Department of the Treasury Internal Revenue Service

Extended to November 17, 2025 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.



AI	-or th	e 2024 calendar year, or tax year beginning and	ending	_	
B	Check if applicat	le: C Name of organization		D Employer identifie	cation number
	Addr				
	Name Chan	pe Doing business as		37-02583	43
	Initial		Room/suite	E Telephone number	
	Final	11597 IL HWY 1		(800)635	
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	15,488,084.
	Amer			H(a) Is this a group re	
	Appli tion pend			for subordinates	
	-	11597 IL HWY I, Paris, IL 61944		H(b) Are all subordinates in	
		empt status: 501(c)(3) X 501(c) (12) (insert no.) 4947(a)(1)	or 🛄 527		list. See instructions
-	Nebs			H(c) Group exemption	
_		f organization: X Corporation Trust Association Other	L Year	of formation: 1938 N	State of legal domicile: II
Pa	art I		Ctor E	lostria Coo	norativo
e	1	Briefly describe the organization's mission or most significant activities: Energy exists to reliably distribute affordable	ologt	rigity to o	peracive
Governance					
veri	2	Check this box if the organization discontinued its operations or disposed by the provided of the provided by the provided of		I . I	<u>9</u>
ŝ	4	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b)			9
ര്ഗ	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)			27
itie	6	Total number of volunteers (estimate if necessary)			0
Activities &	-	Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ă		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		0.	0.
enu	9	Program service revenue (Part VIII, line 2g)		13,451,829.	14,562,030.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		375,787.	386,871.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		301,642.	539,183.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		14,129,258.	15,488,084.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	L	14,428.	11,607.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		174,898.	147,405.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		724,530.	994,833.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Хр	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	10 101 001	11 450 627
	11/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		12,181,281.	11,458,637.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,095,137.	12,612,482.
<u> </u>	19	Revenue less expenses. Subtract line 18 from line 12		1,034,121. ginning of Current Year	2,875,602. End of Year
Net Assets or Fund Balances				41,663,479.	43,762,877.
Sse Bala	20	Total assets (Part X, line 16)		19,029,538.	43,762,877.
let ⊿ ind	21	Total liabilities (Part X, line 26)		22,633,941.	25,763,494.
		Net assets or fund balances. Subtract line 21 from line 20		44,0JJ,94I.	43,103,494.

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.

Sign	Signature of offi	cer				Date		
	Angela G							
	Type or print na	me and title						
	Preparer's name)	Preparer's signature		Date	Check	PTIN	
Paid	Brian D	Cherry	Di Di	Clan	06/25/2	025 self-employed	P01355823	1
Preparer	Firm's name		Advisors	/		Firm's EIN 36-	-3163136	
Use Only	Firm's address	1776 N Meri	dian St Ste 500					
		Indianapoli	s, IN 46202			Phone no. 317 -	-634-4747	
May the I	RS discuss this	return with the prepare	er shown above? See instruction	າຣ			X Yes	No
LHA For	Paperwork Re	duction Act Notice, s	ee the separate instructions.	432001 12-10-24	1		Form 990 (20)24)

See Schedule O for Organization Mission Statement Continuation

	990 (2024) EnerStar Electric Cooperative	37-02	258343	Page 2
Pa	t III Statement of Program Service Accomplishments			
	Check if Schedule O contains a response or note to any line in this Part III			📖
1	Briefly describe the organization's mission: EnerStar Electric Cooperative exists to reliably	distribute	afforda	h1a
	electricity to our member-owners while upholding			DIE
	integrity, accountability, and commitment to our		01	
		••••••••		
2	Did the organization undertake any significant program services during the year which were not lis	sted on the		
	prior Form 990 or 990-EZ?		Yes	XNo
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant changes in how it conducts, any prog	ram services?	🗌 Yes	XNo
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program			
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloc	cations to others, the tot	al expenses, a	and
	revenue, if any, for each program service reported.	, , , , , , , , , , , , , , , , ,	14,562,	030
4a	(Code:) (Expenses \$ 11,948,291. including grants of \$ Cost of wholesale power purchase and delivery for		14,302,)
	approximately 5,294 member-owners.	L LESALE CO		
41-				
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$		
10) (nevenue •		/
4d	Other program services (Describe on Schedule O.)			
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 11,948,291.			
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Form	990	(2024)

Form 990 (2024)EnerStar Electric CooperativePart IVChecklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	х	
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1 14		<u> </u>
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
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			<u> </u>
	and the second	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	- 10		<u> </u>
10	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,	10		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<u> </u>
10		18		x
10	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			<u> </u>
19		19		x
20-	complete Schedule G, Part III	19 20a		X
		20a 20b		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic approximation or Report IX, column (A), line 12 If "Yes," complete Schedule I, Parts Land II.	04		x
400000	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	990	(2024)
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 Form 990 (2024)
 EnerStar
 Electric
 Cooperative

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		х	
04-	Schedule J	23	Δ	
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	040		x
h	Schedule K. If "No," go to line 25a	24a 24b		- 23
	Did the organization mintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
-	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		x
b	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		
Ŭ	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	054		
26	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	- 50		
0.	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 on Schedule O for Part VI, lines 11b and 19?			
	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
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 25			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	000	
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Form	990 (2024) EnerStar Electric Cooperative 37-025	8343	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2	7		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a		Х
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		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. 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
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	. 5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	. 6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payo	r? 7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	. 7c		Х
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	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C	? 7h		
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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	. 9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a 14562030	•		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	•		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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 13b			
	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	. 14b	<u> </u>	
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 the 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.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		

that would result in the imposition of an excise tax ur	10
If "Yes." complete Form 6069.	

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Form **990** (2024)

Form 9	990 (2024)
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Check if Schedule O contains a response or note to any line in this Part VI

X

 Form 990 (2024)
 EnerStar Electric Cooperative
 37-0258343
 Page

 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.

lf b 2 D 3 D 4 D 5 D	Enter the number of voting members of the governing body at the end of the tax year	1a 9 1b 9			
b b 2 0 3 0 4 D 5 D	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the				11
b E 2 D 3 D 4 D 5 D	Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the				1
2 D 3 D 4 D 5 D	Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the				I
2 D 3 D 4 D 5 D	Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the	a with any other	'		
0 3 D 0 4 D 5 D	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the		1		
3 D o 4 D 5 D	Did the organization delegate control over management duties customarily performed by or under the	-	2		1
o 4 D 5 D					1
4 D 5 D			3		
5 D	Did the organization make any significant changes to its governing documents since the prior Form 9		4		-
	Did the organization make any significant ornanges to its governing documents since the prior form of Did the organization become aware during the year of a significant diversion of the organization's ass		5		1
			6	х	-
	Did the organization have members or stockholders?				-
	nore members of the governing body?		7a	х	
bΑ	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockholders, or			
р	persons other than the governing body?		7b	Х	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea				
	The governing body?		8a	х	1
	Each committee with authority to act on behalf of the governing body?		8b	Х	-
	s there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea				1
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		
	on B. Policies (This Section B requests information about policies not required by the Internal Re				•
		,		Yes	-
0а Г	Did the organization have local chapters, branches, or affiliates?		10a		-
	f "Yes," did the organization have written policies and procedures governing the activities of such ch				-
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod		11a	х	-
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		114		
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
	Vere officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12a 12b	X	-
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yo		120	- 23	-
				х	
	on Schedule O how this was done		12c	X	-
	Did the organization have a written whistleblower policy?		13	~	_
	Did the organization have a written document retention and destruction policy?		14		_
	Did the process for determining compensation of the following persons include a review and approva	•			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
	The organization's CEO, Executive Director, or top management official		15a		
	Other officers or key employees of the organization		15b	Х	
lf	f "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				J
6a D	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment with a			
ta	axable entity during the year?		16a		
b lf	f "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat				ĺ
ir	n joint venture arrangements under applicable federal tax law, and take steps to safeguard the orgar	nization's			
e	exempt status with respect to such arrangements?	<u></u>	16b		
	on C. Disclosure				-
7 L	.ist the states with which a copy of this Form 990 is required to be filed $_ extsf{IL}$				
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	nd 990-T (section 501(c)(3)s onlv) avail	ŀ
	or public inspection. Indicate how you made these available. Check all that apply.		. ,	-	
l		on Schedule O)			
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co statements available to the public during the tax year.	onflict of interest policy, ar	nd finai	ncial	
	State the name, address, and telephone number of the person who possesses the organization's bo	oks and records			
	Kira Taylor - (800)635-4145				
	11597 IL HWY 1, Paris, IL 61944				-
	12-10-24		Form	990	-

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Posi			one	Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week				reciu	n/uus	lee)	from	from related	other
	(list any hours for	Individual trustee or director				_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			Isatec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al tru:		yee	omper		1099-NEC)	,	and related
	below	/id ual	Institutional trustee	er	Key employee	Highest compensated employee	ner			organizations
	line)	Indiv	Insti	Officer	Key	High emp	Former			
(1) David Clinton	40.00									
СЕО				Х				185,065.	0.	85,281.
(2) Greg Hollingsworth	40.00									
Manager of Engineering & Operations						Х		159,266.	0.	72,247.
(3) Chad Cornwell	48.35									
Maintenance Crew Leader						Х		152,640.	0.	72,764.
(4) Russell Camp	48.12									
Construction Foreman						Х		154,938.	0.	65,187.
(5) Ryan Haddix	49.10									
Asst. Construction Foreman						Х		149,512.	0.	48,526.
(6) Chandler Milbourn	49.53									
Journeyman Lineman						Х		144,628.	0.	48,176.
(7) Angela Griffin	40.00									
CEO				Х				120,077.	0.	63,175.
(8) Kira Taylor	40.00								_	
CFO				Х				111,003.	0.	46,290.
(9) Granville Colvin	5.58									
Board Member		Х						7,650.	0.	0.
(10) Kevin R. Julian	3.74									
Board Member		Х						6,775.	0.	0.
(11) Clayton Daniel Gard, Jr.	3.98									
Board Member		Х						6,425.	0.	0.
(12) Thomas J. Murphy	1.90									
Chairman		Х		х				5,925.	0.	0.
(13) Julie Higginbotham	1.43									•
Asst. Secretary/Treasurer		Х		х				5,800.	0.	0.
(14) Jonathon T. Martin	1.98									•
Board Member		Х						5,325.	0.	0.
(15) Gregory T. Robinson	2.49							- 1-0		•
Secretary/Treasurer		Х		х				5,150.	0.	0.
(16) Jeff Zimmerman	3.27									-
Vice Chairman		X		х				5,150.	0.	0.
(17) Darin L. Griffin	1.08									-
Board Member		Х						5,100.	0.	0.
432007 12-10-24						~				Form 990 (2024)

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	990 (2024) EnerStar	Electri	ĹĊ	Co	op	ber	at	i	ve	37-02	258	343	Pa	age 8
Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hig	ghes	st C	Compensated Employe	es (continued)				
	(A)	(B)			(C				(D)	(E)			(F)	
	Name and title	Average	(do	F not ch	Posi			ne	Reportable	Reportable		Es	timate	ed
		hours per	box	, unles	s per	rson is	s both	n an	compensation	compensatio	n	am	nount	of
		week		cer and	adı	rector	r/trust	ee)	from	from related			other	
		(list any hours for	rector						the	organization			pensa	
		related	or di	ee			sated		organization	(W-2/1099-MIS	SC/		om the	
		organizations	'ustee	trust		ee	npen		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		•	anizat 1 relat	
		below	l ual ti	tiona		yold	st cor yee	5	1000 NEO)				nizati	
		line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				0.90		
			-			× ·								
			1											
			1											
			1											
			1											
			1											
									1 220 420		_	E 0 '	<u>1 c</u>	16
	Subtotal								1,230,429.		0.	50.	1,0	<u>46.</u> 0.
	Total from continuation sheets to Part VI								1,230,429.		0.	E 0 .	<u>1 c</u>	$\frac{0.}{46.}$
	Total (add lines 1b and 1c)										-	50.	1,0	40.
2	Total number of individuals (including but no	ot limited to th	lose	liste	d ab	ove	e) wn	o re	eceived more than \$100	,000 of reportabl	le			8
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director trust	مم لا		mnl	0.000	o or	hia	hest compensated emr		1		100	
5	line 1a? If "Yes," complete Schedule J for su				•			-				3		Х
4	For any individual listed on line 1a, is the su	m of reportab	 Ie co	mne	 nea	ition	d		her compensation from	the organization		-		
•	and related organizations greater than \$150	-		-						and organization		4	x	
5	Did any person listed on line 1a receive or a									dual for services		-		
-	rendered to the organization? If "Yes," com	-				-			-			5		Х
Sec	tion B. Independent Contractors				,									
1	Complete this table for your five highest con	mpensated ind	depe	ender	nt co	ontra	acto	rs t	that received more than	\$100,000 of corr	npens	ation f	rom	
	the organization. Report compensation for t	the calendar y	ear e	endin	ng w	/ith c	or wi	thir	n the organization's tax	year.				
	(A)								(B)			(C		
	Name and business	address	NC	ONE					Description of s	ervices	С	omper	nsatio	n
								_						
								_						
								+						
								+						
2	Total number of independent contractors (ir	ncluding but n	ot li	nited	to to	thos	se lis	ted	above) who received n	ore than				
	\$100,000 of compensation from the organiz	-			-	0		-	, .					
												- (000 //	2024

432008 12-10-24

			Check if Schedule O co	ontai	ns a respo	onse	or note to any lin	ne in this Part VIII			
				Jindi				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
(0, (0)					<u> </u>						sections 512 - 514
ints	1		Federated campaigns								
Dou Dou			Membership dues								
Å,			Fundraising events								
ilar İlar			Related organizations								
Sin's,			Government grants (contrib								
er (S		f	All other contributions, gifts, gr								
ĘĘ			similar amounts not included a	bove	: <u>1f</u>						
Contributions, Gifts, Grants and Other Similar Amounts			Noncash contributions included in lin								
<u>a</u> C		h	Total. Add lines 1a-1f								
m.	_	_	Sale of Electricity				Business Code 221000	14 500 011	14500011.		
vice	2		Miscellaneous Electr:	ia	Calor		221000	14,500,011. 62,019.			
Ser			MISCEITANEOUS ETECCI.	10 6	Sales		221000	02,019.	62,019.		
Program Service Revenue		C									
gra Re		d									
Pro		e	All all a second and a second as a second								
_			All other program service re					14,562,030.			
	3		Total. Add lines 2a-2f					14,302,030.			
	5		Investment income (including dividends, interes other similar amounts)				372,221.			372,221.	
	4		Income from investment of								
	5		Royalties		-	-					
	5		Г	<u> </u>	(i) Real		(ii) Personal				
	6	2	Gross rents	6a	()		(1) 1 01001101				
	Ŭ			6b							
			F	6c							
			Net rental income or (loss)								
	7		Gross amount from sales of	<u> </u>	(i) Securit		(ii) Other				
	'	u		7a	()		14,650.				
		h	Less: cost or other basis	14			,				
e		~		7b			٥.				
eni		c		7c			14,650.				
ther Revenue			Net gain or (loss)					14,650.			14,650.
er	8		Gross income from fundraising					,			, -
oth	Ŭ		including \$	9 0 . 0	of						
-			contributions reported on li	ine 1							
			Part IV, line 18		,	8a					
		b	Less: direct expenses			8b					
			Net income or (loss) from fu								
	9		Gross income from gaming								
			Part IV, line 19			9a					
		b	Less: direct expenses			9b					
			Net income or (loss) from g			s	•				
	10		Gross sales of inventory, le								
			and allowances			10a					
		b	Less: cost of goods sold			10b					
		с	Net income or (loss) from sa	ales	of invento	ry					
S							Business Code				
Miscellaneous Revenue	11	а	Capital Credits				221000	487,945.	487,945.		
lan		b	Other Revenue				221000	51,238.	51,238.		
Sev Cel		С									
Mis			All other revenue								
-		е	Total. Add lines 11a-11d .					539,183.			
	12		Total revenue. See instruction	IS .				15,488,084.	15101213.	0.	386,871.
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EnerStar Electric Cooperative

432009 12-10-24

Form 990 (2024)

Part VIII Statement of Revenue

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37-0258343 Page 9

Part IX Statement of Functional Expenses

EnerStar Electric Cooperative

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

Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	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 and domestic governments. See Part IV, line 21	11,607.			
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,	147,405.	147,405.		
	trustees, and key employees	664,191.		664,191.	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	330,642.	330,642.		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal	30,980.			
С	Accounting	16,750.	16,750.		
d	, , , , , , , , , , , , , , , , , , , ,				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch 0.)	2 905	2 905		
2	Advertising and promotion	2,895. 70,983.	2,895. 70,983.		
3	Office expenses	10,903.	10,903.		
4	Information technology				
5	Royalties				
6					
7	Travel				
8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	47,103.	47,103.		
0	Interest	569,143.	569,143.		
21	Payments to affiliates	1,246,756.	1,246,756.		
2	Depreciation, depletion, and amortization	83,846.	83,846.		
23	Insurance Other expenses. Itemize expenses not covered	05,040.	05,040.		
24	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	Purchased Power	7,582,583.	7,582,583.		
b	Maintenance Expense	1,545,932.	1,545,932.		
С	Operations Expense	527,693.	527,693.		
d	Customer Accounts Expen	368,504.	368,504.		
е	All other expenses	-634,531.	-634,531.		
25	Total functional expenses. Add lines 1 through 24e	12,612,482.	11,948,291.	664,191.	(
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)				Form 990 (202

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EnerStar Electric Cooperative Part X Balance Sheet

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

Beginning of year End of year 1,247,676. 1,309,845. Cash - non-interest-bearing 1 1 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 2,235,910. 1,570,087. 4 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 6 Loans and other receivables from other disgualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 Assets 7 491,762. 471,338. 8 8 Inventories for sale or use 415,702. 257,112. Prepaid expenses and deferred charges 9 9 **10a** Land, buildings, and equipment: cost or other 46,682,050. basis. Complete Part VI of Schedule D 10a 29,260,334. 15,463,389. 31,218,661. b Less: accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 8,012,095. 8,935,834. 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets Other assets. See Part IV, line 11 15 15 41,663,479. 43,762,877. 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 1,347,864. 1,329,636. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 457,462. 19 486,802. 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, -iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 23 13,211,965. 12,653,202. Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 4,030,475 3,511,515. of Schedule D 25 19,029,538. 26 17,999,383. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 27 27 Net assets with donor restrictions 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 0. Ο. 29 29 Capital stock or trust principal, or current funds 1,464,173. 1,718,124. Paid-in or capital surplus, or land, building, or equipment fund 30 30 21,169,768. 24,045,370. 31 31 Retained earnings, endowment, accumulated income, or other funds 22,633,941. 25,763,494. Total net assets or fund balances 32 32 41,663,479. 43,762,877. 33 33 Total liabilities and net assets/fund balances

(B)

Form 990 (2024)

(A)

Form	n 990 (i	2024) EnerStar Electric Cooperative	37-0	2583	343	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>	<u></u>		X
						_	
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		,488		
2	Total	expenses (must equal Part IX, column (A), line 25)	2		,612		
3	Reve	nue less expenses. Subtract line 2 from line 1	3		,875		
4	Net a	ssets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	22	,633	s <u>, 9</u>	41.
5	Net u	nrealized gains (losses) on investments	5				
6	Dona	ted services and use of facilities	6				
7		tment expenses	7				
8	Prior	period adjustments	8				
9	Othe	r changes in net assets or fund balances (explain on Schedule O)	9		253	8,9	51.
10	Net a	ssets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
		nn (B))	10	25	<u>,763</u>	<u>, 4</u>	94.
Pa	rt XII	Financial Statements and Reporting					
		Check if Schedule O contains a response or note to any line in this Part XII					X
				-		Yes	No
1	Acco	unting method used to prepare the Form 990: 🗌 Cash 🛛 🛣 Accrual 📃 Other		_			
	If the	organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	lf "Y€	s," check a box below to indicate whether the financial statements for the year were compiled or reviewer	d on a				
	sepa	rate 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	Х	
	lf "Y€	s," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
		plidated basis, or both:					
	X	Separate basis Consolidated basis Both consolidated and separate basis					
С	lf "Ye	s" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,				
	revie	w, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
		organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O.				
3a		result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
		rm Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	lf "Ye	s," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audit				
	or au	dits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2024)

432012 12-10-24

SCHEDULE	D
(Form 990)	

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

37-0258343

EnerStar Electric Cooperative

	(a) Donor ad	vised funds	(b) Funds and other accounts
Total number at end of year			
Aggregate value of contributions to (during year)			
Aggregate value of grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor advis	sors in writing that the asse	s held in donor advised	d funds
are the organization's property, subject to the organiz	ation's exclusive legal contr	ol?	Yes
Did the organization inform all grantees, donors, and o	donor advisors in writing tha	it grant funds can be u	sed only
for charitable purposes and not for the benefit of the	donor or donor advisor, or f	or any other purpose co	onferring
art II Conservation Easements. Complete if	the organization answered	"Yes" on Form 990, Pa	art IV, line 7.
Purpose(s) of conservation easements held by the org	ganization (check all that ap	ply).	
Preservation of land for public use (for example	, recreation or education)	Preservation of a	historically important land area
Protection of natural habitat		Preservation of a	certified historic structure
Preservation of open space			
Complete lines 2a through 2d if the organization held	a qualified conservation co	ntribution in the form of	f a co <u>nservation easement on the la</u>
day of the tax year.			Held at the End of the Tax
a Total number of conservation easements			2a
b Total acreage restricted by conservation easements			2b
c Number of conservation easements on a certified hist	toric structure included on li	ne 2a	2c
d Number of conservation easements included on line 2	2c acquired after July 25, 20	06, and not	
on a historic structure listed in the National Register			2d
Number of conservation easements modified, transfe	rred, released, extinguished	, or terminated by the o	organization during the tax
year			
Number of states where property subject to conserva	tion easement is located		
Does the organization have a written policy regarding	the periodic monitoring, ins	pection, handling of	
violations, and enforcement of the conservation ease	ments it holds?		Yes
Staff and volunteer hours devoted to monitoring, insp			
Amount of expenses incurred in monitoring, inspectin	ıg, handling of violations, an	d enforcing conservatio	on easements during the year
B Does each conservation easement reported on line 20	• •		
and section 170(h)(4)(B)(ii)?			
In Part XIII, describe how the organization reports cor	nservation easements in its	revenue and expense s	statement and
balance sheet, and include, if applicable, the text of the	•	ion's financial statemer	nts that describes the
organization's accounting for conservation easements			
art III Organizations Maintaining Collection		Treasures, or Oth	her Similar Assets.
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 8.		
a If the organization elected, as permitted under FASB			
of art, historical treasures, or other similar assets held	l for public exhibition, educa	tion, or research in furt	therance of public
service, provide in Part XIII the text of the footnote to	its financial statements that	describes these items	5.
b If the organization elected, as permitted under FASB ,	ASC 958, to report in its rev	enue statement and ba	alance sheet works of
art, historical treasures, or other similar assets held fo	r public exhibition, educatio	n, or research in furthe	erance of public service,
provide the following amounts relating to these items.			
(i) Revenue included on Form 990, Part VIII, line 1			\$
(ii) Assets included in Form 990, Part X			\$
If the organization received or held works of art, histor	rical treasures, or other simi	lar assets for financial g	gain, provide
the following amounts required to be reported under I			
a Revenue included on Form 990, Part VIII, line 1	-		\$
b Assets included in Form 990, Part X			
r Paperwork Reduction Act Notice, see the Instruction			Schedule D (Form 990) (Rev. 12-
A 432051 01-02-25			
	14	_	
0618 135560 9552.001 20	24.03050 Eners	tar Electri	c Cooperati 9552_

Sche	dule D (Form 990) (Rev. 12-2024) EnerSt								5834		age 2
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures,	or Othe	er Simila	ir Asse	e ts (contii	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	at make s	significant u	use of its	;		
	collection items (check all that apply).										
а	Public exhibition	c	1 🗌 k	Loan or exc	hange progr	am					
b	Scholarly research	e	,	Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how t	hey further t	he organizat	ion's exe	mpt purpo	se in Pai	t XIII.		
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	er similar	r assets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran								line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian, or other interme	diary fo	r contributio	ns or other a	ssets not	t included				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amoun	t	
с	Beginning balance						. 1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F								Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanati	on has been	provided in	Part XIII					
Par	t V Endowment Funds Complete if	the organization and	swered	"Yes" on Fo	rm 990, Part	IV, line 1	0.				
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three ye	ears back	(e) Fou	r years	back
1a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	l q, column (a	a)) held as:				•		
а	Board designated or quasi-endowment		%	0, (
b	Permanent endowment	%									
с	Term endowment	<u></u> %									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse		ation th	at are held a	and administe	ered for tl	he				
	organization by:	0							1	Yes	No
	(i) Unrelated organizations?								3a(i)		
b	If "Yes" on line 3a(ii), are the related organiza										
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm	Y									
	Complete if the organization answere	d "Yes" on Form 99	0, Part l'	V, line 11a. S	See Form 99	0, Part X,	line 10.				
	Description of property	(a) Cost or c		1	or other		ccumulate	d	(d) Boo	k valu	е
		basis (investr	ment)	basis	(other)	dep	oreciation				
1a	Land			10	6,653.				10	6,6	53.
	Buildings				1,691.	1,(099,25	52.		2,4	
	Leasehold improvements						-				
	Equipment			44,75	3,706.	14,3	364,13	37.3	0,38	9,5	69.
	Other				-					-	
	Add lines 1a through 1e. (Column (d) must e		X, line	10c. column	n (B))			3	1,21	8,6	61.
			,	,	. ,,						

Schedule D (Form 990) (Rev. 12-2024)

10440618 135560 9552.001

Schedule D (Form 990) (Rev. 12-2024) EnerStar Electric Cooperative

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

	, , ,	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Patronage Capital -		
(2) Associated Coops	3,794,800.	Cost
₍₃₎ Patronage Capital -		
(4) Co-Bank	251,244.	Cost
₍₅₎ Patronage Capital -		
(6) NRUCFC	574,619.	Cost
₍₇₎ Patronage Capital - NISC	68,799.	Cost
₍₈₎ Patronage Capital - UUS	79,461.	Cost
(9) Patronage Capital - CRC	4,337.	Cost
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))	8,935,834.	

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. 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, line 15, col. (B))	

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Accumulated Provision for Postretirement Benefits	3,511,515.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	3,511,515.
	de est una enstre tile e

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) (Rev. 12-2024)

432053 01-02-25

Sche	dule D (Form 990) (Rev. 12-2024)EnerStar Electric Cooperat	ive		37-	0258343 Page	4
Pa	t XI Reconciliation of Revenue per Audited Financial Statemer	nts Wi	th Revenue per R	eturi	า	_
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	15,488,084	•
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					_
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities					
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e	0	•
3	Subtract line 2e from line 1			3	15,488,084	-
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					-
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)					
° c	Add lines 4a and 4b			4c	0	
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>)			5	15,488,084	
	rt XII Reconciliation of Expenses per Audited Financial Stateme			-		-
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	12,465,077	-
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•		-
ے a	Donated services and use of facilities	2a				
b	Prior year adjustments					
ک اہ	Other losses Other (Describe in Part XIII.)					
d	· · · · · · · · · · · · · · · · · · ·			00	0	
е Л	Add lines 2a through 2d			2e 3	12,465,077	
3 ⊿	Subtract line 2e from line 1			3	12,405,077	<u>•</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
a h	Investment expenses not included on Form 990, Part VIII, line 7b		147,405.			
D	Other (Describe in Part XIII.)		•	4.	147,405	
_	Add lines 4a and 4b			4c 5	12,612,482	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	12,012,402	÷
	rt XIII Supplemental Information					_
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV			4; Part	X, line 2; Part XI,	
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit	tional info	ormation.			
	rt X, Line 2:		+ harra a ma	<u> </u>	ial affact	
	e adoption of this accounting principal doe					_
	its financial position, results of operati					_
000	operative does not believe they are taking	an u	incertain ta	хр	osition.	_
—						
	rt XII, Line 4b - Other Adjustments:					
Rei	tirements of Capital Credits				147,405	•
	RT X, LINE 2			- .	<u> </u>	
	e Cooperative reviews income tax positions				o be taken	
	income tax returns to determine if there a				<u> </u>	_
uno	certainties. The Cooperative recognizes ta	ix be	nefits from	un	certain tax	_
pos	sitions only if it is more likely than not	that	the tax po	sit	lons will	
be	sustained upon examination by taxing autho	priti	es, based o	n t	he	
teo	chnical merits of the positions. The Coope	erati	ve has iden	tif	ied no	_

significant income tax uncertainties.

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Schedule D (Form 990) (Rev. 12-2024)

Schedule D (Form 990) (Rev. 12-2024)

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Chedule D (Form 990) EnerStar Electric Coc Part XIII Supplemental Information (continued)	peracrye	37-0258343 Pag
Part VIII Investments - Program Related. See Form 990, Part X	, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market val
nvestment - CFC CTC'S	452,962.	Cost
nvestment – Other	186,191.	Cost
nvestment - APBO	3,047,868.	Cost
nvestment - FEDL	3,047,868. 475,553.	Cost
		ļ

Schedule D (Form 990)

432431 04-01-24

19

	HEDULE J rm 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		OMB No.	1545-00	047
(Rev.	December 2024)	Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		Open to	Publ	lic
	tment of the Treasury al Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
-	ne of the organizatio		Employer	identificati	on nu	mber
	5	EnerStar Electric Cooperative		025834		
Pa	rt I Question	s Regarding Compensation	_		-	
					Yes	No
1a	Check the appropr	ate box(es) if the organization provided any of the following to or for a person listed on Form	n 990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.	,			
	First-class or d		naluse			
	Travel for com	panions Payments for business use of personal re	sidence			
	Tax indemnific	ation and gross up payments Health or social club dues or initiation fee	s			
	Discretionary	spending account Personal services (such as maid, chauffe	ur, chef)			
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or p	rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2	Did the organizatio	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization'	S			
		ctor. Check all that apply. Do not check any boxes for methods used by a related organizat	ion to			
	·	ation of the CEO/Executive Director, but explain in Part III.				
	Compensation					
		compensation consultant				
	└── Form 990 of o	ther organizations Approval by the board or compensation of	committee			
4	During the year dia	any person listed on Form 000. Part VII. Section A line to with respect to the filing				
4	organization or a re	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
а	•			4a		x
b		e payment or change-of-control payment? eive payment from a supplemental nonqualified retirement plan?				X
c		eive payment from an equity-based compensation arrangement?				x
Ŭ		les 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501()(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	contingent on the r					
а	The organization?			5a		
b	Any related organiz	ation?		5b		
		r 5b, describe in Part III.				
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on			
	contingent on the r	et earnings of:				
а	The organization?			<u>6</u> a		
b	Any related organiz	ation?				
		r 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment				
		nes 5 and 6? If "Yes," describe in Part III		7		<u> </u>
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t				
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		<u> </u>
9		id the organization also follow the rebuttable presumption procedure described in				
		1 53.4958-6(c)?				<u> </u>
For	Paperwork Reduct	on Act Notice, see the Instructions for Form 990. Sch	edule J (Fo	rm 990) (Re	ev. 12-	-2024)

LHA 432111 01-15-25

37-0258343

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-MIS compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	compensation			reported as deferred on prior Form 990
			compensation	compensation				
(1) David Clinton	(i)	185,065.	0.	0.	49,911.	35,370.	270,346.	0.
CEO	(ii)	0.	0.	0.	0.	0.		0.
(2) Greg Hollingsworth	(i)	159,266.	0.	0.	41,524.	30,723.	231,513.	0.
Manager of Engineering & Operations	(ii)	0.	0.	0.	0.	0.		0.
(3) Chad Cornwell	(i)	152,640.	0.	0.	42,597.	30,167.	225,404.	0.
Maintenance Crew Leader	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Russell Camp	(i)	154,938.	0.	0.	45,660.	19,527.	-	0.
Construction Foreman	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Ryan Haddix	(i)	149,512.	0.	0.	29,220.	19,306.	-	0.
Asst. Construction Foreman	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) Chandler Milbourn	(i)	144,628.	0.	0.	28,893.	19,283.	-	0.
Journeyman Lineman	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) Angela Griffin	(i)	120,077.	0.	0.	40,876.	22,299.		0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) Kira Taylor	(i)	111,003.	0.	0.	23,683.	22,607.	-	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) (Rev. 12-2024)

Rev. December 2024)	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 Form 990-EZ.	Open to Public
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.	Inspection
Name of the organization		Employer identification numb
	EnerStar Electric Cooperative	37-0258343
	t I, Line 1, Description of Organization Mis while upholding our values of integrity, ac	
	t to our community.	councadinity,
	e co our commaniey.	
Form 990, Par	t VI, Section A, line 6:	
	ve is member owned.	
	t VI, Section A, line 7a:	
All board mem	bers are elected by the Cooperative members.	
	t VI, Section A, line 7b:	
	e Cooperative vote on and approve all bylaw	changes
Members or ch	e cooperative vote on and approve arr byraw	changes.
Form 990, Par	t VI, Section B, line 11b:	
		A secondary
	w is then performed by the CEO. Additionall	
available to	the Board of Directors for review prior to f	iling.
	t VI, Section B, Line 12c:	<u> </u>
	ve performs an annual review and receives si	gned statements
compliance ir	om relevant personnel.	
Form 990 Par	t VI Section B Line 15.	
	t VI, Section B, Line 15: ve participates in regional and national ind	ustry surveys to
The Cooperati	ve participates in regional and national ind	
The Cooperati use as a basi		d applies to the
The Cooperati use as a basi	ve participates in regional and national ind s for wage compensation related decisions an	d applies to the
The Cooperati use as a basi CEO position Cooperative.	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position	d applies to the
The Cooperati use as a basi CEO position Cooperative. Form 990, Par	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19:	d applies to the s within the
The Cooperati use as a basi CEO position Cooperative. Form 990, Par	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position	d applies to the s within the
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop	d applies to the s within the
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets:	d applies to the s within the erative office.
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par Capital Credi	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets: t Retirement	d applies to the s within the erative office. 74,16
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par Capital Credi Change in Acc	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets: t Retirement umulated Comprehensive Income	d applies to the s within the erative office. 74,16 179,78
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par Capital Credi Change in Acc	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets: t Retirement	d applies to the s within the erative office. 74,16
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par Capital Credi Change in Acc Total to Form FORM 990, PAR	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets: t Retirement umulated Comprehensive Income 990, Part XI, Line 9 T VII, LINE 2C	d applies to the s within the erative office. 74,16 179,78 253,95
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par Capital Credi Change in Acc Total to Form FORM 990, PAR The process h	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets: t Retirement umulated Comprehensive Income 990, Part XI, Line 9 T VII, LINE 2C as not changed from the prior year in regard	d applies to the s within the erative office. 74,16 179,78 253,95
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par Capital Credi Change in Acc Total to Form FORM 990, PAR The process h	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets: t Retirement umulated Comprehensive Income 990, Part XI, Line 9 T VII, LINE 2C	d applies to the s within the erative office. 74,16 179,78 253,95
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The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par Capital Credi Change in Acc Total to Form FORM 990, PAR The process h	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets: t Retirement umulated Comprehensive Income 990, Part XI, Line 9 T VII, LINE 2C as not changed from the prior year in regard	d applies to the s within the erative office. 74,16 179,78 253,95
The Cooperati use as a basi CEO position Cooperative. Form 990, Par A copy of the Form 990, Par Capital Credi Change in Acc Total to Form FORM 990, PAR The process h	ve participates in regional and national ind s for wage compensation related decisions an as well as a vast majority of other position t VI, Section C, Line 19: 990 is available, upon request, at the Coop t XI, line 9, Changes in Net Assets: t Retirement umulated Comprehensive Income 990, Part XI, Line 9 T VII, LINE 2C as not changed from the prior year in regard	d applies to the s within the erative office. 74,16 179,78 253,95
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