(c)(3) 🛛 501(c) (12) ◀ (insert no.) 4947(a)(1) c	or 📃 527	If "No," attach a	list. See instructions
<u>ا ا</u>	Vebsi	te: ► WWW.SWECI.COM		H(c) Group exemption	n number 🕨
KF	orm o	f organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	L Year	of formation: 1939 N	State of legal domicile: IL
Pa	art I	Summary			
•	1	Briefly describe the organization's mission or most significant activities: AN EI			7E THAT
ő		PROVIDES ELECTRIC DISTRIBUTION SERVICE TO	ITS M	IEMBERS.	
Governance	2	Check this box 🕨 🦳 if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	
ove	3	Number of voting members of the governing body (Part VI, line 1a)			9
	4	Number of independent voting members of the governing body (Part VI, line 1b)		9	
ŝ	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			76
viti	6	Total number of volunteers (estimate if necessary)		6	0
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		0.	0.
Revenue	9	Program service revenue (Part VIII, line 2g)		63,191,680.	62,186,853.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		81,946.	57,997.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,157,884.	1,174,609.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		64,431,510.	63,419,459.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		36,891.	27,014.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		2,747,281.	6,942,782.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $\ _{.}$		836,999.	755,111.
u Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	0.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		59,957,495.	54,713,254.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		63,578,666.	62,438,161.
	19	Revenue less expenses. Subtract line 18 from line 12		852,844.	981,298.
s or			Be	ginning of Current Year	End of Year
Assets Balanc	20	Total assets (Part X, line 16)		61,381,608.	157,322,582.
tAs	21	Total liabilities (Part X, line 26)	1	11,240,905.	100,291,483.
FING	22	Net assets or fund balances. Subtract line 21 from line 20		50,140,703.	57,031,099.
Pa	art II	Signature Block			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

	Circulum of officer	Data									
Sign	Signature of officer	Date									
Here	REBECCA JACOBSON, CFO										
	Type or print name and title										
	Print/Type preparer's name Preparer's signature	Date Check PTIN									
Paid	KATHERINE LUTZKE, CPA KATHERINE LUTZKE, (CP 10/29/21 self-employed P01760889									
Preparer	Firm's name 🕒 CLIFTONLARSONALLEN LLP	Firm's EIN ▶ 41-0746749									
Use Only	Firm's address 2689 COMMERCE DRIVE NW, SUITE 201										
	ROCHESTER, MN 55901 Phone no. 507-280-2300										
May the II	RS discuss this return with the preparer shown above? See instructions	X Yes No									
032001 12-2	D32001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)										

	990 (2020) SOUTHWESTERN ELECTRIC C	OOPERATIVE	INC.	37-0525575	5 Page 2
Par	t III Statement of Program Service Accomplishments				
	Check if Schedule O contains a response or note to any line in this	s Part III			X
1	Briefly describe the organization's mission: THE CORPORATE PURPOSE AND GOAL IS, I				THE
	AUTHORITY GRANTED BY THE LAWS OF THE				
	COOPERATIVE'S ARTICLES OF INCORPORAT AND OTHER SERVICES TO ITS MEMBERS AT				
2	Did the organization undertake any significant program services during t			NOTOTINI WII	. 11
2	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	-		Y	es X No
3	Did the organization cease conducting, or make significant changes in h	now it conducts any i	orogram services?	,	es X No
U	If "Yes," describe these changes on Schedule O.		brogram services:	• •	
4	Describe the organization's program service accomplishments for each	of its three largest pro	ogram services, as	s measured by expense	es.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the a revenue, if any, for each program service reported.				
4a	(Code:) (Expenses \$ including grants o	of \$) (Reve	enue \$)
	THE COOPERATIVE PROVIDES ELECTRIC SE		3,618 MEMI	BERS IN BONI),
	MADISON, AND FAYETTE COUNTIES IN ILL	INOIS.			
4b	(Code:) (Expenses \$ including grants o	of \$) (Reve	enue \$)
4c	(Code:) (Expenses \$ including grants o			(<u>`</u>
40	(Code:) (Expenses \$ including grants o	1.2) (Rev	enue \$)
<u> </u>					
4d	Other program services (Describe on Schedule O.)		ropuo ¢	١	
4e	(Expenses \$ including grants of \$ Total program service expenses ►) (Rev	renue \$)	
				Forr	m 990 (2020)
032002	2 12-23-20				. ,
	3				

SOUTHWESTERN ELECTRIC COOPERATIVE INC.

1 bit the organization described in section 501(c)(c) or 4947(a)(1) (other than a private foundation? 1 X 2 XX a the organization require four of inder polytical campaign activities on behalf of or in opposition to candidates for public office? If ''se,' complete Schedule C, Part I 3 X 4 Section 501(c)((3) organization campaign activities on have a section 501(b) election in effect during the tax year? If ''se,' complete Schedule C, Part I 4 4 5 Section 501(c)((3) organization bat reduces membership dues, assessments, or similar and/or and/order args in lobbying activities or have a section 501(b) election in effect during the tax year? If ''se,' complete Schedule C, Part I 5 X 6 Did the organization match may doner advects during in which during the section 501(c)(0) region guaration that reduces are membership dues, assessments, or the environment, historic tand assess, or other similar added '', ''se,'' complete Schedule D, Part I 7 X 7 Did the organization match works of at, historical reasures, or other similar added '', ''se,'' complete Schedule D, Part II 8 X 9 Did the organization match or any organization that reduces as a cutodiant or any organization report an anount in Part X, line 21, tor schedule associal account liability, serve as a cutodiant or anount or anount to investment a management, credit regin, or dobt negolation services? Y X 9 X <th></th> <th></th> <th></th> <th>Yes</th> <th>No</th>				Yes	No
2 Is the organization engage in direct or indirect political campaign activities on behalt of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. 3 X 4 Section 801(c)(x) organizations. Do the organization engage in loobying activities, or have a section 801(h) election in effect 4 4 5 Is the organization ascento 801(c)(x). 901(c)(x) or 801(c)(x) or 901(c)(x) or 801(c)(x) or 8	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
 3 Did the organization engage in direct c publical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 4 Section 501(b) organizations. Did the organization engage in kotbying activities, or have a section 501(b) deciding in the section of the organization engage in kotbying activities, or have a section 501(b) decide on the organization matine and on any similar function. The section 501(b) decide on the organization matine and on any similar function or the section of the organization matine and other any similar functions are certer of the organization matine any dome adviced time or any similar function section 501(b) decide on the organization matine and other any similar functions are certer of the organization matine of a conservation assement, including essements to prevery energistice. Schedule D, Part II 9 Did the organization matine collectors of works of art, historical trassures, or other similar assets? If "Yes," complete Schedule D, Part II 9 Did the organization matine officients of update organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part II 9 Did the organization report an amount for index buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for indextinest in process in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for indextinest in process in Part X, line 12, this 15 % or more of its total assets reported in Part X, line 11? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for indextinest in process in Part X, line 12, this 15 % or more of its total assets reported in Part X, line 11? If "Yes," complete Schedule D, Part XI 12 Did the organization report an amount for indextines by any any "yes		If "Yes," complete Schedule A	1		Х
public office? If ''Yes, 'complete Schedule Q, Part I 3 X 4 4 4 5 8 Section 501(c)(6) organization. Did the organization engage in lobbying activities, or have a section 501(h) eluction in effect 4 6 16 the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amount on inscriment of amounts in such tudi Ndo a caccounts' for which doors have the right to provide active on the distribution or investment of amounts in such tudi os accounts' for which doors a section 501(c)(4). 5 X 6 Did the organization measure to a dimarute in such tudio a caccount's for which door accounts' for which and co account's for which and co account's for which and co account's for which and concount is active account is the active account is active account account is active account is active account is a	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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 Is the organization a section 501(h) 501(c)(k), 501	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
4 Section 501(kg) organizations. Did the organization engage in lobbying activities, or have a section 501(kg) election in effect during the kyre? // Yac, "complete Schedule C, Part II 4 5 Is the organization ascion 501(kg), 501(kg), or 501(kg) organization that receives membership dues, assessments, or similar amounts as defined in Mexame Procedure 1991.97 / Yac, "complete Schedule D, Part II 6 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 their dia conservation assement, including easements to the similar asset? // Yac, "complete Schedule D, Part III 6 X 7 Did the organization maintain any donor advised funds or any, similar funds or accounts? // Yac, "complete Schedule D, Part III 7 X 8 Did the organization reports on amount in Part X, line 21, for escinow or custodial account liability, serve as a custodian for anounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? 7 X 10 Did the organization report an amount for leand, buildings, and equipment in Part X, line 102, If Yac, "complete Schedule D, Part V 10 X 11 If the organization report an amount for leand, buildings, and equipment in Part X, line 12, If Yac, "complete Schedule D, Part V. 11 X 12 Did the organization report an amount for rematesconters. Forgan related in Part		public office? If "Yes," complete Schedule C, Part I	3		Х
5 Is the organization action 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 9819 # "Yes," complete Schedule Q, Part II S X 6 Did the organization markain any donar advised funds or any similar funds or accounts for which donos have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donos have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donos have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donos have the right to B Did the organization receive or hold a conservation easement, including assements to preserve open space, the environment, historic 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 cognization, hold assets in donor-restricted endowments # "Yes," complete Schedule D, Part W 8 X 10 Did the organization, ricetty or through a related organization, hold assets in donor-restricted endowments # "Yes," complete Schedule D, Part W 10 X 11 H organization report an amount for investments - other securities in Part X, line 10, I'Vs, "complete Schedule D, Part W 11 X 12 D dit be organization report an amount for investments - other securities in Part X, line 12, I'Vs, "complete Schedule D, Part W 11 X 13 D dit be organization neoport an amount for investments - other securi	4				
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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 distinution or investment of amount is note funds or accounts? If "Yes," complete Schedule D, Part II. C 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 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 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, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, Part I 10 X 10 If the organization, ensert any of the following questions is "Yes," then complete Schedule D, Part V, VII, VIII, IX, or X as applicable. 10 X 10 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part XI 11 X 11 Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part XI 11 X 11 Did the organization		similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>IF Yes</i> , 'complete Schedule D, Part II 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? 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 107. <i>IF Yes</i> , 'complete Schedule D, Part V 10 X 11 If the organization report an amount for investments - other securities in Part X, line 107. <i>IF Yes</i> , 'complete Schedule D, Part VI 11a X 12 Did the organization report an amount for investments - other securities in Part X, line 107. <i>IF Yes</i> , 'complete Schedule D, Part VII 11a X 13 Did the organization report an amount for investments - program related in Part X, line 107. <i>IF Yes</i> , 'complete Schedule D, Part VII 11a X 14 V ergonization report an amount for other assets in Part X, line 107. <i>IF Yes</i> , 'complete Schedule D, Part VII 11b X 14 X 11a X 11a X 15 Did the organization report an	6				
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 escrew 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? 9 X 10 Did the organization directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 X 11 the organization report an amount for inductions in "Yes," then complete Schedule D, Part VI 10 X 12 Did the organization report an amount for investments - other ascurities in Part X, line 127, If "Yes," complete Schedule D, Part VI 11a X 13 X Did the organization report an amount for other liabilities in Part X, line 127, If "Yes," complete Schedule D, Part VI 11a X 14 X Did the organization report an amount for other liabilities in Part X, line 257, If "Yes," complete Schedule D, Part X 11a X 14 X Did the organization asperate, independent audited financial statements for the tax year? 114 X		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yos," complete Schedule D, Part III Schedule D, Part III 8 X B Did the organization report an amount in Part X, line 21, for secrew 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? 9 X ID bit the organization report an amount in Part X, line 21, for secrew 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? 9 X ID bit the organization report an amount for line (D, Part IV) 11 11 X 10 X ID to the organization report an amount for investments - other securities in Part X, line 12/ If "Yes," complete Schedule D, Part VI 11 X 11 X ID to 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 X 11 X ID to the organization report an amount for other assets in Part X, line 25/ If "Yes," complete Schedule D, Part X 11 X ID to the organization sub field If Part S, "complete Schedule D, Part X 11 X 11 X ID to the organization netorichas seare rep	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
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amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X ID often complete Schedule D, Part IV 10 X 11 If the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 11 If the organization report an answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, DK, or X as applicable. 10 X 12 Did the organization report an amount for investments - other securities in Part X, line 10? // "Yes," complete Schedule D, Part VI 11a X 13 Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part VII 11a X 14 Did the organization report an amount for investments - other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part X 11e X 11 Did the organization report an amount for investments - other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part X 11e X 12 Did the organization report an amount for inter liabilities in Part X, line 15? // "Yes," complete Schedule D, Part X 11e X 12 Did the organization report an amount for other liabilitites in Part X, line 15? // "Yes," complete Sched		Schedule D, Part III	8		_X
If "Yes," complete Schedule D, Part IV 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 11 If the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 X 12 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 116 X 13 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 VI 116 X 14 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 X 116 X 111 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 116 X 112 Did the organization on bother other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 111 X 113 X Mather admension sinsparte Mather assets in Part X, line 25? If "Yes,"	9				
10 bits, complete Schedule D, Part V 11 11 the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? II'''es, "complete Schedule D, Part V 10 X 11 11 the organization, answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, VII, VII, VII, VII,		amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
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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 of grass income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II 17 X 19 Did the organization operate one or more than \$15,000 of grass income from gaming activities on Part VIII, line 9a? If "Yes," 19 X 20a X 20a X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a Did the organization report more than \$5,000 of grasts or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule H 20a X 20b 20a X 20b 20b 21 X 21 X <td< th=""><th></th><td>or more? If "Yes," complete Schedule F, Parts I and IV</td><td>14b</td><td></td><td>X</td></td<>		or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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or for foreign individuals? // f "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? // f "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? // f "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? // f "Yes," 19 X 20a Did the organization operate one or more hospital facilities? // f "Yes," complete Schedule H 20a X 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? // f "Yes," complete Schedule I, Parts I and II 20a X			15		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? <i>If "Yes," complete Schedule G, Part I</i> 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? <i>If "Yes," complete Schedule G, Part II</i> 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 	16				
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18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 18 X 19 Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 19 X 20a Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21 X	17				
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization operate on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X	18				
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b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X	~~				
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X					
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			200		
	21		21	x	
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Form 990 (2020)

Part IV Checklist of Required Schedules

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SOUTHWESTERN ELECTRIC COOPERATIVE INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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	23	X	
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		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u>x</u>
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			v
~~	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	00-		v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	00.		x
200	"Yes," complete Schedule L, Part IV	28c		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	~~~		x
0 4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	20		x
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		x
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	3 0a		- 23
U		35b		
36	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	330		
00		36		
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	50		<u> </u>
07	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	- 57		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 32			
b				
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
032004	¥ 12-23-20	Form	990	(2020)

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Form 990 (2020)

2020.04030 SOUTHWESTERN ELECTRIC COO 094-0821

020)	SOUTHWESTERN			
Sta	ements Regarding Other IRS	6 Filings and Tag	ax Compliance (co	ntinued)

			Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 76								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	L					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)								
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		└───					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	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).			v					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
C Co	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
ъа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	0.0		x					
h	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>							
u	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b							
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	00							
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>					
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
-	to file Form 8282?	7c							
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e							
f									
g									
h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?	8		L					
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-							
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a 63648965.								
		•							
a	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 930,821.								
122	amounts due or received from them.) [11b] 930,821. Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state?	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								
с	Enter the amount of reserves on hand								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		X					
	If "Yes," see instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								

Form **990** (2020)

032005 12-23-20

Form 990 (2020)

Part V

Form 990	(2020)
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Section A. Governing Body and Management

SOUTHWESTERN ELECTRIC COOPERATIVE INC.

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

<u>37-0525575</u> Page 6

Т

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. X

			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	9							
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent 1b	9							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	Х						
6	Did the organization have members or stockholders?	6	Х						
7a	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a	Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b	Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Х						
b	Each committee with authority to act on behalf of the governing body?		Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			1					
	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.)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	? 11a	Х						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a									
b									
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c							
13	Did the organization have a written whistleblower policy?	13	Х						
14	Did the organization have a written document retention and destruction policy?	14		X					
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		X					
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	availa	ble					
	for public inspection. Indicate how you made these available. Check all that apply.								
	X Own website X 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	, and finan	cial						
	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								
	ANNETTE HARTLIEB - 800-637-8667								
	525 US ROUTE 40, GREENVILLE, IL 62246								
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Form 990 (20	020) SOUTHWESTERN ELECTRIC COOPERATIVE INC. 37-	1525575	Page 7							
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated										
E	Employees, and Independent Contractors									
C	Check if Schedule O contains a response or note to any line in this Part VII									
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
1a Complete	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within th	e 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.

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

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

(A)	(B)	(C)		(D)	(E)	(F)					
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box, ur		box, unless person is both officer and a director/trust			n an	compensation	compensation	amount of	
	week						or/trustee)		from	from related	other
	(list any	rector						the	organizations	compensation	
	hours for	or di	ee			ated		organization	(W-2/1099-MISC)	from the	
	related	ustee	trust		e	suadi		(W-2/1099-MISC)		organization	
	organizations below	ual tr	tional		yolqr	t con /ee				and related organizations	
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations	
(1) BOBBY WILLIAMS JR	50.00	_	_		-		-				
CEO				х				232,076.	0.	104,275.	
(2) ANDREW JONES	50.00										
VP BUSINESS DEVELOPMENT						X		160,156.	0.	94,738.	
(3) MIKE WILLMAN	50.00										
VP OF OPERATIONS						X		152,945.	0.	81,983.	
(4) CHRISTOPHER BOTULINSKI	50.00										
VP OF ENGINEERING						X		155,953.	0.	61,794.	
(5) LEO DUBLO	48.90										
CONSTRUCTION FOREMAN						X		151,684.	0.	42,925.	
(6) JOEL LAFRANCE	49.40										
SYSTEM-WIDE TROUBLEMAN FOREMAN						x		153,803.	0.	37,088.	
(7) REBECCA JACOBSON	50.00							100.000	•		
CFO				X				137,956.	0.	52,711.	
(8) ANN SCHWARM	7.30							06.004	0		
PRESIDENT	6 60	Х		X				26,024.	0.	0.	
(9) SANDRA GRAPPERHAUS	6.60							25 004	0	^	
VICE PRESIDENT	0 10	Х		X				25,924.	0.	0.	
(10) JERRY GAFFNER	8.10			37					0		
TREASURER	4 00	Х		X				25,824.	0.	0.	
(11) JARED STINE	4.00	77						25 024	0.		
DIRECTOR (12) WILLAIM JENNINGS	6.60	Х						25,824.	0.	0.	
(12) WILLAIM JENNINGS DIRECTOR	0.00	x						25,124.	0.	0.	
(13) SANDRA NEVINGER	5.30	Δ						25,124.	0.	0.	
DIRECTOR	5.50	x						25,024.	0.	0.	
(14) THEODORE WILLMAN	7.90	Δ						23,024.	0.	<u> </u>	
DIRECTOR	1.50	х						24,824.	0.	0.	
(15) ANNETTE HARTLIEB	4.50							24,024.		.	
SECRETARY		x		x				24,724.	0.	0.	
(16) RICHARD GUSEWELLE	4.80							,,	.	<u>,</u>	
DIRECTOR - PART YEAR		х						22,470.	0.	0.	
(17) BARBARA TEDRICK	0.01							, , ,			
DIRECTOR - FORMER							х	12,100.	0.	0.	
032007 12 23 20	•									Form 990 (2020)	

032007 12-23-20

08271029 131839 094-082887-00

Form 990 (2020)

8

									ATIVE INC.	37-05	525	575	Page 8
Par			oloy	ees,			ghes	t Co		s (continued)			
	(A)	(B) (C) Average Position				(D)	(E)			(F)			
	Name and title	Average	(do				l than c	ne	Reportable	Reportable		Est	imated
		hours per	box	, unles	ss per	son is	s both r/trust	an	compensation	compensatio		am	ount of
		week			uau	recto	i/irusi	ee)	from	from related	I		other
		(list any hours for	recto						the	organization		•	ensation
		related	or di	ee			ated		organization	(W-2/1099-MIS	SC)		om the
		organizations	rustee	trus		ee	n pe n		(W-2/1099-MISC)			•	nization related
		below	dual ti	itiona	_	nploy	st cor yee	-					nizations
		line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former				e. ga	
(18)	MARVIN WARNER	2.10											
DIRE	CTOR		Х						2,331.		0.		0.
											-+		
46	0								1,384,766.		0.	175	5,514.
	Subtotal Total from continuation sheets to Part VI								0.		0.	4/5	0.
	Total (add lines 1b and 1c)								1,384,766.		0.	475	5,514.
2	Total number of individuals (including but n							o re		000 of reportable			<u> </u>
	compensation from the organization						-			-			36
												`	Yes No
3	Did the organization list any former officer,	director, truste	ee, k	ey e	emple	oyee	e, or	hig	hest compensated emp	loyee on			
	line 1a? If "Yes," complete Schedule J for s	uch individual										3	X
4	For any individual listed on line 1a, is the su	im of reportabl	e co	mpe	ensat	tion	and	oth	er compensation from t	he organization			
	and related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	edule	J fo	or such individual			4	X
5	Did any person listed on line 1a receive or a												
	rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ich p	berse	on .					5	X
	ion B. Independent Contractors												
1	Complete this table for your five highest co	-									oensat	ion fror	n
	the organization. Report compensation for t	ine calendar ye	ear e	nain	ig wi	ith C	or wit	<u>nin</u>	the organization s tax y	ear.		(C)	<u> </u>
	(ح) Name and business	address							Description of s	ervices	С	ompen	
ASP	LUNDH TREE EXPERT COMP	ANY						Ē	RIGHT OF WAY				
					CLEARANCE		1	,341	.,007.				
	ELECTRIC INC								ELECTRICAL				
	BOX 570, EDWARDSVILLE,							(CONTRACTING			739	<u>,733.</u>
L.	KEELEY CONSTRUCTION, 5	00 S EW	IN	G 2	AVI	Е,		k	CONSTRUCTION				
SUI	TE G, ST. LOUIS, MO 63	103							CONTRACTING			235	,494.
GDS	ASSOCIATES, INC., 185	0 PARKW	AY	P	LA	CE	,	þ	POWER SYSTEM	S			
	TE 800, MARIETTA, GA 3	0067						_	CONSULTING S	ERVICES		182	,300.
	C LOCATING SERVICES	017 45	۰ 	1								1	
	BOX 713359, CINCINNATI								LOCATING SER			120	,074.
2	Total number of independent contractors (in \$100,000 of compensation from the organized strength of the organized strength	-	ot lin	nitec	to t	thos 5	-	ted	above) who received me	ore than			
	wroo,ooo or compensation nom the organiz					2	•						

032008 12-23-20

Form **990** (2020)

			2020) SOUTHWESTERN	ELECTRIC	COOPERATIN	/E INC.	37-0525	575 Page 9
Pa	rt V	/	Statement of Revenue					
			Check if Schedule O contains a response	or note to any line		(P)		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
5 6	1	2	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	•		Membership dues 1b					
Gr			Fundraising events					
ifts ar A			Related organizations 1d					
s, G mila			Government grants (contributions) 1e					
ion: Sil			All other contributions, gifts, grants, and					
ibut the			similar amounts not included above 1f					
ontri d O		g	Noncash contributions included in lines 1a-1f					
an Co		h	Total. Add lines 1a-1f					
				Business Code				
ice	2		SALE OF POWER	221000	62,186,853.	62,186,853.		
ervi		b						
n S /en		c						
graı Re		d						
Program Service Revenue		e f	All other program service revenue					
			Total. Add lines 2a-2f		62,186,853.			
	3	3	Investment income (including dividends, intere		· ·			
			other similar amounts)		57,997.			57,997.
	4		Income from investment of tax-exempt bond p					
	5		Royalties	►				
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
		с	Rental income or (loss)					
			Net rental income or (loss) Gross amount from sales of (i) Securities	(ii) Other				
	1	а	assets other than inventory 7a					
		h	Less: cost or other basis					
e		~	and sales expenses					
venue		с	Gain or (loss) 7c					
			Net gain or (loss)	►				
Other Re	8	а	Gross income from fundraising events (not					
₽			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8b					
			Net income or (loss) from fundraising events	▶				
	Э	a	Gross income from gaming activities. See Part IV, line 19 9a	.				
		h	Less: direct expenses					
			Net income or (loss) from gaming activities					
			Gross sales of inventory, less returns	F				
			and allowances 10	a				
		b	Less: cost of goods sold 10	b				
			Net income or (loss) from sales of inventory .	►				
s				Business Code				
Miscellaneous Revenue	11	а	CAPITAL CREDITS	900099	831,713.	831,713.		
llan 'ent		b	FORFEITED DISCOUNTS & SERVICE REV	900099	251,305.	251,305.		
Sce		-	MISCELLANEOUS INCOME	221000	91,591.	91,591.		
Mis			All other revenue		1,174,609.			
	12		Total. Add lines 11a-11d Total revenue. See instructions		63,419,459.	63,361,462.	0.	57,997.
03200				F	, , , =	, _,		Form 990 (2020)

Form 990 (2020)

SOUTHWESTERN ELECTRIC COOPERATIVE INC. 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).

0000	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			• • • •	
Do	not include amounts reported on lines 6b,	(A)	(B) Program service	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		onperioee	general expenses	<u>enpencee</u>
	and domestic governments. See Part IV, line 21	17,014.			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	10,000.			
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	6,942,782.			
5	Compensation of current officers, directors,				
-	trustees, and key employees	755,111.			
6	Compensation not included above to disgualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
5	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
° c	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	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				
20	Interest	3,921,510.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,508,638.			
23	Insurance	-			
24	Other expenses. Itemize expenses not covered				
	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	COST OF POWER	31,153,945.			
b	DISTRIBUTION EXPENSE -	4,842,157.			
с	ADMIN & GENERAL EXPENSE	4,694,918.			
d	CONSUMER ACCOUNT EXPENS	1,610,806.			
е	All other expenses	2,981,280.			
25	Total functional expenses. Add lines 1 through 24e	62,438,161.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
_	Check here if following SOP 98-2 (ASC 958-720)				
03201	0 12-23-20				Form 990 (2020)
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2020.04030 SOUTHWESTERN ELECTRIC COO 094-0821

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SOUTHWESTERN EI	LECTRIC	COOPERATIVE	INC.
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37-0525575 Page 11

		Check if Schedule O contains a response or note	to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			7,267,179.	1	2,221,100.
	2	Savings and temporary cash investments	321,229.	2	318,398.		
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net	5,545,555.	4	5,420,622.		
	5	Loans and other receivables from any current or f					
		trustee, key employee, creator or founder, substa					
		controlled entity or family member of any of these	e perso	ons		5	
	6	Loans and other receivables from other disqualified					
		under section 4958(f)(1)), and persons described	in sect	tion 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net			753,853.	7	672,053.
Assets	8	Inventories for sale or use			1,586,894.	8	1,326,931.
¥	9	– • • • • • • • •			363,925.	9	380,046.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		200,645,304.			
	b	Less: accumulated depreciation	10b	61,278,652.	137,695,762.	10c	139,366,652.
	11	Investments - publicly traded securities			127,760.	11	105,716.
	12	Investments - other securities. See Part IV, line 11	۰۱			12	
	13	Investments - program-related. See Part IV, line 1		3,758,953.	13	4,013,042.	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			3,960,498.	15	3,498,022.
	16	Total assets. Add lines 1 through 15 (must equa			161,381,608.	16	157,322,582.
	17	Accounts payable and accrued expenses			8,006,919.	17	4,373,060.
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete P				21	
es	22	Loans and other payables to any current or forme					
iliti		trustee, key employee, creator or founder, substa					
Liabilities		controlled entity or family member of any of these				22	00 001 000
	23	Secured mortgages and notes payable to unrelat		• ••••••••••••••	92,420,539.	23	90,691,289.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines			10,813,447.	05	5,227,134.
	000	of Schedule D			111,240,905.	25 26	100,291,483.
	26				111,240,905.	20	100,291,403.
ŝ		Organizations that follow FASB ASC 958, check	k nere				
nce	27	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions				27	
ala	27 28	Net assets with donor restrictions				27	
Б	20	Organizations that do not follow FASB ASC 95				20	
ЦЦ		and complete lines 29 through 33.	o, che				
p	29	Capital stock or trust principal, or current funds			0.	29	0.
ets	30	Paid-in or capital surplus, or land, building, or equ			0.	30	0.
Ass	31	Retained earnings, endowment, accumulated inc			50,140,703.	31	57,031,099.
Net Assets or Fund Balances	32	Total net assets or fund balances			50,140,703.	32	57,031,099.
Ż	33	Total liabilities and net assets/fund balances			161,381,608.	33	157,322,582.
	00	10tal navinties and het assets/10110 valantes			,,, _,, _	00	Earm 990 (202)

Form 990 (2020)

Form 990 (2020) SO Part X Balance Sheet

Form	990 (2020) SOUTHWESTERN ELECTRIC COOPERATIVE INC.	37-0	525575	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	63,419		
2	Total expenses (must equal Part IX, column (A), line 25)	2	62,438		
3	Revenue less expenses. Subtract line 2 from line 1	3			98.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	50,140),7(03.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	5,909),0	<u>98.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
_	column (B))	10	57,031	.,0	<u>99.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>			
				Yes	No
1	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	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	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?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			000	L

Form **990** (2020)

032012 12-23-20

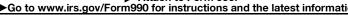
SCHEDU	LE D
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Department of the Treasury

Internal Revenue Service

(Form	990)
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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.





Name	of the	organization
Nume	01 010	organization

SOUTHWESTERN ELECTRIC COOPERATIVE INC.

Employer identification number 37-0525575

cryanization answerd "Ves" on Form 990, Part IV, Ine 6. Capacity of the organization in an experimental experimental experimental experimental experimental experiments of the organization in an experimental experimental experiments of the organization informal experimental experiments in writing that the assets held in donc advised funds are the organization inform all grantees, doncer, and doner advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the doner or doner advisor, or for any other purpose confering incommobile purposes and not for the benefit of the doner or doner advisor, or for any other purpose confering incommobile purposes and not for the benefit of the doner or doner advisor, or for any other purpose confering incommobile purposes and not for the benefit of the organization check all that appy). Pert LI Conservation Easements held by the organization check all that appy). Pert List a first advisor of natural habitat Preservation of a during the organization check all that appy). Conservation easements is during the organization check all that appy). Conservation easements is during the organization check all that appy). Conservation easements is during the organization check all that appy). Conservation easements included in (a) acquired after 7/25/06, and not on a historic all unpreservation disconservation easements included in (a) acquired after 7/25/06, and not on a historic attructure Number of conservation easements included in the conservation easement is located > A minute or distates where property subject to conservation easement is located > A minute or conservation easements on a certific historic structure included in (a) acquired and encore exit to easement is during the year A minute or conservation easements included in (a) acquired after 7/25/06, and not on a historic structure A minute or conservation easements included in (a) acquired after 7/25/06, and not on a historic structure A minute or conservation easem	Pa		aintaining Donor Advise		Similar Funds of	or Accour	its. Complete if the
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of and through (during year) 4 Aggregate value of and through (during year) 6 Did the organization inform all donors advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization is exclusive legal control? 7 No 6 Did the organization inform all donors and visors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or dovisor, or for any other purpose conterring impermissible divide bimmil? 7 Part III Conservation Easements. Complete if the organization assered? Yea' on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Protection of natural habitat Protection of natural habitat Protection of natural habitat Protection of natural habitat Protection of conservation easements 2 Complete lines 2 a through 2 df the organization held a qualified conservation contribution in the form of a conservation easements in eluded in (a) aquified atter 725/06, and not on a historic structure 9 Total acreage restricted by conservation easements is located b 2 dial number of conservation easements included in (a) aquiered after 725/06, and not on a historic structure 2 dial number of conservation easements included in (a) aquiered after 725/06, and not on a historic structure 9 and and visute here yoperty subject to conservation easements is located b 2 dial number of conservation easements included in (a) aquiered after 725/06, and not on a historic structure 9 and and visute hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Total acreage restricted by conservation easements is located b 7 Anoart of expenses incurred in monitori		organization answered	"Yes" on Form 990, Part IV, lin				de end etterne i t
2 Aggregate value of continuotions to (during year)				(a) Donor adv	rised tunds	(b) Fur	nds and other accounts
3 Aggregate value of grants from (during year)	1						
Aggregate value at end of year In the second of the construction according to the organization inform all grantees, donors, and donor advisors in writing that the assets held in donor advisor donor advisors in writing that the assets held in donor advisor of on your the purpose conferring memmissible private benefit? Yes No De the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only tor chartable private benefit? Yes No PartII Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Protection of natural habitat Protection of natural habitat Protection of open space 2 Complete inters 2 at trough 2 if the organization held a qualified conservation contribution in the form of a conservation easements Total number of conservation easements Total anneador of conservation easements Total accessor exists easements on a certified historic structure Author of conservation easements Total anneador of conservation easements Total accessor exists easements and certified historic structure Include at the End of the Tax Year Total accessor exists easements included in (c) acquired after 725/06, and not on a historic structure Let all accessor exists easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Amount of expenses included in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year S S S Does the organization neave any write pools of the organization singertering, inspecting, handling of violations, and enforcing conservation easements during the year S S S Does the organization maxe a writem policy regarding the periodic monitoring, inspecting, fandling of violations, and enforcing conservation easements duri	2						
 Solid the organization inform all donors advisors in writing that the assets held in donor advised funds are the organization's proceed reguration's exclusive legal control?	3						
are the organization's property, subject to the organization's exclusive legal control? □ Ves No 6 Did the organization inform all grantess, donors, and donor advisor, or for any other purpose confering mpermissible private benefit? No PartIII Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. No 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area □ Protection of natural habitat □ Preservation of a conservation easements 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements. Ield at the End of the Tax Year a Total number of conservation easements. Za Za 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Za 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the year Xes 4 Number of distories through 1, subject to conservation easements in located > Za 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcing conservation easements during the year 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the ye							
 6 Dia the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charatable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring	5	-		-			
for charitable purposes and not for the banefit of the donor or donor advisor, or for any other purpose conferring	_						Yes No
Impermissible private benefit? Yes No. Part II Conservation Easements. Complete if the organization answered 'Yes' on Form 300, Part IV, line 7. Image: Conservation of Land for public use (for example, recreation or education) Preservation of a historically important land area Processe(s) of conservation easements held by the organization (check all that apply) Preservation of a center that area Preservation of a center that area Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Image: Complete lines 2a through 2d if the organization (check all that apply) 2a a Total number of conservation easements Za Za b Total acreage restricted by conservation easements Za Za d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure Za istad in the National Pegister Zd 3 Number of states where property subject to conservation easement is located	6						
Part III Conservation Easements. Complete the organization answered 'Yes' on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a net for public use (for example, recreation or education). Preservation of a certified historic structure 2 Preservation of natural habitat Preservation of a certified historic structure Preservation of a certified historic structure 3 Total number of conservation easements Path at the Edd of the Tax Year. Path at the Edd of the Tax Year. 3 Total number of conservation easements Path at the Edd of the Tax Year. Path at the Edd of the Tax Year. 4 Total anneage restricted by conservation easements Path at the Edd of the Tax Year. Path at the Edd of the Tax Year. 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the Nation Register Path at the organization during the tax year. 3 Number of states where property subject to conservation easements is located > Path and volumer hour devolute hour double of the conservation easements is holds? 5 Does the organization have a written policy regarding the periodic monitoring, inspecting, handling of violations, and enforcing conservation easements during the year * - - - No						•	
1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of and for public use (for example, recreation or education) Preservation of a historically important land area Preservation of open space Preservation of a certified historic structure 2 Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 4 Otal number of conservation easements 2a 5 Total arceage restricted by conservation easements 2a 4 Number of conservation easements included in (c) acquired after 725/06, and not on a historic structure 2a 3 Number of states where property subject to conservation easement is located >	Da						
Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Total number of conservation easements Total annumber of states where property subject to conservation easement is located Total annumber of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Total conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l) and section 170(h)(4)(B)(l) Toral states where property subject to onservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the foorhote to the organization's financial statements that describes the organization flex (as permitted under FASB ASC 058, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the foothote to the organization's financial statement and balance sheet works of art, historical treasures, or other similar assets held f						art IV, line 7	
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□ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last. day of the tax year. Idel at the End of the Tax Year. a Total number of conservation easements Idel at the End of the Tax Year. 2a Idel at the Conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Idel at the End of the Tax Year. 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year. Idel at the organization during the tax year. 4 Number of states where property subject to conservation easement is located > Image: Im				tion or education)		-	
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Par	t III Organizations Maintaining C	ollections of	of Art, Hi	storical Tre	easures, o	r Other S	Similar Ass	sets _{(contir}	nued)
3	Using the organization's acquisition, accessi	on, and other r	ecords, che	eck any of the	following that	t make sigr	nificant use of	its	
	collection items (check all that apply):								
а	Public exhibition		d 🗌	Loan or exe	change progr	am			
b	Scholarly research		е 🗌	Other					
с	Preservation for future generations								
4	Provide a description of the organization's co	ollections and e	xplain how	they further t	he organizatio	on's exemp	t purpose in F	Part XIII.	
5	During the year, did the organization solicit of	or receive donat	ions of art,	historical trea	sures, or oth	er similar as	ssets		
	to be sold to raise funds rather than to be ma	aintained as pa	rt of the org	ganization's co	ollection?			Yes	No No
Par	t IV Escrow and Custodial Arran							IV, line 9, or	
	reported an amount on Form 990, Pa			-					
1a	Is the organization an agent, trustee, custodi	ian or other inte	ermediary fo	or contributior	ns or other as	sets not inc	cluded		
	on Form 990, Part X?							Yes	No No
b	If "Yes," explain the arrangement in Part XIII								
		·		0				Amoun	t
с	Beginning balance						1c		
	Additions during the year						1d		
	Distributions during the year						1e		
	Ending balance						1f		
	Did the organization include an amount on F						?	Yes	No
	If "Yes," explain the arrangement in Part XIII.					-			
Par									
	·	(a) Current y) Prior year			I) Three years b	ack (e) Four	r vears back
1a	Beginning of year balance		`	, ,		`	, ,		
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
	Other expenditures for facilities								
Ũ	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	Lent year and b	alance (line	1a column (a)) held as:				
	Board designated or quasi-endowment		2121100 (III10 %	rg, column (a					
	Permanent endowment	%	/0						
		%							
U	The percentages on lines 2a, 2b, and 2c sho								
20	Are there endowment funds not in the posse			bot are hold a	nd administa	rad for tha	orgonization		
Ja			Janization t	nat are neiu a	nu auministe	red for the	organization]	Yes No
	by:							3a(i)	Tes NO
	(i) Unrelated organizations								
L	(ii) Related organizations								
								3b	
4 Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		endowmer	it tunds.					
I GI				h IV line 11e (10		
	Complete if the organization answere							(1) D	
	Description of property		t or other	• • •	t or other		cumulated	(d) Boo	k value
			ivestment)		(other)	depro	eciation	60	0 202
	Land				<u>38,383.</u>	1 1 (12 001		<u>8,383.</u>
	Buildings			3,00	02,049.	<u> </u>	03,881.	2,49	8,168.
	Leasehold improvements			100 51	12 0/1	E0 07	70 204	1 7 1 1 7	E ()7
	Equipment				<u>13,941.</u>		78,304.		
	Other				10,931.		96,467.		4,464.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990.	Part X, col	lumn (B), line 1	10c.)			139,36	
							Sche	dule D (Forn	n 990) 2020

032052 12-01-20

Complete if the organization answered "Yes" of (a) Description of security or category (including name of security)	n Form 990, Part IV, line 1 (b) Book value	1b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end-	of year market value
			or year market value
(1) Financial derivatives			
(2) Closely held equity interests(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	n Form 990, Part IV, line 1	1c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	n Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	<u>15.)</u>	>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	n Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) ACCUMULATED PROVISION FOR	PENSION		105 546
(3) & BENEFITS			105,716.
(4) CONSUMER DEPOSITS			818,874.
(5) DEFERRED CREDITS			4,302,544.
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			5,227,134.
2. Liability for uncertain tax positions. In Part XIII, provide t	he text of the footnote to t	the organization's financial statements th	at reports the

Schedule D (Form 990) 2020 SOUTHWESTERN ELECTRIC COOPERATIVE INC. 37-0525575 Page 3

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 💠 🔀

Schedule D (Form 990) 2020

032053 12-01-20

Part VII Investments - Other Securities.

С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	63,419,459.
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			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	63,419,459.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	th Expenses per F	Retur	'n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	55,495,379.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	55,495,379.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	6,942,782.		
с	Add lines 4a and 4b			4c	6,942,782.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	62,438,161.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV			; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi	tional info	rmation.		
סאד	RT X, LINE 2:				
<u>r Ai</u>	I A, DINE 2.				
тц	COOPERATIVE IS EXEMPT FROM INCOME TAXES U	งเกษอ	SECTION 501	(C)	(12) OF
<u> </u>	COOPERATIVE 15 EXEMPT FROM INCOME TRAES OF	NDER	SECTION JUL	(0)	(12) OF
THE	E INTERNAL REVENUE CODE (THE CODE).				
<u> </u>	INTERNAL REVENCE CODE (INE CODE).				
тHI	COOPERATIVE EVALUATED ITS TAX POSITIONS A	ים מא	THERMINED TH	ΔͲ	TT HAS NO
<u></u>	COOLEMATIVE EVALOATED TID TAX TODITIOND A			<u> </u>	
TING	CERTAIN TAX POSITIONS AS OF DECEMBER 31, 202	20 AN	τD 2019.		
0110		<u> </u>	2017.		
PAF	T XII, LINE 4B - OTHER ADJUSTMENTS:				
PAI	RT XII, LINE 4B - OTHER ADJUSTMENTS:				
	RT XII, LINE 4B - OTHER ADJUSTMENTS:				6,942,782.

SOUTHWESTERN ELECTRIC COOPERATIVE INC.

2b

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

a Net unrealized gains (losses) on investments 2a **b** Donated services and use of facilities

1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Schedule D (Form 990) 2020

Schedule D (Form 990) 2020

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1

63,419,459.

Schedule D (Form 990) 2020 Part XIII Supplemental Infor	SOUTHWESTERN	ELECTRIC	COOPERATIVE	INC.	37-0525575	Page 5
Part XIII Supplemental Infor	mation (continued)					
					Schedule D (Form 9	90) 2020

08271029 131839 094-082887-00

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.												
Department of the Treasury Attach to Form 990. Open Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. Inst													
Name of the organization		ERN ELECTI	RIC COOPERAT					Employer identification number $37-0525575$					
Part I General In	formation on Grants a	nd Assistance											
criteria used to a	ation maintain records t ward the grants or assis IV the organization's pro	tance?	-										
	d Other Assistance to I					anization answered "Y	/es" on Form 990, Part	IV, line 21, for any					
	at received more than \$	-											
. ,	dress of organization rernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance					
ANDERSON HOSPITAL 6800 STATE ROUTE : MARYVILLE, IL 6200	162	27-4548522	501(C)(3)	5,750.	0.			THE COOPERATIVE SPONSORS A TABLE AT THE ANNUAL CHARITY AUCTION AND A TEAM AT THE ANNUAL					
2 Enter total numb	er of section 501(c)(3) ar	d government or	anizations listed in the	l line 1 table			I	▶ 1.					
	er of other organizations	•						0.					
	Reduction Act Notice,							Schedule I (Form 990) 2020					

Schedule I (Form 990) 2020

SOUTHWESTERN ELECTRIC COOPERATIVE INC.

37-0525575

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(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
COLLEGE SCHOLARSHIPS	10	10,000.	0.		
Part IV Supplemental Information Provide the information reg	L uirod in Dort L lin	o 2: Dort III. oolumn	(b): and any other as	l Iditional information	1

PART I, LINE 2:

SCHOLARSHIP FUNDS ARE GIVEN TO QUALIFYING RECIPIENTS SELECTED THROUGH AN

EXTENSIVE APPLICATION PROCESS CONDUCTED BY THE BOARD OF DIRECTORS

SCHOLARSHIP COMMITTEE. ONCE SELECTED, THE FUNDS ARE DISTRIBUTED TO THOSE

THAT HAVE EFFECTIVE OVERSIGHT IN THE USE OF THE ASSISTANCE GIVEN, USUALLY

THE COLLEGE OR UNIVERSITY. ANY OTHER ASSISTANCE IS PROVIDED FOR A SPECIFIC

PURPOSE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS.

Schede Part	ule I (For	<u>m 990</u> upple) emen	tal Info	SO orma	UTE	IWES	STER	N I	ELE	CTF	RIC	COC	PER	ATIV	/E	INC	•	37	-052	5575	5 Pa	age 2
NAMI	E OF	ORG	ANI	ZATI	ON (OR	GOV	ERN	MEN	1T :	AN	DEI	RSON	HO	SPIT	AL	FOU	JNDA	TIO	N			
<u>(H)</u>	PURI	POSE	OF	GRA	NT (OR	ASS	IST.	ANC	CE:	тн	E (200P	ERA'	TIVE	S	PONS	SORS	A	TABL	E An	C	
THE	ANNU	JAL	CHAI	RITY	AU	CTI	ON	AND	A	TE	AM	AT	THE	AN	NUAL	C	HARI	ΓTY	GOL	F			
TOUE	RNAME	ENT																					
032291 04-01-20																				Sch	edule I	(Form	n 990)

SC	CHEDULE J Compensation Information			OMB No.	1545-00	47				
(Fo	orm 990) For certain Officers, Directors, Trustees, Key Employees, and High	est		0000						
•	Compensated Employees			ZU)2(J				
	► Complete if the organization answered "Yes" on Form 990, Part IV, li ► Attach to Form 990.	ne 23.		Open t	o Pub	lic				
	Department of the Treasury ► Attach to Form 990. Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.									
Nan	me of the organization		Employer	identificat	ion nu	mber				
	SOUTHWESTERN ELECTRIC COOPERATIVE INC.		37-	052557	5					
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 o	n Form	990,							
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.									
	First-class or charter travel Housing allowance or residence for	or perso	nal use							
	Travel for companions Payments for business use of personal payments f									
	Tax indemnification and gross-up payments									
	Discretionary spending account Personal services (such as maid, or	chauffeu	ur, chef)							
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding paymen	t or								
-	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain			<u>1b</u>		-				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all direct									
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?			2		<u> </u>				
2	la dia da unhisha ifana af dha fallau ina dha annaninatian usad da sabah lish dha annanadian af dha annani									
3	Indicate which, if any, of the following the organization used to establish the compensation of the organi									
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related orgestablish compensation of the CEO/Executive Director, but explain in Part III.	yanizati								
	Compensation committee CEO/Executive Director, but explain in Part III.									
	Independent compensation consultant X Compensation survey or study									
	X Form 990 of other organizations X Approval by the board or compen-	eation c	ommittee							
		Sation	ommittee							
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				4a		X				
b	Participate in or receive payment from a supplemental nonqualified retirement plan?			4b		X				
с	Participate in or receive payment from an equity-based compensation arrangement?			4c		X				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.									
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.									
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any comp	pensatio	n							
	contingent on the revenues of:									
а	The organization?			<u>5</u> a		—				
b	Any related organization?			<u>5b</u>						
_	If "Yes" on line 5a or 5b, describe in Part III.	-								
6		pensatio	n							
	contingent on the net earnings of:			-						
	0					──				
b	Any related organization?			<u>6b</u>		<u> </u>				
7	If "Yes" on line 6a or 6b, describe in Part III.									
1	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed pa			-						
٥	not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subj			7						
8				8						
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			····· 0						
5	Regulations section 53.4958-6(c)?			9						
LHA	A For Paperwork Reduction Act Notice, see the Instructions for Form 990.			dule J (For	m 990) 2020				

SOUTHWESTERN ELECTRIC COOPERATIVE INC. 37-0525575

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	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) BOBBY WILLIAMS JR	(i)	223,760.	0.	8,316.	82,445.	21,830.	336,351.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ANDREW JONES	(i)	150,042.	175.	9,939.	73,249.	21,489.	254,894.	0.
VP BUSINESS DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MIKE WILLMAN	(i)	143,642.	175.	9,128.	60,519.	21,464.	234,928.	0.
VP OF OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CHRISTOPHER BOTULINSKI	(i)	147,476.	175.	8,302.	38,200.	23,594.	217,747.	0.
VP OF ENGINEERING	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) LEO DUBLO	(i)	151,322.	175.	187.	22,049.	20,876.	194,609.	0.
CONSTRUCTION FOREMAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JOEL LAFRANCE	(i)	152,762.	175.	866.	5,308.	31,780.	190,891.	0.
SYSTEM-WIDE TROUBLEMAN FOREMAN	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) REBECCA JACOBSON	(i)	137,488.	175.	293.	27,246.	25,465.	190,667.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) BARBARA TEDRICK	(i)	12,100.	0.	0.	0.	0.	12,100.	0.
DIRECTOR - FORMER	(ii)	0.	0.	0.	0.	0.	0.	12,100.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2020

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.

Schedule J (Form 990) 2020

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.



37-0525575

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PRUDENT UTILITY PRACTICES.

FORM 990, PART VI, SECTION A, LINE 5:

THE COOPERATIVE BECAME AWARE OF A PHISHING ATTACK DURING THE TAX YEAR,

SOUTHWESTERN ELECTRIC COOPERATIVE INC.

OCCURRING IN NOVEMBER 2020. A PHISHING ATTEMPT WAS SUCCESSFUL IN \$300,000

OF THEFT BY INTERCEPTING A DEBT PAYMENT THROUGH AN ELECTRONIC FUNDS

TRANSFER. WHEN THE COOPERATIVE BECAME AWARE OF THIS THEFT, THEY

IMMEDIATELY ACTED BY CONTACTING LAW ENFORCEMENT, LEGAL COUNSEL, AND THEIR

INSURANCE PROVIDER. THE COOPERATIVE EXPECTS TO RECOUP THIS LOSS IN THE

2021 TAX YEAR.

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

MEMBERSHIP IS REQUIRED. ANY PERSON WHO MEETS THE QUALIFICATIONS FOR

MEMBERSHIP, AS OUTLINED IN SECTION 2 OF THE BYLAWS, HAS THE RIGHT TO

PARTICIPATE IN THE ORGANIZATION'S GOVERNANCE OR TO RECEIVE DISTRIBUTION OF

INCOME OR ASSETS FROM THE ORGANIZATION.

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

PER SECTION 2(A)(2) OF THE BYLAWS "MEMBERS SHALL BE ENTITLED TO VOTE AT ANY MEETING OF THE COOPERATIVE AND SHALL BE ENTITLED TO BE ELECTED A DIRECTOR OF THE COOPERATIVE SUBJECT TO COMPLIANCE WITH THE QUALIFICATIONS STATED IN SECTION 5".

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

SECTION 4(C) OF THE BYLAWS COVERS VOTING ON ISSUES DULY PRESENTED TO THE

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) 2020

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25

2020.04030 SOUTHWESTERN ELECTRIC COO 094-0821

Schedule O (Form 990 or 9	90-EZ) 2020				Page 2
Name of the organization	SOUTHWESTERN	ELECTRIC	COOPERATIVE	INC.	Employer identification number 37-0525575
MEMBERS.					

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

THE 990 IS PREPARED BY THE INDEPENDENT ACCOUNTING FIRM WITH ASSISTANCE FROM

THE CFO, REVIEWED AND APPROVED BY THE CEO AND CFO, AND THEN PRESENTED TO

THE BOARD FOR APPROVAL PRIOR TO FILING.

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

BY THE INHERENT INTIMATE NATURE AMONG ITS MEMBERS, THE BOARD REGULARLY MONITORS THIS POLICY THROUGH DISCUSSION AND INTERACTION WITH THE PUBLIC AND THE MEMBERS OF THE COOPERATIVE.

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

THE COOPERATIVE PARTICIPATES ANNUALLY IN A NATIONAL COMPENSATION STUDY CONDUCTED BY NRECA IN ORDER TO MONITOR AND COMPARE THE RATE OF COMPENSATION FOR ITS CEO. ANNUALLY, EACH DIRECTOR COMPLETES AN EXTENSIVE PERFORMANCE EVALUATION ON THE CEO FOR REVIEW AND DISCUSSION WITH THE COMPLETE BOARD. THE BOARD THEN DETERMINES THE RATE OF COMPENSATION FOR THE CEO. THIS PROCESS IS DOCUMENTED IN THE BOARD MINUTES.

THE CEO AND VP OF HUMAN RESOURCES SETS THE STAFF SALARIES USING DATA FROM THE NATIONAL COMPENSATION STUDY CONDUCTED BY NRECA AND EVALUATION OF JOB PERFORMANCE. THIS PROCESS IS DOCUMENTED IN THE PERSONNEL FILES.

THIS PROCESS WAS LAST CONDUCTED IN 2020.

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

THE COOPERATIVE MAKES GOVERNING DOCUMENTS AND POLICIES AVAILABLE TO ITS

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Schedule O (Form 990 or 990-EZ) 2020

032212 11-20-20

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization SOUTHWESTERN ELECTRIC COOPERATIVE INC.	Employer identification number 37-0525575
MEMBERS UPON REQUEST AT THE CORPORATE HEADQUARTERS. THE C	OOPERATIVE ALSO
PLACES BYLAWS/MEMBER GUIDES AND FINANCIALS ON ITS WEBSITE	FOR INSPECTION.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CAPITAL CREDITS RETIRED	-1,180,834.
OTHER ADJUSTMENTS	147,150.
PATRONAGE DIVIDENDS ALLOCATED	6,942,782.
TOTAL TO FORM 990, PART XI, LINE 9	5,909,098.
FORM 990, PART IX, LINE 4	
THE IRS INSTRUCTIONS STATE THAT PATRONAGE DIVIDENDS PAID B	Y SECTION
501(C)(12) ORGANIZATIONS TO THEIR MEMBERS SHOULD BE REPORT	ED ON LINE 4.
THE ORGANIZATION HAS INTERPRETED PATRONAGE DIVIDENDS PAID	TO MEAN
PATRONAGE DIVIDENDS ALLOCATED OR TO BE ALLOCATED FOR THE C	URRENT YEAR.
SINCE THIS ALLOCATION IS NOT AN EXPENSE UNDER GENERALLY AC	CEPTED
ACCOUNTING PRINCIPLES (GAAP), THIS HAS RESULTED IN A RECON	CILING ITEM
TO NET ASSETS IN PART XI, ON PAGE 12 OF THE FORM 990.	

FORM 990, PART XII, LINE 2C

THE PROCESS FOR OVERSIGHT OF THE ANNUAL FINANCIAL STATEMENT AUDIT AND

SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED.

032212 11-20-20