

Form **991**

EXTENSION GRANTED UNTIL 11/15/2023 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 クበクク

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		of the Treasury	Do not enter social security numbers on this form as Go to www.irs.gov/Form990 for instructions and t	-	•		Open to Public Inspection		
		nue Service e 2022 calend		ending	normation.		mapeedion		
			organization		D Employer identific	catio	n numbor		
a	heck if pplicabl	e: O Name of	Organization		Linployer identilit	catio	ii iidiiibei		
	Addre	SS WHET	STONE VALLEY ELECTRIC COOPERATIVE						
	Name		usiness as		46-0205275				
	_]chang □Initial		and street (or P.O. box if mail is not delivered to street address)	Room/suite					
	_ return ∏Fiṇal	DO B	OX 512	1100III/Suite	605-432-		₹1		
	⊐return. termir ated		own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 12,799,872.				
	Amen	ded MTTD	ANK, SD 57252		H(a) Is this a group return				
	return Applic		nd address of principal officer: DAVID K. PAGE				Yes X No		
	tion pendii		AS C ABOVE		H(b) Are all subordinates in				
Т	3V-0V	empt status:	301(c)(3) $301(c)(1)$ $301(c)(1)$ $301(c)(1)$ $301(c)(1)$ $301(c)(1)$ $301(c)(1)$ $301(c)(1)$	or 527					
	Vebsi		WHETSTONE.COOP	01 021	H(c) Group exemptio				
			X Corporation Trust Association Other	I Vear	of formation: 1940				
Pa	rt I	Summary	22 Outperducti 11 dec 11 decembra 11 decembra 12 de 12	L Toai	or formation. 13 10 K	n Otal	e or legal dornielle.		
			e the organization's mission or most significant activities: TO Pl	ROVIDE	ELECTRICITY	γт	O RURAL		
e			C COOPERATIVE MEMBERS.				<u> </u>		
Jan		Check this box		ed of more	than 25% of its not ass	eate			
Governance	l				3		9		
ĝ	l		ependent voting members of the governing body (Part VI, line 1b)				9		
			of individuals employed in calendar year 2022 (Part V, line 12)				25		
ţį			of volunteers (estimate if necessary)				0		
Activities &			d business revenue from Part VIII, column (C), line 12				18,771.		
ĕ			business taxable income from Form 990-T, Part I, line 11				8,276.		
	_~	1101 4111 014104	such toos taxasis moonie month of the oos 1,1 are 1, line 11		Prior Year		Current Year		
_	8	Contributions	and grants (Part VIII, line 1h)		0.		0.		
Jue	l		ce revenue (Part VIII, line 2g)		10,798,018.	1	11,245,061.		
Revenue	l	•	come (Part VIII, column (A), lines 3, 4, and 7d)		18,097.		22,091.		
æ	l .		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		17,761.		95,202.		
	l		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,833,876.	1	11,362,354.		
			nilar amounts paid (Part IX, column (A), lines 1-3)		0.		0.		
	l		to or for members (Part IX, column (A), line 4)		766,674.		1,046,374.		
'n	l	-	compensation, employee benefits (Part IX, column (A), lines 5-10)		2,155,139.		2,353,218.		
se			undraising fees (Part IX, column (A), line 11e)		0.		0.		
xpenses	l .		ng expenses (Part IX, column (D), line 25)	0.					
ŭ	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		7,894,303.		7,867,560.		
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,816,116.	1	11,267,152.		
	l		expenses. Subtract line 18 from line 12		17,760.		95,202.		
ces				Ве	ginning of Current Year		End of Year		
t Assers id Balanc	20	Total assets (F	Part X, line 16)		39,339,784.	3	39,780,870.		
ASS J Ba	21		(Part X, line 26)		26,120,391.	2	25,895,093.		
		Net assets or	fund balances. Subtract line 21 from line 20		13,219,393.	1	13,885,777.		
Pa	rt II	Signature	e Block	•	-		-		
nde	er pena	alties of perjury,	I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	/ know	vledge and belief, it is		
			Declaration of preparer (other than officer) is based on all information of wh						
			David Page		8/17/20	23			
igr	า	Signature of of	ficer		Date				
ler		DAVID K	. PAGE, GENERAL MANAGER						

true Sig He Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature 08/16/23 if self-employed P00851848 LAURIE HANSON, CPA LAURIE HANSON, Paid Firm's EIN 45-0250958 Preparer Firm's name EIDE BAILLY LLP 200 E. 10TH ST., STE. 500 Use Only Firm's address Phone no. 605-339-1999 SIOUX FALLS, SD 57104-6375 May the IRS discuss this return with the preparer shown above? See instructions X Yes

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Pa	Charle if Orbital de O contribus a management de configuration in this Bart III	٦
_	Check if Schedule O contains a response or note to any line in this Part III	1
1	Briefly describe the organization's mission: TO ENHANCE THE QUALITY OF LIFE IN OUR COMMUNITY BY PROVIDING THE	
		_
	HIGHEST LEVEL OF SERVICE, QUALITY AND VALUE IN ELECTRICITY,	_
	DISTRIBUTION AND SERVICES.	_
2	Did the organization undertake any significant program services during the year which were not listed on the	_
_	prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	,
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
3	If "Yes," describe these changes on Schedule O.	,
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$	_
	PROVIDED ELECTRIC SERVICE TO APPROXIMATELY 2,696 MEMBERS AND MAINTAINED	,
	1,461 MILES OF LINE.	_
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4b	(Code:) (Expenses \$)
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4c	(Code:) (Expenses \$	_
40	(Code:) (Expenses \$,
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4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	_
4e	Total program service expenses	

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			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		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		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	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X	
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			,,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			,,
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			3,7
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			_ v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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			x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16		4.0		v
47	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,	47		x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		y
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4.		v
00-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
b od	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			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	L	X

WHETSTONE VALLEY ELECTRIC COOPERATIVE 46-0205275 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 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 Х 27 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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Х 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 18 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

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022) WHETSTONE VALLEY ELECTRIC COOPERATIVE
Statements Regarding Other IRS Filings and Tax Compliance (continued) Form 990 (2022) **Part V** Sta

a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a 11893076. b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 663, 063. 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 15 the organization licensed to issue qualified health plans in more than one state? 13a 15 Note: See the instructions for additional information the organization must report on Schedule O. 15 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 13c 13c 14a 15 Is the organization receive any payments for indoor tanning services during the tax year? 14a 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. 15 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.				ı		Yes	No_					
b If at least one is reported on line 22, did the organization file all required federal employment tax returns? 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 If Yes, has it fliefs a Form 990-17 for this year? If ying '16 jine 30, provide an explanation on Schedule 0 3 If Yes, has it fliefs a Form 990-17 for this year? If ying '16 jine 30, provide an explanation on Schedule 0 3 If Yes, has it fliefs a Form 990-17 for this year? If ying '16 jine 30, provide an explanation on Schedule 0 4 If Yes, 'enter the name of the foreign country (such as a bank account, securities account, or this financial account? 5 If Yes, 'enter the name of the foreign country (such as a bank account, securities account, or their financial accounts (FBAF). 5 Was the organization a party to a prohibite tax shelter transaction at any time during the tax year? 5 If Yes, 'enter the name of the foreign country 5 If Yes, 'enter the name of the foreign country 5 If Yes, 'enter the party notify the granization that it was or is a party to a prohibite tax shelter transaction? 5 If Did any taxahal party notify the granization that it was or is a party to a prohibite tax shelter transaction? 5 If Yes, 'enter the organization and gross excepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles as charitable contributions or grits. 5 If Yes, 'enter the organization include with every solicitation an express statement that such contributions or grits. 5 If Yes, 'enter the organization include with every solicitation an express statement that such contributions or grits. 5 If Yes, 'enter the organization include with every solicitation and party for poods and services provided to the payor? 7 If If Yes, 'enter the amount of the donor of the value of the goods or services provided? 7 If If Yes, 'enter the organization include with every solicitation and party solicitation and party solicitation and party solicitatio	2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4b If Yes's Pais It died a Form 1901 for this year? If Yo' to fine 3b, provide an explanation on Schedule O. 4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5c If Yes's It inter the name of the foreign country. 5c Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization party to a prohibited tax shelter transaction or a shell tax or a shell tax sheller transaction at any time during the tax year? 5d Was the organization that we represent the shell tax sheller transaction at any time during the tax year? 5d Was the organization shell are organization file from 886-17. 6d Des the organization that were not tax deductibles a charable contributions? 6d Was the organization shell are party and the organization file from 850-18. 6d Was the organization related to the expression of the production of the year of the production of the year shell are tax deductibles and party to goods and services provided? 7d Uniform 80827 7d Uniform 17d Was deductibles or this value of the goods or services provided? 7d Uniform 17d Was deductibles or the year of the goods or services provided? 7d Uniform 17d Was deductibles or the goods or services provided? 7d Uniform 17d Was deductibles or the goods or services provided? 7d Uniform 17d Was deductibles or the goods or services provided? 7d Uniform 17d Was deductibles or the goods or services provided? 7d Uniform 17		filed for the calendar year ending with or within the year covered by this return	2a	25								
b if Yes, "fast if field a Form 990-T for this year? if "No" to line 3b, provide an explanation on Schedule O A 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)? 50 If Yes, "eriter the name of the foreign country See instructions for filing requirements for FiniCNE Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 50 Was the organization a parity to a prohibited tax shelter transaction at any time during the tax year? 50 Id any taxolization and parity to a prohibited tax shelter transaction at any time during the tax year? 51 West to line 5a or 5b, did the organization file Form 888617? 52 West to line 5a or 5b, did the organization file Form 888617? 53 Dest the organization have end tax deductible as charitable contributions or gifts were not tax deductible? 54 Organization shalt may receive deductible contributions under section 170c). 55 If Yes, "did the organization include with every solicitation an express slatement that such contributions or gifts were not tax deductible? 55 Did the organization receive a payment in excess of \$75 made party as a centribution and partly for goods and services provided? 56 Did the organization shall expressing, or otherwise dispose of tanglicle personal property for which it was required to file Form 8282? 56 Did the organization exceived an ontribution of qualified intellectual property, did the organization file a Form 1906. 57 Did the organization fully the spar, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 57 Did the organization exceived an contribution of qualified intellectual property, did the organization file a Form 1906. 58 Sponsoring organization small and years pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 59 Did the sponsoring organization make a distribution to a donor			าร?									
48 At any time during the calendar year, clid 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)? See instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). 8 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a X X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X X if Yes's did 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? 6c If Yes's did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible. 9 Did the organization trothy the donor of the value of the goods or services provided? 10 Did the organization trothy the donor of the value of the goods or services provided? 11 Did the organization received a contribution of qualified unique the year and the property for which it was required to file Form 8282? 12 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07 and the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07 and the organization received a contribution of property in the property, did the organization file a For												
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b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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 c Enter the amount of reserves on hand 13a Initiation fees and capital and the plans in more than one state? 14a Initiation fees and capital feet and the plans in more than one state? 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. 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 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 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	а				9a							
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17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	16	•	incon	ne?	16		X					
that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	4-7		L1141									
	17											
					1/							

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

	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year								
	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	1							
	officer, director, trustee, or key employee?	2	Х						
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		х					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х					
6	Did the organization have members or stockholders?	6	Х						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a	х						
b		14							
D	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:	10							
а	The governing body?	8a	Х						
a h	Each committee with authority to act on behalf of the governing body?	8b	21	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD							
9		9		x					
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	<u> </u>		21					
000	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No					
100	Did the organization have local chapters, branches, or affiliates?	10a	163	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
112	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									
12a									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	120							
·	on Schedule O how this was done	12c	х						
13		13	X						
14	Did the organization have a written whistleblower policy? 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	17							
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а		15a	Х						
	Other officers or key employees of the organization	15b		Х					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	135							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		Х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104							
	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	100		l					
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)	availak	ole					
10	for public inspection. Indicate how you made these available. Check all that apply.	July)	avandl	510					
19	Own website Another's websiteX Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	rial						
19	statements available to the public during the tax year.	ı ıııları(Jiai						
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
20	DAVID K. PAGE - (605)432-5331								
	PO BOX 512, MILBANK, SD 57252-0512								

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.

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

- 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.

(A)	(B)	l	(C)				out	(D)	(E)	(F)
Name and title	Average hours per week	box	not cl	Pos heck i ss per	ition more son is	than o s both or/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) DAVID PAGE	48.00	-						100 504		100 455
GENERAL MANAGER	6 00			Х		_		138,724.	0.	108,477.
(2) BILL TOSTENSON PRESIDENT	6.20	Х		х				8,424.	0.	0.
(3) DALE JENSEN	4.50							,		
VICE PRESIDENT		Х		х				8,118.	0.	0.
(4) DAVID BEHRNS	4.40							•		
DIRECTOR		Х						7,560.	0.	0.
(5) KRISTA ATYEO-GORTMAKER	3.40									
TREASURER		Х		Х				7,403.	0.	0.
(6) JOEL ADLER	2.80									
DIRECTOR		Х						5,985.	0.	0.
(7) PAUL NELSON	1.90								_	_
DIRECTOR		Х						5,828.	0.	0.
(8) SCOTT NIEDERT	2.40									
DIRECTOR	0.40	Х						5,355.	0.	0.
(9) TOM BERENS	2.40							4 100	•	•
DIRECTOR	1 00	Х						4,192.	0.	0.
(10) DARREN STRASSER	1.80	3,7		,,				2 700	0	0
SECRETARY		Х		Х				3,780.	0.	0.
	•						•	•		000

232007 12-13-22 Form **990** (2022)

Section A. Officers	s, Directors, Trus	iees, Key Eiii	JIUY	ees,	and	ııııç	gnes	ı	ompensated Employee	s (continuea)				
(A)		(B)			(((D)	(E)			(F)	
Name and title	е	Average		not cl		more	than c		Reportable	Reportable				
		hours per week					s both or/trust		compensation	compensatio		an	nount	of
		(list any	tor						from the	from related organization		com	other pensa	tion
		hours for	Individual trustee or director				p		organization	(W-2/1099-MI			om the	
		related	9e 0 r	stee			nsate		(W-2/1099-MISC/	1099-NEC)			anizat	
		organizations	trust	nal tru		yee	эш ре		1099-NEC)	,		•	d relat	
		below	idual	Institutional trustee	er	Key employee	est co loyee	Jer				orga	anizati	ons
		line)	Indi	Insti	Officer	Key 6	Highest compensated employee	Former						
											-			
											-			
			-											
			-											
			-											
1b Subtotal					l				195,369.		0.	10	8,4	77.
c Total from continuation									0.		0.			0.
d Total (add lines 1b and									195,369.		0.	10	8,4	
2 Total number of individua									•	000 of reportable	——- е			
compensation from the o							,		,					1
•													Yes	No
3 Did the organization list a	ny former officer,	director, trust	ee, k	сеу е	empl	oye	e, or	hig	hest compensated empl	loyee on				
line 1a? If "Yes," complet	e Schedule J for s	uch individual										3		Х
4 For any individual listed of														
and related organizations	greater than \$150),000? If "Yes,	" co	mple	ete S	Sche	edule	J f	or such individual			4	Х	
5 Did any person listed on I														
rendered to the organizat	ion? If "Yes." com	plete Schedule	e J fo	or su	ıch r	oers	on .					5		Х
Section B. Independent Cont														
1 Complete this table for yo											pensat	ion fro	om	
the organization. Report of	•	the calendar ye	ear e	ndin	ng w	ith c	or wi	hin T		ear.				
NI	(A) ame and business	addraga							(B) Description of s	om dooo		()		_
		address						_	<u> </u>			ompe	nsatio	1
ENGELSTAD ELECTR		F7001							BORING, TREN	CHING,	l	1.0	7 0	c 0
PO BOX 934, WATE			2.4	2.4				-	PLOWING			19	7,0	0 ∠ •
POWER SYSTEM ENGRIMROCK RD, SUIT					27	1 2		ļ			l	1 0	0 7	2
RIMROCK RD, SUIT	E 300, MA	DISON,	WТ	<u> </u>	31.	т э		╣	ENGINEERING			10	0,7	J Z •
								\dashv						
2 Total number of independ \$100,000 of compensation	,	•	ot lin	nitec	d to t	thos 2	_	ted	above) who received mo	ore than				

46-0205275

		Check if Schedule O contains a response or note to any I	ine in this Part VIII			
		Check if Schedule O contains a response of flote to any i	(A) Total revenue	(B) Related or exempt function revenue	(C)	(D) Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	k	Membership dues 1b				
s, G	c	Fundraising events1c				
ifts ar /	c	Related organizations1d				
s, (imil	e	Government grants (contributions)				
tion r S	f	All other contributions, gifts, grants, and				
ibut		similar amounts not included above 1f				
ntri d O	ç	Noncash contributions included in lines 1a-1f				
<u>လ</u> မ	ŀ	Total. Add lines 1a-1f				
		Business Code				
Se	2 8		10,408,641.	 		
Program Service Revenue	k	CAPITAL CREDITS 221000	811,819.	811,819.		
	C					
ran Sev	C	·				
og F	•					
ď		All other program service revenue 221000	24,601.	24,601.		
		Total. Add lines 2a-2f	11,245,061.			
	3	Investment income (including dividends, interest, and				
		other similar amounts)	22,091.			22,091.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties (i) Post (ii) Post (iii) Post (iiii) Post (iii) Post (iii) Post (iiii) Post (iii) Post (iii) Post (i				
	_	(i) Real (ii) Personal				
		Gross rents 6a	_			
		Less: rental expenses 6b	_			
		Rental income or (loss) 6c				
		Net rental income or (loss) Gross amount from sales of (i) Securities (ii) Other				
	/ 8	Constitution of the consti	_			
		assets other than inventory 7a	_			
ø.	K	Less: cost or other basis				
Revenue	_	and sales expenses	_			
eve		. ,				
er R		Net gain or (loss) Gross income from fundraising events (not				
Othe	0 6	· · · · •				
O		contributions reported on line 1c). See				
		Part IV, line 18				
	ŀ	Less: direct expenses 8b				
		Net income or (loss) from fundraising events				
		Gross income from gaming activities. See				
		Part IV, line 19				
	k	Less: direct expenses 9b				
		Net income or (loss) from gaming activities				
		Gross sales of inventory, less returns				
		and allowances 10a 1,532,720				
	k	Less: cost of goods sold 10b 1,437,518				
		Net income or (loss) from sales of inventory	95,202.	76,431.	18,771.	
		Business Code				
sno e	11 a					
ane	k					
Miscellaneous Revenue	c					
Aisc B	c	All other revenue				
	•	Total. Add lines 11a-11d				
	12	Total revenue. See instructions	11,362,354.	11321492.	18,771.	22,091.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (D) Do not include amounts reported on lines 6b. Program service expenses Total expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 1,046,374. Benefits paid to or for members Compensation of current officers, directors, 260,028. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,643,053. Other salaries and wages 7 8 Pension plan accruals and contributions (include 313,495. section 401(k) and 403(b) employer contributions) Other employee benefits 9 136,642. 10 Payroll taxes Fees for services (nonemployees): Management Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 716,181. 20 Payments to affiliates _____ 21 1,102,591. Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 2,436. UBI TAX COST OF POWER 5,558,243. 1,078,866. ADMIN & GENERAL d DISTRIBUTION-OPERATIONS 723,331. -1,314,088. e All other expenses 11,267,152. Total functional expenses. Add lines 1 through 24e 25 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)

Part X | Balance Sheet

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 2,761,867. 580,337. 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 1,178,607. 1,033,842. 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 411,810. 336,230. Notes and loans receivable, net 7 821,470. 965,688. Inventories for sale or use 8 313,729. 433,818. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D ______ 10a 39,306,336. b Less: accumulated depreciation 10b 10,839,636. 26,672,507. 28,466,700. 10c Investments - publicly traded securities 11 11 247,459. 495,616. Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 6,957,011. 13 7,443,963. 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 39,339,784. 39,780,870. 16 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 1,128,837. 1,175,050. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 24,636,487. 24,095,008. Secured mortgages and notes payable to unrelated third parties 23 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 355,067. 625,035. of Schedule D 26,120,391. 25,895,093. 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 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 0. 0. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 0. 30 30 13,219,393. 31 13,885,777. 31 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 13,219,393. 13,885,777. 32 32 39,339,784. 39,780,870. 33 33 Total liabilities and net assets/fund balances

Form **990** (2022)

Form **990** (2022)

Form	1 990 (2022) WHETSTONE VALLEY ELECTRIC COOPERATIVE	46-0	205275	Pag	ge 12
	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,362	, 3!	5 4 .
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,267		
3	Revenue less expenses. Subtract line 2 from line 1	3			02.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	13,219	, 39	93.
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	571	,18	82.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	13,885	7.	77.
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 on Schedule	Ο.			
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
	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:				
	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	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

WHETSTONE VALLEY ELECTRIC COOPERATIVE

Employer identification number 46-0205275

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		imilar Funds o	or Accoun	ts. Complete if the
	organization answered Tee Sitt offit 600, Fart IV, IIII	(a) Donor advise	d funds	(b) Fun	ds and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v		ld in donor advise	d funds	
	are the organization's property, subject to the organization's	exclusive legal control?			Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any	y other purpose c	onferring	
	impermissible private benefit?				
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes	s" on Form 990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	_		
	Preservation of land for public use (for example, recreated	tion or education)	Preservation of	a historically	important land area
	Protection of natural habitat		Preservation of	a certified his	storic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribu	ition in the form o	of a conserva	
	day of the tax year.				Held at the End of the Tax Year
а	Total number of conservation easements			2a	
b					
С	Number of conservation easements on a certified historic stru			2c	
d	Number of conservation easements included in (c) acquired a				
	historic structure listed in the National Register			2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the	organization	during the tax
	year				
4	Number of states where property subject to conservation eas				
5	Does the organization have a written policy regarding the per		ion, handling of		
	violations, and enforcement of the conservation easements it				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, an	a enforcing conse	ervation ease	ments during the year
7	Amount of avances incurred in manitaring increasing hand	lling of violations, and ant	iavaina aanaamiati		to duving the year
7	Amount of expenses incurred in monitoring, inspecting, hand	illing of violations, and em	ording conservati	on easemen	is during the year
8	Does each conservation easement reported on line 2(d) above	a satisfy the requirement	s of soction 170/h	\(\(\(\D\)\(i\)	
0					Yes No
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation				
9	balance sheet, and include, if applicable, the text of the footn				
	organization's accounting for conservation easements.	lote to the organization's	ililailciai stateillei	ilis iliai uesc	indes trie
Par	t III Organizations Maintaining Collections of	Art, Historical Trea	asures, or Oth	ner Simila	r Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its reve	enue statement an	nd balance sh	neet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education,	or research in fur	therance of p	oublic
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that desc	cribes these items	S	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue	statement and ba	alance sheet	works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furthe	erance of put	olic service,
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1				\$
					\$
2	If the organization received or held works of art, historical trea			gain, provide)
	the following amounts required to be reported under FASB A			- • •	
а	Revenue included on Form 990, Part VIII, line 1				\$
b	Assets included in Form 990, Part X				\$

Description of property	(a) Cost or other	(b) Cost or other	(c) Accumulated	(d) Book value						
	basis (investment)	basis (other)	depreciation							
1a Land		20,531.		20,531.						
b Buildings		1,490,967.	498,953.	992,014.						
c Leasehold improvements										
d Equipment		36,295,735.	10,340,683.	25,955,052.						
e Other		1,499,103.		1,499,103.						
Total. Add lines 1a through 1e. (Column (d) must equa	al Form 990 Part X colur	mn (R) line 10c)	_	28,466,700.						

Schedule D (Form 990) 2022

Schedule D	(Form 990) 2022	WHETSTONE	VALLEY	FLECIKIC	COOPERATIVE	46-0203273	Pa
Part VII	Investments -	Other Securities.					

Part VII Investments - Other Securities. Complete if the organization answered "Yes" of the organization and the organization answered "Yes" of the organization and the organiz	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line	12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Co	ost or end-of-year market value
(1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on 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: Co	ost or end-of-year market value
(1) EAST RIVER PATRONAGE			
(2) CAPITAL	6,937,546.	COST	
(3) BASIN MEMBERSHIP	100.	COST	
(4) EAST RIVER ELECTRIC	100.	COST	
(5) TOUCHSTONE ENERGY	2,500.	COST	
(6) CFC MEMBERSHIP/SUB			
(7) CERTIFICATE	73,801.	COST	
(8) NISC MEMBERSHIP	100.	COST	
(9) NRTC MEMBERSHIP	1,000.	COST	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	7,443,963.		
Part IX Other Assets.			
Complete if the organization answered "Yes" of		1d. See Form 990, Part X, line	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part	<u> </u>
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) CONSUMER DEPOSITS			159,382
(3) DEFERRED CREDITS			65,653
(4) OTHER REGULATORY LIABILITI	ES		400,000
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		625,035
2. Liability for uncertain tax positions. In Part XIII, provide			•
organization's liability for uncertain tax positions under		•	· —

	Complete if the organization answered "Yes" on Form 990, Part IV, Iir	ne 12a.		
1	Total expenses and losses per audited financial statements		1	
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		
	Other losses			
	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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		
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)	5	
Pa	rt XIII Supplemental Information.	•	<u> </u>	
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4; Part IV, lines 1b and 2b; P	art V, line 4; Part X, line 2; Part XI	١,

lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) WHETSTONE VALLEY ELECTRIC Copart XIII Supplemental Information (continued)

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 value
NISC PATRONAGE	42,287.	COST
RESCO STOCK	125,589.	COST
FEDERATED STOCK	104,556.	COST
COBANK INVESTMENT	86,827.	COST
NRTC PATRONAGE	10,866.	COST
CFC - CTC'S	48,405.	COST
ITC - PATRONAGE	10,286.	COST

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

WHETSTONE VALLEY ELECTRIC COOPERATIVE

 $Employer\ identification\ number$ 46-0205275

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

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

Schedule J (Form 990) 2022

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-MISo compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DAVID PAGE	(i)	134,548.	0.	4,176.	78,041.	30,436.	247,201.	0.
GENERAL MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
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	(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, PART II, COLUMN (C)
COLUMN C FOR DAVID PAGE INCLUDES THE CHANGE IN ACTUARIAL VALUE IN THE
DEFINED BENEFIT PLAN FOR DAVID OF \$73,748. THE ACTUAL CONTRIBUTION BY
THE COOPERATIVE INTO THE DEFINED BENEFIT PLAN ON DAVID'S BEHALF IN 2022
WAS \$34,107.

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

WHETSTONE VALLEY ELECTRIC COOPERATIVE

Employer identification number 46-0205275

FORM 990, PART VI, SECTION A, LINE 2: DALE JENSEN AND DAVID BEHRNS HAVE A FAMILY RELATIONSHIP. FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS ONE CLASS OF MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ELECT THE BOARD OF DIRECTORS, ALL MEMBERS ARE OF THE SAME CLASS AND EACH MEMBER HAS ONE VOTE. FORM 990, PART VI, SECTION A, LINE 7B: THE COOPERATIVE MAY NOT SELL, LEASE OR OTHERWISE DISPOSE OF OR ENCUMBER ALL OR ANY SUBSTANTIAL PORTION OF ITS PROPERTY WITHOUT AT LEAST A TWO-THIRDS VOTE OF ALL MEMBERS OF THE COOPERATIVE. ALSO CHANGES TO BYLAWS MUST BE APPROVED BY VOTE OF THE MEMBERS. ALL MEMBERS ARE OF THE SAME CLASS AND EACH MEMBER HAS ONE VOTE. FORM 990, PART VI, SECTION A, LINE 8B: THE ORGANIZATION DOES NOT HAVE COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE BOARD. FORM 990, PART VI, SECTION B, LINE 11B: THE MANAGER AND STAFF GO OVER THE FORM 990 WITH THE DIRECTORS AT ONE OF THE BOARD MEETINGS PRIOR TO FILING THE 990.

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** WHETSTONE VALLEY ELECTRIC COOPERATIVE 46-0205275 BOARD MEMBERS AND EMPLOYEES ARE COVERED BY THE CONFLICT OF INTEREST POLICY. BOARD MEMBERS REPORT TO THE BOARD PRESIDENT, GENERAL MANAGER OR THE ATTORNEY TO DETERMINE WHETHER A CONFLICT EXISTS, WHILE EMPLOYEES REPORT TO THEIR DEPARTMENT MANAGERS, THE GENERAL MANAGER OR THE BOARD PRESIDENT. THE GENERAL MANAGER, DEPARTMENT MANAGERS AND THE BOARD OF DIRECTORS ARE RESPONSIBLE FOR ADMINISTERING THE POLICY. IF A CONFLICT EXISTS, THE DIRECTOR REMOVES HIMSELF/HERSELF FROM THE ROOM. THE BOARD WILL DETERMINE IF THERE IS VALUE IN THE DIRECTOR BEING INVOLVED IN THE DISCUSSION PRIOR TO THE VOTE. FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD REVIEWS THE GENERAL MANAGERS PERFORMANCE ANNUALLY, MEETS WITH THE GENERAL MANAGER TO GO OVER THE PERFORMANCE REVIEW, AND DETERMINES HIS SALARY BASED ON PERFORMANCE AND COMPARABILITY DATA. A SIMILAR PROCESS APPLIES TO ALL EMPLOYEES. THE PROCESS WAS LAST UNDERTAKEN IN 2022. FORM 990, PART VI, SECTION C, LINE 19: THESE DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: RETIREMENT OF CAPITAL CREDITS -475,192. ALLOCATION OF 2022 PATRONAGE TO MEMBERS IN 2023 1,046,374. TOTAL TO FORM 990, PART XI, LINE 9 571,182. FORM 990, PART XII, LINE 2B THE ORGANIZATIONS FINANCIAL STATEMENTS WERE AUDITED BY AN INDEPENDENT ACCOUNTANT FOR THE FISCAL YEAR ENDING APRIL 30, 2023.

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** 46-0205275 WHETSTONE VALLEY ELECTRIC COOPERATIVE FORM 990, PART VII, COLUMN F, OTHER COMPENSATION: INCLUDED IN OTHER COMPENSATION IS THE ESTIMATED CURRENT YEAR INCREASE OR DECREASE IN THE ACTUARIAL VALUE OF THE DEFINED BENEFIT PLAN FOR THE GENERAL MANAGER. THE CURRENT YEAR INCREASE OR DECREASE DOES NOT REPRESENT CURRENT YEAR CONTRIBUTIONS TO THE PLAN. RATHER, IT IS AN ESTIMATE OF THE INCREASE OR DECREASE IN THE ACTUARIAL VALUE OF THE PLAN AS CALCULATED BY THE PLAN ADMINISTRATOR. FORM 990, PART IX, LINE 24E STATEMENT OF FUNCTIONAL EXPENSES: THE LABOR, PENSION AND PAYROLL TAXES REPORTED ON LINES 6-10 ARE INCLUDED IN DISTRIBUTION EXPENSE, ADMINISTRATIVE & GENERAL EXPENSE AND CUSTOMER EXPENSE. THEREFORE, LABOR, PENSION AND PAYROLL TAXES ARE SHOWN AS A REDUCTION TO OTHER EXPENSES ON LINE 24E. FORM 990, PART VII DAVID PAGE, GENERAL MANAGER, IS THE TOP MANAGEMENT OFFICIAL AND THE TOP FINANCIAL OFFICIAL OF THE COOPERATIVE. FORM 990, PART IX, LINE 4, BENEFITS PAID TO OR FOR MEMBERS: THE COOPERATIVE HAS INTERPRETED THE INSTRUCTIONS TO PART IX, LINE 4, TO MEAN PARTONAGE CAPITAL ALLOCATED FOR THE YEAR, RATHER THAN PATRONAGE CAPITAL RETIRED. THIS IS CONSISTENT WITH THE BY-LAWS OF THE COOPERATIVE.

Name:	WHETSTONE	VALLEY	ELECTRIC	COOPERATIV
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FEIN:

46-0205275

Year Origi- nated	32 Annual Limitation Original Carryover Amount	Total Amount Used	Amount Used for 12/31/19	Amount Used for 12/31/20	Amount Used for 12/31/21	Amount Used for 12/31/22	Amount Used for				
2018	17,591.	17,591.	2,771.	4,548.	1,390.	8,882.					
Detail Type	E Amount S Used for B C	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amour Used fo

FEIN:

46-0205275

		and Entity: PRE 382 Annual Limitation	-2018 NOL FED	Section 382 Carryover		DETAIL C	ARRYOVER SCH	EDULE				
	Year Origi- nated	Original Carryover Amount	Total Amount Used	Amount Used for 12/31/17	Amount Used for 12/31/18	Amount Used for						
	2015	425.	425.	425.								
В	2016	18,535.	18,535.	10,830.	7,705.							
CDEFGHLJKLMZOPGR%HU>V	Detail Type	E Amount Used for B C	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
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