EXTENDED TO NOVEMBER 15, 2019

Return of Organization Exempt From Income Tax

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

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public

<u> </u>	OI LIN	e 20 to Caleridar year, or tax year beginning	enung						
B (Check if applicable	C Name of organization		D Employer ident	ification number				
_	∵ Addre	TELECTRIC REPLACEMENT COONCID OF LEVAS							
F	_]chang □Name	e INC		74-2587416					
F	_]chang □Initial	ı		-					
	return _Final _return	Number and street (or P.O. box if mail is not delivered to street address) 7620 METRO CENTER DRIVE	E Telephone num 512	ber -225-7000					
	termin			G Gross receipts \$	244,963,920.				
	Amen	ded ATTCMTN MY 707/// 1612		H(a) Is this a group					
F	Application			for subordinat					
	pendi	SAME AS C ABOVE			s included? Yes No				
T 7	Гах-ех	empt status: $\boxed{}$ 501(c)(3) $\boxed{\mathbf{X}}$ 501(c) ($\boxed{4}$) $\boxed{}$ (insert no.) $\boxed{}$ 4947(a)(1) (or 527	1	a list. (see instructions)				
		te: NWW. ERCOT. COM	01 021	H(c) Group exemp					
		organization: X Corporation Trust Association Other	I Year		M State of legal domicile: TX				
	art I	Summary	L 1001	or formation, = 2 2 2	141 Otato of logal dofficito, = ==				
	1	Briefly describe the organization's mission or most significant activities: SEE \$	SCHEDU	LE O					
Governance	-			-					
nar	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net a	assets.				
Ve	3				3 15				
ၓ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4 14				
ფ		Total number of individuals employed in calendar year 2018 (Part V, line 2a)			5 811				
iţi		Total number of volunteers (estimate if necessary)			6 18				
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			7a 0.				
ď		Net unrelated business taxable income from Form 990-T, line 38			7b 21,246.				
		,		Prior Year	Current Year				
•	8	Contributions and grants (Part VIII, line 1h)		0	. 18,117.				
nge	9	Program service revenue (Part VIII, line 2g)	2	19,326,865	. 231,838,269.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,935,183					
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,086					
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		22,267,134	. 244,963,920.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0	. 0.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0	. 0.				
ø	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		04,301,709	. 106,877,847.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	. 0.				
per	b	Total fundraising expenses (Part IX, column (D), line 25)	0.						
й	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		00,177,036	. 102,256,842.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	_	04,478,745	. 209,134,689.				
	19	Revenue less expenses. Subtract line 18 from line 12		17,788,389	. 35,829,231.				
or or		•		ginning of Current Yea	r End of Year				
ets	20	Total assets (Part X, line 16)		1223782330					
ASS	21	Total liabilities (Part X, line 26)		1169249541	. 1439446829.				
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		54,532,789	. 90,317,390.				
Pa	art II	Signature Block							
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of	my knowledge and belief, it is				
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.					
Sig	n	Signature of officer		Date					
Her	e	SEAN TAYLOR, VP AND CFO							
		Type or print name and title							
		Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Paid	i	TROY MARINE, CPA TROY MARINE, CPA	A 1	1/06/19 self-em					
Prep	oarer	Firm's name ▶ BAKER TILLY VIRCHOW KRAUSE, LLP		Firm's EIN					
Use	Only	Firm's address 777 E. WISCONSIN AVE., 32ND FLOO	R						
		MILWAUKEE, WI 53202		Phone no. 4	14.777.5500				
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				

Par	t III Statement of Program S	ervice Accomplishments		
	Check if Schedule O contains a	response or note to any line in this Part III		
1	Briefly describe the organization's mis-			
		BY ENSURING A RELIABLE	GRID, EFFICIENT ELEC	TRICITY
	MARKETS, OPEN ACCES	S AND RETAIL CHOICE.		
2	Did the organization undertake any siç	nificant program services during the year which	h were not listed on the	
	prior Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new services of			
3	Did the organization cease conducting	, or make significant changes in how it conduc	cts, any program services?	Yes X No
	If "Yes," describe these changes on Se		, , , , ,	
4		ervice accomplishments for each of its three la	rgest program services, as measured by	expenses.
		ations are required to report the amount of gra		
	revenue, if any, for each program servi			,,
4a		, 101, 394 • including grants of \$) (Revenue \$ 244	,870,375·)
··u	ERCOT SUCCESSFULLY	MANAGES THE FLOW OF ELEC	CTRICITY TO APPROXIMA	
		N THE STATE OF TEXAS, W		
		MENT FOR THE COMPETITIVE		
		ION OF ELECTRIC PROVIDER		
	COMPETITIVE CHOICE		THE COURT BUTTETING I	
	COMPUTATION CHOICE			
	-	·		
41:	1) /-	
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (Describe in S	chedule O.)		
	(Expenses \$	including grants of \$) (Revenue \$)
4e	Total program service expenses	159,101,394.		
				Form 990 (2018)

Form 990 (2018)

Page 3

Form 990 (2018) INC
Part IV Checklist of Required Schedules 74-2587416

1 Is the organization described in section SDI (KS) or 4947(a)(1) (other than a private foundation)? If 'Yes, 'complete Schedule S, Schedule of Contributors? 2 Is the organization required to comblete Schedule B, Schedule of Contributors? 3 Is 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 II 3 X X Section SDI (KS) organizations. Did the organization engage in libbying activities, or have a section 501(n) section in effect during the tax year? If 'Yes,' complete Schedule C, Part II 4 Is the organization a section 501(4)(4), 501(5)(6), 501(6)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 88-19? If 'Yes,' complete Schedule C, Part II 5 Is the organization association strong who are done and that the control of the organization members of the accessment date or any similar than of an accounts? If 'Yes,' complete Schedule D, Part II 5 Is the organization receive or hold a conservation assement, including assements to preserve open space, 10 In the organization receive or hold a conservation assement, including assements to preserve open space, 11 It is considered to the organization received or hold a conservation assement, including assements to preserve open space, 12 It is the organization received or hold a conservation assement, including assements to preserve open space, 13 It is the organization received or through a related organization include account liability, serve as a custodial nor amounts not listed in Part X, inc. 11 In the organization, directory to through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part VII 10 Id the organization report an amount for interview and part is the second of the part VIII. If the organization is an avery and the organization report and amount for interview and part				Yes	No
2 Is 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 I Section 501(c)(3) organizations. Did the organization engage in libbying activities, or have a section 501(f)) election in effect during the tax year? If "Yes," complete Schedule C, Part I I I I be organization as defined in Review proceeding organization that receives membership dues, assessments, or similar amounts as defined in Review proceeding organization that receives membership dues, assessments, or similar amounts as defined in Review proceeding organization that receives membership dues, assessments, or similar amounts as defined in Review proceeding organization that receives membership dues, assessments, or similar amounts as defined in Review proceeding organization that receive a more provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I I I the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part I II I I I I I I I I I I I I I I I I	1				37
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 II 4 Section S01(c)(3) organizations. Did the organization engage in lobbying activities, or have a section S01(f)) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization as sections 501(c)(4), 501(c)(6), 501(c)					
section 50(R)3 organizations. Did the organization engage in lobbying activities, or have a section 50(R) election in effect during the tax year? If Yes," complete Schedule C, Part II Is the organization as ection 50(R)4, 501(R)6, or 501(R)6) organization that receives membership dues, assessments, or similar amounts as defined in Newtona Proceeding 98 197; If Yes," complete Schedule C, Part II Is the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts' If If Yes," complete Schedule D, Part I Is the organization receive or hold a conservation essement, including assements to preserve open space, the environment, historical reases, or instorical treasures, or other similar assets? If Yes, "complete Schedule D, Part II Is the organization maintain collections of works of art, historical treasures, or other similar assets?" If Yes, "complete Schedule D, Part II Is the organization in amount for IPart X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If Yes, "complete Schedule D, Part IV If Yes, complete Schedule D, Part IV If Yes, complete Schedule D, Part IV If Yes, complete Schedule D, Part IV If Yes, as aspliciable. 10 If the organization indepth or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-indownents? If Yes, complete Schedule D, Part X, line 107 If Yes, complete Schedule D, Part X If If If If If Yes, complete Schedule D, Part X, line 107 If Yes, complete Schedule D, Part X, line 107 If Yes, complete Schedule D, Part X, line 107 If Yes, complete Schedule D, Part X, line 107 If Yes, complete Schedule D, Part X, line 107 If Yes, complete Schedule D, Part X X, line 107 If Yes, complete Schedule D, Part X, line 107 If Yes, complete Schedule D, Part			2		X
Section S01(x)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(x) election in effect during the tax year? (**I**Yes,** complete Schedule C, Part III. Is the organization a section 5(x)(4), 501(x)(6), 101(x)(6), 101(x)(6	3				7.7
during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section Solic(4), 501(5)(8), or 501(6)(8) or 501(6)	_		3		Λ
5 Is the organization a section 6016(vil), 6016(cil)5, or 5016(cil)5, or 5016(cil)5, or 5016(cil)5, or 5016(cil)5, or complete Schedule C, Part III 6 Did the organization maintain any clonor 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 for which donors have the right to provide advice on the distribution or investment of amounts in such 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 II. 7 Did the organization maintain any clonor advised funds or accounts? If "Yes," complete Schedule D, Part III. 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 9 Did the organization report an amount in Part X, line 21, for ascrow 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. 10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 11 If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Part VIII. 12 Did the organization report an amount for investments - other securities in Part X, line 12 If "Yes," complete Schedule D, Part VIII. 13 Did the organization report an amount for investments - program related in Part X, line 12 It that is 5% or more of its total assets reported in Part X, line 16 If "Yes," complete Schedule D, Part VIII. 14 Did the organization shape and any organization organization organization organization organization organization and consolidated funds and statements for the tax year? If "Yes," complete	4		_		
similar amounts as defined in Revenue Procedure 98-19? # "Yes," complete Schedule C, Part III or provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? ## "Yes," complete Schedule D, Part III or the environment, historic land areas, or historic structures ## "Yes," complete Schedule D, Part III or the originization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? ## "Yes," complete Schedule D, Part IV 10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-indowments ## "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? #* "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for investments - organization state an amount for investments - organization assets reported in Part X, line 16? #* "Yes," complete Schedule D, Part VII 11 Did Did the organization report an amount for investments - organization state an amount for investments - organization assets reported in Part X, line 16? #* "Yes," complete Schedule D, Part VIII X 11 Did 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? #* "Yes," complete Schedule D, Part X 11 Did Did the organization and an amount for other liabilities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? #* "Yes," complete Schedule D, Part X 11 Did Did the organization associated in section			4_		
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 II Did the organization receive to hold a conservation easement, including easements to preserve open space, the environment, historical areas, or historic structures? If "Yes," complete Schedule D, Part II J 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 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 Did the organization report an amount for a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V II If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II 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 V II It II	5				37
provide advice on the distribution or investment of amounts in such funds or accounts? (if "Yes," complete Schedule D, Part I 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 — Schedule D, Part			5		X
To Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yee," complete Schedule D, Part II and the environment, historic land areas, or historic structures? If "Yee," complete Schedule D, Part II and the environment, land the 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 "Yee," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yee," complete Schedule D, Part V II If the organization assever to any of the following questions is "Yes," then complete Schedule D, Part VI, If If the organization are only of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IV, VIII, IV, VIII, IV, VIII, VIII, IV, VIII, VII	6				7.7
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 8		, , ,	6		Λ
Bid the organization maintain collections of works of art, historical treasures, or other similar assets? #"Yes," complete Schedule D, Part III	7				37
Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for 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 Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts V, VIII, VIII, X, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII 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 VIII b Did the organization ore port an amount for westments - 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 b Did the organization report an amount for other assets 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 b Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11d X 11d X 12a Did the organization separate or consolidated financial statements for the tax year? 11d Yes, "complete Schedule D, Part X 11d Did the organization included in consolidated, independent audited financial statements for the tax year? 11d Yes," complete Schedule D, Part X and XII is optional 12b X 12a 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? 12b Did the organizati			7		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services? 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, X, or X as applicable. 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 12 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 13 Did the organization report an amount for other assets 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 14 Did the organization report an amount for other assets in Part X, line 18 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 15 Did the organization organization export an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 16 Did the organization substiling that a consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 17 Did the organization organization export an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16 that year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 14 Did	8	, ,			
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 Did the organization disconserved the organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII b Did the organization report an amount or 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 VIII 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 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 VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X . Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X . Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts X in and XII is optional 13 X be the organization and year evidence of the VIII is 14 X be organization and year evidence of the VIII is 14 X be organization or port on Part IX, colu			8		X
## "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? #* "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable. 22 Id the organization report an amount for land, buildings, and equipment in Part X, line 10? #* "Yes," complete Schedule D, Part VI 23 Did the organization report an amount for investments - other securities in Part X, line 10? #* "Yes," complete Schedule D, Part VII 24 Did the organization report an amount for investments - program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? #* "Yes," complete Schedule D, Part VIII 25 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? #* "Yes," complete Schedule D, Part VIII 26 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? #* "Yes," complete Schedule D, Part VIII 27 Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization's is being for uncertain tax positions under FIN 48 [ASC 740] #* "Yes," complete Schedule D, Part X 28 Did the organization obtain separate, independent audited financial statements for the tax year? 29 If "Yes," and if the organization aschool described in section 170(b)(1)(A)(IV)? #* "Yes," complete Schedule D, Parts X and XII 29 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantnaking, fundraising, business, investment, and program service activities outside the United States or aggregate foreign investments valued at \$100,000 or more? #* "Yes," complete Schedule F, Parts II and IV 20 Did the organization report a	9				
Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V as a applicable. Did the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IVII, IVII, IVII, IVII, IVII, IVII, IVII, IVIII, IVII, IVII					
endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 if the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IVI, or X as applicable. a 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 11b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 11b X 1			9	X	
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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 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 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III At Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X III Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X IIII Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII X Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII X Lab Did the organization maintain an office, employees, or agents outside of the United States? 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 or more? If "Yes," complete Schedule F, Parts III and IV Did the organization report no Part IX, column (A)	10				
as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 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 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 X line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X line 16? If "Yes," complete Schedule D, Part X line 16? If "Yes," complete Schedule D, Part X line 16? If "Yes," complete Schedule D, Part X line 16? If "Yes," complete Schedule D, Part X line 17 line			10		X
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 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 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 IVII f Did the organization report an amount for other lassets in Part X, line 25? If "Yes," complete Schedule D, Part 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 12a Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Part X I and XII so potional 12b X b Was the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$1,000 from grantmaking, fundraising, business, 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3,	11				
Part VI 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 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 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 116	_				
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° // "Yes," complete Schedule D, Part VII 11c X d 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° // "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° // "Yes," complete Schedule D, Part IX 11d X f Did the organization report an amount for other liabilities in Part X, line 25° // "Yes," complete Schedule D, Part X 11e X f Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)" // "Yes," complete Schedule D, Part X 11f X 11e X 12a Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)" // "Yes," complete Schedule D, Part X 11f X 12b Did the organization included in consolidated, independent audited financial statements for the tax year? // "Yes," complete Schedule D, Part X 1 and XII 12a X 12b Did the organization included in consolidated, independent audited financial statements for the tax year? // "Yes," complete Schedule D, Part X 1 and XII is optional 12b X 12b Did the organization as school described in section 170(b)(1)(A)(ii)" // "Yes," complete Schedule D, Part X X 1 and XII is optional 12b X 13b Did the organization maintain an office, employees, or agents outside of the United States? 14a X 12b 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 or more? If "Yes," complete Schedule F, Parts II and IV 12b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report	а	• • •	444	v	
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 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 e Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 116	h		Па	- 25	
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 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 110	b	·	14h		x
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 11a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization as chool described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E, 13 Is the organization maintain an office, employees, or agents outside of the United States? 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 or more? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 15 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign	_		110		- 25
d Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 114 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b	C		110		x
Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X 11d X 11d X 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11d 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 11d Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII 12a Did the organization included in consolidated, independent audited financial statements for the tax year? 12a If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 13 X 14a 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 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 17 Did the organization report a total of more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1a and 8a? If "Yes," complete Schedule G, Part II 1b Did the organization report more than \$15,000 total of fundraising	ч		110		
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. f Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 11th X. 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII. b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 144 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 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 foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 16 and 8a? If "Yes," complete Schedule G, Part II 17 X 18 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 19 Did the or	u		114		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	_			x	
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 or more? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 3 and 11e? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Id the organization report more than \$5,000 of grants or other assistance to any domestic organiza			116		
Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 X 14a Did the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 is 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 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part II 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	•		116	x	
Schedule D, Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	19a				
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Is the organization maintain an office, employees, or agents outside of the United States? Is 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 or more? If "Yes," complete Schedule F, Parts I and IV Is Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Is Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV In Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II Is Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines are and 8a? If "Yes," complete Schedule G, Part II Is Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III In Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Is Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Is Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ızu		122	x	
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 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 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 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 12 and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	h	, , , , , , , , , , , , , , , , , , ,	124		
13	b	, ,	12h		x
14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X 14a 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 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 18 X 20a X 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	13				
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 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 foreign organization? If "Yes," complete Schedule F, Parts II and IV. 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 X 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III. 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					
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. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV. 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III. 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			174		
or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			14h		Х
foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 to and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	15	•			
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			15		х
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	16				
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			16		х
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	17				
Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			17		Х
1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	18				_
Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			18		Х
complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b	19	Did the organization report more than \$15,000 of cross income from gaming activities on Part VIII. line 9a? If "Vee "			_
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		,	19		Х
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20a	Did the organization operate one or more hospital facilities? If "Ves " complete Schedule H			
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					_
			21		Х

Form 990 (2018) INC
Part IV Checklist of Required Schedules (continued) 74-2587416 Page 4

			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						
	Schedule J	23	Х	<u> </u>			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the						
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete						
	Schedule K. If "No," go to line 25a	24a		X			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>			
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease						
	any tax-exempt bonds?	24c		<u> </u>			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X			
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			ــ ا			
	Schedule L, Part I	25b		X			
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or						
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"						
	complete Schedule L, Part II	26		X			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial						
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		x			
	of any of these persons? If "Yes," complete Schedule L, Part III						
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV						
	instructions for applicable filing thresholds, conditions, and exceptions):			v			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X			
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_^			
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		v				
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	v			
29	Did the organization receive more than \$25,000 in non-cash 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			v			
•	contributions? If "Yes," complete Schedule M	30		X			
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v			
00	If "Yes," complete Schedule N, Part I	31		X			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v			
00	Schedule N, Part II	32		X			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v			
	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			x			
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X			
	• • • • • • • • • • • • • • • • • • • •	35a		<u> </u>			
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b					
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330					
30		36					
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30					
31							
38	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		X			
50		38	Х				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance	1 00					
	Check if Schedule O contains a response or note to any line in this Part V						
			Yes	No			
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.03	140			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0						
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
•	(gambling) winnings to prize winners?	1c					
			200				

Page 5

Form	990 (2018) INC		74-2587	416	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	811			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 6	o		3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthori	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	4a		X
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 Art	ccount	s (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	ction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	nization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons 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 ser	vices p	rovided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	iired			
	to file Form 8282?			7с		
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 co	ontract	?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 889	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file	e a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	e			
	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				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
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				
С	Enter the amount of reserves on hand	13c				
14a				14a	<u> </u>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14b	<u> </u>	<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incon	ne?	16		X
	If "Yes," complete Form 4720, Schedule O.					

ELECTRIC RELIABILITY COUNCIL OF TEXAS INC 74-2587416 Page 6 Form 990 (2018) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 15 **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 in Schedule O. 14 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Other officers or key employees of the organization Х 15b

Section C. Disclosure

exempt status with respect to such arrangements?

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) available
	for public inspection. Indicate how you made these available. Check all that apply.
	Own website Another's website X Upon request Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial
	statements available to the public during the tax year.
20	State the name, address, and telephone number of the person who possesses the organization's books and records.

taxable entity during the year?

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's

X

16a

16b

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

SEAN TAYLOR, VP AND CFO - 512-225-7000 7620 METRO CENTER DRIVE, AUSTIN, TX 7

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

832006 12-31-18 Form **990** (2018)

78744-1613

INC 74-2587416

Page 7

Form 990 (2018) INC 74-2 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B))			;)			(D)	(E)	(F)
Name and Title	Average	(do not check more in		than one		Reportable	Reportable	Estimated		
	hours per week		x, unless person is both an icer and a director/trustee)					compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	r direc				pa		organization	(W-2/1099-MISC)	from the
	related	stee o	ustee			ensat		(W-2/1099-MISC)		organization
	organizations	al trus	onal tr		oloyee	comp				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) TONYA BAER	4.00	드	드	JO.	ᇂ	E E	요			
BOARD MEMBER	4.00	Х						0.	0.	0.
(2) RICK BLUNTZER	1.00							0.	0.	·
BOARD MEMBER	1.00	х						0.	0.	0.
(3) TERRY BULGER	8.00	25						•	•	
BOARD MEMBER	0.00	х						65,250.	0.	0 .
(4) PETER CRAMTON	5.00							03/2301		-
BOARD MEMBER	3,100	x						87,000.	0.	0.
(5) CRAVEN CROWELL	15.00	1						0.7000		
BOARD MEMBER		Х						99,800.	0.	0.
(6) KEITH EMERY	4.00									
BOARD MEMBER		Х						0.	0.	0.
(7) NICK FEHRENBACH	6.00									
BOARD MEMBER		Х						0.	0.	0.
(8) KEVIN GRESHAM	5.00									
BOARD MEMBER		Х						0.	0.	0 .
(9) SAM HARPER	5.00									
BOARD MEMBER		Х						0.	0.	0 .
(10) CLIFTON KARNEI	4.00									
BOARD MEMBER		Х						0.	0.	0 .
(11) KENNY MERCADO	5.00									
BOARD MEMBER		Х						0.	0.	0.
(12) KARL PFIRRMANN	10.00]							_	_
BOARD MEMBER		Х						92,600.	0.	0.
(13) CAROLYN SHELLMAN	4.00	1							_	_
BOARD MEMBER		Х						0.	0.	0.
(14) DEANN WALKER	20.00	1								
BOARD MEMBER		Х						0.	0.	0.
(15) JUDY WALSH	8.00							100.100		_
BOARD MEMBER		Х				Щ		100,100.	0.	0.
(16) MARK CARPENTER	4.00	 								_
SEGMENT ALTERNATE		Х						0.	0.	0.
(17) SETH COCHRAN	4.00	∤								_
SEGMENT ALTERNATE		Х						0.	0.	0 (

Form 990 (2018) INC									74-2587	416	P	age 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)			•	C)			(D)	(E)		(F)	
Name and title	Average	(do			ition more	l than d	ne	Reportable	Reportable	Es	stimate	∍d
	hours per	box	, unles	ss pei	rson i	s both	an	compensation	compensation	ar	nount	of
	week (list any		Ler an	lu a u	recto	rrius	iee)	from	from related		other	
	hours for	lirecto						the organization	organizations (W-2/1099-MISC)	ı	pensa rom th	
	related	e or c	stee			sated		(W-2/1099-MISC)	(***-2/1099-141130)	l	janizat	
	organizations	ndividual trustee or director	nstitutional trustee		yee	Highest compensated employee		(** 27 1000 141100)			d relat	
	below	idual	ution	la la	key employee	est co oyee	ıeı			orga	anizati	ons
	line)	Indiv	Instit	Officer	Key e	High	Former					
(18) AMANDA FRAZIER	4.00											
SEGMENT ALTERNATE		Х						0.	0.			0.
(19) MOSHIN HASSAN	4.00											
SEGMENT ALTERNATE		Х						0.	0.			0.
(20) GLEN LYONS	4.00											
SEGMENT ALTERNATE		Х						0.	0.			0.
(21) JENNIFER RICHIE	4.00											
SEGMENT ALTERNATE		Х						0.	0.			0.
(22) JACKIE SARGENT	1.00											
SEGMENT ALTERNATE		Х						0.	0.			0.
(23) MARK SCHWIRTZ	4.00											
SEGMENT ALTERNATE		Х						0.	0.			0.
(24) WILLIAM MAGNESS	40.00											
BOARD MEMBER; PRESIDENT & CEO		Х		Х				814,909.	0.	6	8,3	<u>55.</u>
(25) STEVE DANIELS	40.00								_			
VP, APPLICATION SERVICES & IT OPS				Х				259,192.	0.	5	8,6	<u>47.</u>
(26) SALLIE BETTY DAY	40.00									_		
VP, GOVERNANCE, RISK & COMPLIANCE				X				277,170.	0.	7	3,7	64.
1b Sub-total								1,796,021.	0.		0,7	
c Total from continuation sheets to Part V	II, Section A							4,965,221.	0.		445	
d Total (add lines 1b and 1c)							<u> </u>	6,761,242.	0.	12	453	<u>03.</u>
2 Total number of individuals (including but r	not limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable			0
compensation from the organization											_	<u>459</u>
									I		Yes	No
3 Did the organization list any former officer				•	•	•		•				37
line 1a? If "Yes," complete Schedule J for s										3		X
4 For any individual listed on line 1a, is the s	•							•	•		37	
and related organizations greater than \$15	0,000? If "Yes.	" co	alam	ete S	Sche	dule	J fo	or such individual		4	Х	i

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)	
Name and business address	Description of services	Compensation	
ALLEGIS GROUP SERVICES INC.			
14155 COLLECTION CTR DR., CHICAGO, IL 60693	CONTINGENT WORKFORCE	13,948,230.	
POTOMAC ECONOMICS LTD., 9990 FAIRFAX BLVD,	INDEPENDENT MKT		
SUITE 560, FAIRFAX, VA 22030	MONITOR	3,683,330.	
ABB INC.			
PO BOX 88868, CHICAGO, IL 60695-1868	IT CONSULTING	2,232,499.	
PERSISTENT SYSTEMS, INC., 2055 LAURELWOOD			
RD, STE. 210, SANTA CLARA, IL 75054	IT CONSULTING	1,405,482.	
SIRIUS COMPUTER SOLUTIONS, INC.			
PO BOX 202289, DALLAS, TX 75320-2289	IT CONSULTING	1,348,142.	
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than		
\$100,000 of compensation from the organization > 28			

Form 990 INC 74-2587416

Form 990 INC									74-258	/410
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)			(((D)	(E)	(F)
Name and title	Average	Position						Reportable	Reportable	Estimated
	hours	(check all that apply)					ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	or director				em pl		organization	(W-2/1099-MISC)	from the
	hours for	ordi	99			sated		(W-2/1099-MISC)		organization
	related organizations	ustee	trus		ee	n ben				and related organizations
	below	dual t	rtiona	_	nploy	stcor	-			Organizations
	line)	Individual trustee	Institutional trustee	Office	Key employee	Highest compensated employee	Former			
(27) JERRY DREYER	40.00									
SVP, & CIO				х				399,028.	0.	69,366
(28) THERESA GAGE	40.00							, , ,	-	,
VP, EXTERNAL AFFAIRS & CORP COMM				Х				308,040.	0.	50,055
(29) VICKIE LEADY	40.00							,	-	,
ASST. GC AND ASST. CORP. SECRETARY				Х				208,215.	0.	53,037
(30) CHERYL MELE	40.00							,	-	
SVP & COO				Х				440,955.	0.	59,879
(31) KENAN OGLEMAN	40.00									•
VP, COMMERCIAL OPERATIONS				Х				302,965.	0.	47,017
(32) MICHAEL PETTERSON	40.00									-
VP AND CFO				Х				322,141.	0.	73,528
(33) DWAYNE RICKERSON	40.00									
VP, GRID PLANNING & OPERATIONS				Х				301,464.	0.	69,442
(34) CHAD SEELY	40.00									
SVP, GENERAL COUNSEL & GOVERNANCE				Х				379,614.	0.	73,251
(35) DIANE M WILLIAMS	40.00									
VP, HUMAN RESOURCES				Х				311,875.	0.	58,747
(36) BRYAN HANLEY	40.00									
DIRECTOR, IT INFRASTRUCTURE					Х			225,301.	0.	62,452
(37) JOHN MESSER	40.00									
DIRECTOR, IT APPLICATION DEVELOPMENT					Х			195,980.	0.	58,311
(38) MARK RUANE	40.00									-
DIRECTOR, SETTLEMENTS RETAIL AND CRE					Х			239,962.	0.	48,240
(39) DAN WOODFIN	40.00									
SR. DIRECTOR, SYSTEM OPERATIONS					Х			231,774.	0.	52,629
(40) AMANDA BAULD	40.00									
DIRECTOR, PROJECT MANAGEMENT OFFICE					Х			205,580.	0.	29,958
(41) NATHAN BIGBEE	40.00									
ASST. GENERAL COUNSEL, REGULATOR						Х		225,619.	0.	63,677
(42) DAVID FORFIA	40.00									
DIRECTOR IT ARCHITECTURE						X		224,952.	0.	65,421
(43) WARREN LASHER	40.00									
SENIOR DIRECTOR, SYSTEM PLANNING						Х		215,520.	0.	49,405
(44) JOEL MICKEY	40.00									
SR. DIRECTOR WHOLESALE MARKET DESIGN						Х		226,236.	0.	60,122.
	1	İ	i .	i l	1	ı	I	1		
	1									

Form 990 (2018) INC
Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
S, G		Fundraising events						
ar A		Related organizations						
s, G		Government grants (contribution						
ioi	f	All other contributions, gifts, grant	ts, and					
but		similar amounts not included above	/e 1f	18,117.				
d di	g	Noncash contributions included in lines 1	1a-1f: \$					
g g	h	Total. Add lines 1a-1f			18,117.			
				Business Code				
e	2 a	ELECTRIC RELIABILITY PR	ROGRAM SERV	221000	192,478,127.	192,478,127.		
e Vi	b	MUNICIPAL SERVICE PROGR	RAM REVENUE	221000	39,015,492.	39,015,492.		
Se	С	MEMBERSHIP DUES		221000	344,650.	344,650.		
ran Sev	d	·						
Program Service Revenue	е	· .						
٩	f	All other program service rever						
_	g	Total. Add lines 2a-2f			231,838,269.			
	3	Investment income (including	•		12 001 015	12 020 106		F0 000
		other similar amounts)			13,091,015.	13,032,106.		58,909.
	4	Income from investment of tax		´ F				
	5	Royalties						
	•	Our en week	(i) Real	(ii) Personal				
		Gross rents						
	b	1						
	C	Rental income or (loss)						
		Net rental income or (loss) Gross amount from sales of	(i) Securities					
	/ a		(i) Securities	(ii) Other 15,446.				
	h	assets other than inventory Less: cost or other basis		13,110.				
	b	and sales expenses		0.				
	c	Gain or (loss)	1	15,446.				
		Net gain or (loss)			15,446.			15,446.
		Gross income from fundraising			,			,
Jue	•	including \$	`					
- Ne		contributions reported on line						
Other Reven		Part IV, line 18	•					
the	b	Less: direct expenses						
0	С	Net income or (loss) from fund	raising events	_				
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19	a					
	b	Less: direct expenses	b					
	С	Net income or (loss) from gam	ing activities					
	10 a	Gross sales of inventory, less i						
		and allowances	a					
		Less: cost of goods sold						
}	С	Net income or (loss) from sales						
		Miscellaneous Revenue	9	Business Code				
		NON-OPERATING INCOME		900099	1,073.			1,073.
	b							
	С							
		All other revenue			1,073.			
		Total. Add lines 11a-11d Total revenue. See instructions			244,963,920.	244,870,375.	0.	75,428.
I	12	iolai ievenue. See mshuchons			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, _, _, _, _, _, _, _, _, _, _, _	٠.	, , , , , , , , , , , , , , , , , , , ,

Form 990 (2018) INC Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must cor	nplete column (A).	
	Check if Schedule O contains a respor			(0)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
0	Grants and other assistance to domestic				
2					
3	individuals. See Part IV, line 22 Grants and other assistance to foreign				
3	•				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees	6,640,057.	3,473,539.	3,166,518.	
6	Compensation not included above, to disqualified	,	5,1,5,555	0,200,3101	
·	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	73,558,811.	61,627,975.	11,930,836.	
8	Pension plan accruals and contributions (include		, , , , , , , , , , , ,	, = = , = = =	
•	section 401(k) and 403(b) employer contributions)	11,256,219.	9,680,497.	1,575,722.	
9	Other employee benefits		7,571,808.	1,580,429.	
10	Payroll taxes	6,270,523.		948,124.	
11	Fees for services (non-employees):	,	,		
а	Management				
b	Legal	151,558.		151,558.	
С	Accounting	240,000.		117,500.	
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	13,786,044.	12,473,597.	1,312,447.	
12	Advertising and promotion				
13	Office expenses	1,410,751.		506,869.	
14	Information technology	3,031,594.	3,002,917.	28,677.	
15	Royalties				
16	Occupancy	4,911,066.		4,369,857.	
17	Travel	1,232,123.	854,694.	377,429.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials \dots	4 605 - : :	0.000.000		
19	Conferences, conventions, and meetings	1,607,541.	950,373.	657,168.	
20	Interest	1,437,752.		1,437,752.	
21	Payments to affiliates	20 220 505	24 072 500	4 240 007	
22	Depreciation, depletion, and amortization	28,320,587.		4,248,087.	
23	Insurance	2,222,358.	2,222,358.		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	HARDWARE AND SOFTWARE E	25,693,957.	24,716,757.	977,200.	
a b	RELIABILITY ORGANIZATIO	16,327,852.	,,	16,327,852.	
c	DUES AND SUBSCRIPTIONS	1,658,106.	1,356,449.	301,657.	
d	ALL OTHER EXPENSES	225,553.	207,940.	17,613.	
	All other expenses			= , ,	
25		209,134,689.	159,101,394.	50,033,295.	0.
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)				
				· · · · · · · · · · · · · · · · · · ·	Earm 990 (2018)

74-2587416 Page **11** Form 990 (2018) Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1,155,656. 11,830,010. 1 Cash - non-interest-bearing 1055853919. 1337982880. 2 Savings and temporary cash investments Pledges and grants receivable, net 3 9,158,647. 9,007,026. 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 26,364,563. 27,792,710. 9 Prepaid expenses and deferred charges **10a** Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 925,040,348. b Less: accumulated depreciation 10b 781,888,755. 131,249,545. 143,151,593. 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 1223782330. 1529764219. **Total assets.** Add lines 1 through 15 (must equal line 34) 16 16 14,848,954. 17 15,790,794. 17 Accounts payable and accrued expenses 18 18 Grants payable 5,665,565. 4,638,873. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 534,562,318. 904,226,998. 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 58,802,951. 54,813,936. Secured mortgages and notes payable to unrelated third parties 23 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 of 556,396,445. 25 458,949,536. Schedule D 1169249541. 1439446829. **Total liabilities.** Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 90,317,390. 54,532,789. 27 27 Unrestricted net assets Temporarily restricted net assets 28 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here

Form **990** (2018)

90,317,390.

1529764219.

30

31

32

33

54,532,789.

1223782330.

30

32

33

and complete lines 30 through 34.

Total liabilities and net assets/fund balances

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

ELECTRIC RELIABILITY COUNCIL OF TEXAS

INC 74-2587416 Page 12 Form 990 (2018) Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 244,963,920. Total revenue (must equal Part VIII, column (A), line 12) 1 209,134,689. Total expenses (must equal Part IX, column (A), line 25) 2 2 35,829,231. Revenue less expenses. Subtract line 2 from line 1 3 3 54,532,789. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 4 5 5 Net unrealized gains (losses) on investments 6 6 Donated services and use of facilities 7 7 Investment expenses 8 8 Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) -44,630. 9 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, 10 90,317,390. 10 column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes Nο X Accrual Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Х 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Both consolidated and separate basis Separate basis Consolidated basis

Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

consolidated basis, or both: X Separate basis

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

review, or compilation of its financial statements and selection of an independent accountant?

Act and OMB Circular A-133?

Form **990** (2018)

Х

Х

Х

2b

2c

За

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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

ELECTRIC RELIABILITY COUNCIL OF TEXAS INC

Employer identification number 74-2587416

Pa	rt I	Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the
		organization answered "Yes" on Form 990, Part IV, line	e 6.	
			(a) Donor advised funds	(b) Funds and other accounts
1	Total	number at end of year		
2		egate value of contributions to (during year)		
3	Aggre	egate value of grants from (during year)		
4	Aggre	egate value at end of year		
5	Did th	ne organization inform all donors and donor advisors in v	writing that the assets held in donor advis	ed funds
		ne organization's property, subject to the organization's		
6	Did th	ne organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for ch	naritable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose	conferring
Pa	rt II	Conservation Easements. Complete if the org		Part IV, line 7.
1	Purpo	ose(s) of conservation easements held by the organization	·	
	Щ	Preservation of land for public use (e.g., recreation or e		orically important land area
	\vdash	Protection of natural habitat	Preservation of a cert	tified historic structure
		Preservation of open space		
2		plete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	•	f the tax year.		Held at the End of the Tax Year
a				
b		•		
С.		per of conservation easements on a certified historic stru		
d		per of conservation easements included in (c) acquired a		I I
2		in the National Register		
3		per of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
4	year J	per of states where property subject to conservation eas	rement is located	
5		the organization have a written policy regarding the per	·	
Ū		ions, and enforcement of the conservation easements it		Yes No
6		and volunteer hours devoted to monitoring, inspecting,		
_	•	3, 1	, , ,	3
7	Amou	unt of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
	▶\$	3, 1	,	ζ ,
8	Does	each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)
		ection 170(h)(4)(B)(ii)?		
9		rt XIII, describe how the organization reports conservation		
	includ	de, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
		ervation easements.		
Pa	rt III	Organizations Maintaining Collections of		her Similar Assets.
		Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the	organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statem	nent and balance sheet works of art,
	histor	rical treasures, or other similar assets held for public exh	nibition, education, or research in furtheral	nce of public service, provide, in Part XIII,
	the te	ext of the footnote to its financial statements that describ	bes these items.	
b		organization elected, as permitted under SFAS 116 (AS		
	treası	ures, or other similar assets held for public exhibition, ec	ducation, or research in furtherance of pub	olic service, provide the following amounts
		ng to these items:		
	(i) R	evenue included on Form 990, Part VIII, line 1		
2		organization received or held works of art, historical trea		l gain, provide
		ollowing amounts required to be reported under SFAS 1		
а		nue included on Form 990, Part VIII, line 1		
b	Asset	s included in Form 990, Part X		🕨 \$

	t III Organizations Maintaining C	ollections of Art	t. Historical Tre	easures, or C	ther S	milar As		timum =/\
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	Tollowing that ar	e a sigi ili	icani use o	i its collectio	THETHS
_	(check all that apply):			-1	_			
a	Public exhibition	d		change program				
b	Scholarly research	е	Other					
C	Preservation for future generations						D t VIII	
4	Provide a description of the organization's co						Part XIII.	
5	During the year, did the organization solicit or							
Dai	to be sold to raise funds rather than to be ma							No
rai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par		ete if the organization	on answered "Ye	es" on Fo	m 990, Pa	rt IV, line 9, c	r
			ion , for contribution	a ar athar assat	o not incl	ıdad		
ıa	Is the organization an agent, trustee, custodia						Yes	X No
	on Form 990, Part X?						. L res	_2 <u>1</u> NO
D	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:				Λ	
_	Designing belows					4.	Amou	nı
	Beginning balance					1c		
	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					1f	X Yes	
	Did the organization include an amount on Fo				•		🔼 Yes	☐ No
	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete in							<u> </u>
ı aı	t V Endowment Funds. Complete i				I	Th	haali (-) Fa	
4.	Danisa is a seferman hadana	(a) Current year	(b) Prior year	(c) Two years b	раск (а)	Three years	Dack (e) F0	ur years back
	Beginning of year balance			+				
b	Contributions							
С	Net investment earnings, gains, and losses			+				
	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 curr	ent year end balance	e (line 1g, column (a	a)) held as:				
а			_%					
b	Permanent endowment	%						
С	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.						
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held a	nd administered	for the o	rganization	l	
	by:							Yes No
	(i) unrelated organizations						3a(i	-
								4
b	If "Yes" on line 3a(ii), are the related organization						3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Pai	t VI Land, Buildings, and Equipm							
	Complete if the organization answered							
	Description of property	(a) Cost or of basis (investre	, ,	t or other (other)	(c) Accu		(d) Bo	ok value
1a	Land			17,096.				17,096.
	Buildings					6,584		06,907.
	Leasehold improvements			71,457.		8,656		2,801.
	Equipment			32,251.10				53,312.
	Other		706,66	6,053.63	34,83	4,576		31,477.
	. Add lines 1a through 1e. (Column (d) must e		X. column (B). line 1	10c.)			143,15	51,593.

Schedule D (Form 990) 2018

74-2587416 Page 3

Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11b. See Form 990, P	art X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	luation: 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, col. (B) line 12.)			
Part VIII Investments - Program Related.	<u>.</u>	•	
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11c. See Form 990. P.	art X line 13
(a) Description of investment	(b) Book value		luation: Cost or end-of-year market value
(1)			•
(2)			
(3)			
(5)			
<u>(6)</u>			
<u>(7)</u>			
(8)	+		
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
Complete if the organization answered "Yes"		, line 11d. See Form 990, P	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	e 15.)		>
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11e or 11f. See Form	990, Part X, line 25.
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) CRRAH/QSE SECURITY DEPOSIT	TS	458,524,020.	
(3) ACCR. POST RET. BENEFIT OF	BLIGATION	411,974.	
(4) DEFERRED RENT COSTS		13,542.	
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	0.25)	458,949,536.	
2 Liability for uncertain tay positions. In Part XIII. provide	,		annial atatamenta that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2018			2587416	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per Re	turn.	•	
	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	244,963	,920.
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	244,963	,920.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b	-	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			244,963	,920.
Par	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per l	Retu	m.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements		1	209,179	,319.
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				
С	Other losses				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	209,179	,319.
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			
	Other (Describe in Part XIII.)				
	Add lines 4a and 4b		4c	-44	,630.
5			5	209,134	,689.
	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	IV, lines 1b and 2b; Part V, line	1; Part	X, line 2; Part X	CI,
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi				
PAF	RT IV, LINE 2B:				
ERC	COT IS THE CENTRAL COUNTERPARTY FOR ALL TRA	NSACTIONS SETTLE	D B	Y ERCOT	
PUF	RSUANT TO ERCOT PROTOCOLS AND IS DEEMED TO	BE THE SOLE BUYE	ER T	O EACH	
SEI	LER, AND THE SOLE SELLER TO EACH BUYER, OF	' ALL ENERGY, ANG	CILL	ARY	
		,			
SEF	RVICES, RELIABILITY UNIT COMMITMENTS (RUCS)	, EMERGENCY RESE	ONS	E SERVI	CE
	· · · ·				

(ERS), AND OTHER PRODUCTS OR SERVICES FOR WHICH ERCOT MAY PAY OR CHARGE A MARKET PARTICIPANT EXCEPT FOR THOSE PRODUCTS OR SERVICES THAT ARE SELF-ARRANGED BY MARKET PARTICIPANTS. ERCOT PERFORMS SETTLEMENTS FOR ALL TRANSACTIONS SUBJECT TO THE FINANCIAL SETTLEMENT PROCESS IN ACCORDANCE WITH ERCOT PROTOCOLS. THE SETTLEMENT PROCESS IS USED TO RESOLVE FINANCIAL OBLIGATIONS FOR MARKET SERVICES PROCURED THROUGH ERCOT FOR REGISTERED MARKET PARTICIPANTS. ADDITIONALLY, AS REQUIRED BY ERCOT PROTOCOLS, ERCOT

INC

Part XIII Supplemental Information (continued)
EXECUTES AUCTIONS FOR CONGESTION REVENUE RIGHTS MONTHLY AND ANNUALLY AND
DISTRIBUTES PROCEEDS FROM THESE AUCTIONS TO MARKET PARTICIPANTS AS
REQUIRED BY ERCOT PROTOCOLS.
PART X, LINE 2:
ERCOT IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(A) OF THE
INTERNAL REVENUE CODE AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(4).
THE COMPANY IS ALSO EXEMPT FROM STATE INCOME TAXES. ACCORDINGLY, NO
PROVISION FOR INCOME TAXES OR UNCERTAIN TAX POSITIONS HAS BEEN REFLECTED
IN THE FINANCIAL STATEMENTS.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
CHANGE IN DEFERRED PENSION COSTS -44,630.

SCHEDULE J (Form 990)

Department of the Treasury

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.

Open to Public

OMB No. 1545-0047

Inspection

Internal Revenue Service Name of the organization

ELECTRIC RELIABILITY COUNCIL OF TEXAS INC

Employer identification number 74 - 2587416

Pa	art I Questions Regarding Compensation				
	·			Yes	No
1a	Check the appropriate box(es) if the organization provided	any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any	/ relevant information regarding these items.			
	First-class or charter travel	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 organiza	ation follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses describe	d above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbur	rsing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Directo	or, regarding the items checked on line 1a?	. 2	Х	
3	Indicate which, if any, of the following the filing organization	n used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check	k any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but	t explain in Part III.			
	X Compensation committee	X Written employment contract			
	X Independent compensation consultant	X Compensation survey or study			
	X 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 VI	II, Section A, line 1a, with respect to the filing			
	organization or a related organization:				
а	Receive a severance payment or change-of-control paymer	nt?	. 4a		X
b	Participate in, or receive payment from, a supplemental no	nqualified retirement plan?	. 4b		X
С	Participate in, or receive payment from, an equity-based co	ompensation arrangement?	. 4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide th	e applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organiza				
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:				37
					X
b			5b		
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a	i, did the organization pay or accrue any compensation			
	contingent on the net earnings of:				37
			6a		X
b			6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a				77
		l	. 7		X
8	Were any amounts reported on Form 990, Part VII, paid or				77
	initial contract exception described in Regulations section		8		X
9	If "Yes" on line 8, did the organization also follow the rebut	table presumption procedure described in			
	Regulations section 53.4958-6(c)?		9	1	l

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

Schedule J (Form 990) 2018

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	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) WILLIAM MAGNESS	(i)	814,909.	0.	0.	36,500.	31,855.	883,264.	0.
BOARD MEMBER; PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) STEVE DANIELS	(i)	259,192.	0.	0.	26,380.	32,267.	317,839.	0.
VP, APPLICATION SERVICES & IT OPS	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SALLIE BETTY DAY	(i)	277,170.	0.	0.	39,875.	33,889.	350,934.	0.
VP, GOVERNANCE, RISK & COMPLIANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JERRY DREYER	(i)	399,028.	0.	0.	39,875.	29,491.	468,394.	0.
SVP, & CIO	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) THERESA GAGE	(i)	308,040.	0.	0.	39,875.	10,180.	358,095.	0.
VP, EXTERNAL AFFAIRS & CORP COMM	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) VICKIE LEADY	(i)	208,088.	127.	0.	30,876.	22,161.	261,252.	0.
ASST. GC AND ASST. CORP. SECRETARY	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) CHERYL MELE	(i)	440,945.	10.	0.	36,500.	23,379.	500,834.	0.
SVP & COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) KENAN OGLEMAN	(i)	302,965.	0.	0.	36,718.	10,299.	349,982.	0.
VP, COMMERCIAL OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) MICHAEL PETTERSON	(i)	322,141.	0.	0.	39,558.	33,970.	395,669.	0.
VP AND CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) DWAYNE RICKERSON	(i)	301,464.	0.	0.	40,038.	29,404.	370,906.	0.
VP, GRID PLANNING & OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) CHAD SEELY	(i)	379,614.	0.	0.	39,875.	33,376.	452,865.	0.
SVP, GENERAL COUNSEL & GOVERNANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) DIANE M WILLIAMS	(i)	311,875.	0.	0.	36,500.	22,247.	370,622.	0.
VP, HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) BRYAN HANLEY	(i)	225,301.	0.	0.	32,859.	29,593.	287,753.	0.
DIRECTOR, IT INFRASTRUCTURE	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) JOHN MESSER	(i)	194,593.	1,387.	0.	28,734.	29,577.	254,291.	0.
DIRECTOR, IT APPLICATION DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) MARK RUANE	(i)	238,633.	1,329.	0.	35,130.	13,110.	288,202.	0.
DIRECTOR, SETTLEMENTS RETAIL AND CRE	(ii)	0.	0.	0.	0.	0.	0.	0.
(16) DAN WOODFIN	(i)	227,644.	4,130.	0.	33,690.	18,939.	284,403.	0.
SR. DIRECTOR, SYSTEM OPERATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990	
(17) AMANDA BAULD	(i)	201,727.	3,853.	0.	29,742.	216.	235,538.	0.	
DIRECTOR, PROJECT MANAGEMENT OFFICE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(18) NATHAN BIGBEE	(i)	225,619.	0.	0.	31,958.	31,719.	289,296.	0.	
ASST. GENERAL COUNSEL, REGULATOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(19) DAVID FORFIA	(i)	224,952.	0.	0.	33,154.	32,267.	290,373.	0.	
DIRECTOR IT ARCHITECTURE	(ii)	0.	0.	0.	0.	0.	0.	0.	
(20) WARREN LASHER	(i)	215,520.	0.	0.	31,363.	18,042.	264,925.	0.	
SENIOR DIRECTOR, SYSTEM PLANNING	(ii)	0.	0.	0.	0.	0.	0.	0.	
(21) JOEL MICKEY	(i)	226,236.	0.	0.	27,854.	32,268.	286,358.	0.	
SR. DIRECTOR WHOLESALE MARKET DESIGN	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

ELECTRIC RELIABILITY COUNCIL OF TEXAS

SCHEDULE L

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

ET.ECTRIC RELIABILITY COUNCIL OF TEXAS

OMB No. 1545-0047

2018

Open To Public Inspection

Name of the organization E		RELIABIL	ITY	COT	JNCI	L OF T	EXAS				ident		on nu	mber
	NC										874	16		
Part I Excess Bene														
Complete if the c						ne 25a or 25b	o, or Fo	rm 990-EZ, P	art V, I	ine 40	b.	1		
(a) Name of disqualified p	person (b)	(b) Relationship between disqualified person and organization				(6	c) Desc	ription of trar	nsactio	n			(d) Corrected?	
		person and or	yarııza	alion		•		•				Y	es	No
												+	-+	
												-		
												-	-+	
2 Enter the amount of tax i	ncurred by the c	organization man	aners	or disc	u ialified	d nersons dur	ring the	vearunder						
	•		•		•	•	•	•		> \$				
3 Enter the amount of tax,										S				
,	··· -··· / , -·· ···· –,		,		,					•				
Part II Loans to and	d/or From Int	erested Pers	sons.	ı										
Complete if the c	organization ans	wered "Yes" on F	orm 9	990-EZ	, Part V	/, line 38a or F	Form 9	90, Part IV, lin	ie 26;	or if th	e orga	nizatio	n	
reported an amo														
(a) Name of	(b) Relationship			an to or) Original	(f) E	alance due) In	(h) Ap	proved ard or		Vritten
interested person	with organization	of loan		ization?	princ	ipal amount			defa	ault?	comm		agree	ement?
			То	From					Yes	No	Yes	No	Yes	No
			_											
														-
						.								
Total Part III Grants or As	sistance Bei	nefiting Inter	estec	d Per	sons	> \$								
Complete if the c		•												
(a) Name of interested p		(b) Relationship				Amount of		(d) Type	of	Т	10) Purp	000 0	f
(a) Name of interested p	Derson	interested pers				assistance		assistan			•	assista		1
		the organiza	ation											
										\neg				
					I		1 -			1				

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

Schedule L (Form 990 or 990-EZ) 2018

		ELECINIC	KRHTADIHII
Schedule L	. (Form 990 or 990-EZ) 2018	INC	
Part IV	Business Transaction	ons Involving	Interested Persons

(a) Name of interested person				ween interested organization	(c) Amount of transaction	(d) Description of transaction			(e) Sha organiz reven	zation's
				· ·					Yes	No
BRAZOS ELECTRIC POWER COOP				BELOW	485359360.					Х
		PART		BELOW	350635034.					X
GOLDEN SPREAD ELECTRIC COO	SEE	PART	V	BELOW	80,293,051.	SEE	PART	V		Х
Part V Supplemental Information.						1				
Provide additional information for response	nses to	question	s on	Schedule L (see	instructions).					
SCH L, PART IV, BUSINESS T	RANS	ACTIO	NS	INVOLVI	NG INTERESTE	ED P	ERSON	S:		
(A) NAME OF PERSON: BRAZOS	ELE	CTRIC	P	OWER COOF	PERATIVE					
(D) DESCRIPTION OF TRANSACT	rion	: SEE	E P	ART V BEI	COM		_			
(A) NAME OF PERSON: TENASKA	Δ PO	WER 9	rr R	VICES						
(D) DESCRIPTION OF TRANSACT	rion	: SEE	E P	ART V BEI	COM					
(A) NAME OF PERSON: GOLDEN	SPR	EAD E	ELE	CTRIC COC	PERATIVE					
(D) DESCRIPTION OF TRANSACT	rion	: SEE	ЕР	ART V BEI	COM					
SCHEDULE L, PART IV - (1)(1	3):									
CLIFTON KARNEI WAS A 2018	BOAR	D MEM	1BE	R OF ERCO	OT (COOPERAT	IVE	MARK	ET		
SEGMENT DIRECTOR) AND ALSO	EXE	CUTIV	Æ	VICE PRES	SIDENT AND O	ENE	RAL M	ANA	GER	
OF BRAZOS ELECTRIC POWER CO						-			-	
OF BRAZOS EDECIRIC FOWER CO	JOPE	MAIIV	<u>, e</u>	INC.						
COUEDINE I DADM TV /1\/1										
SCHEDULE L, PART IV - (1)(1										
PAYMENT OF GOVERNMENTALLY-	APPR	OVED_	TA	RIFF, ANG	CILLARY SERV	/ICE	FEES	, A	ND	
MEMBERSHIP DUES.										
SCHEDULE L. PART IV - (2)(1	3).									

Schedule L (Form 990 or 990-EZ) INC 74-2587416 Page 2
Part V Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions).
KEITH EMERY WAS A 2018 BOARD MEMBER OF ERCOT (INDEPENDENT POWER
MARKETER MARKET SEGMENT DIRECTOR) AND ALSO VICE PRESIDENT OF TENASKA
POWER SERVICES CORP.
SCHEDULE L, PART IV - (2)(D):
PAYMENT OF GOVERNMENTALLY-APPROVED TARIFF, ANCILLARY SERVICE FEES, AND
MEMBERSHIP DUES.
SCHEDULE L, PART IV - (3)(B):
MARK SCHWIRTZ WAS A 2018 BOARD MEMBER OF ERCOT (COOPERATIVE MARKET
SEGMENT ALTERNATE) AND ALSO PRESIDENT AND CEO OF GOLDEN SPREAD ELECTRIC
COOPERATIVE.
SCHEDULE L, PART IV - (3)(D):
PAYMENT OF GOVERNMENTALLY-APPROVED TARIFF, ANCILLARY SERVICE FEES, AND
MEMBERSHIP DUES.

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Employer identification number

74-2587416

Name of the organization

ELECTRIC RELIABILITY COUNCIL OF TEXAS

FORM 990, PART I, LINE 1:

ELECTRIC RELIABILITY COUNCIL OF TEXAS, INC. (ERCOT) LESSENS THE BURDENS OF GOVERNMENT, SERVES THE PUBLIC INTEREST BY, AND FULFILLS ITS STATUTORY OBLIGATION BY: (I) ENSURING OPEN ACCESS TO TRANSMISSION AND DISTRIBUTION SYSTEMS; (II) MAINTAINING SYSTEM RELIABILITY AND OPERATIONS; (III) ENABLING RETAIL CHOICE; OPERATING FAIR AND COMPETITIVE WHOLESALE MARKETS; (IV) MAINTAINING THE RENEWABLE ENERGY CREDITS REGISTRY; AND (V) PROVIDING LEADERSHIP AND INDEPENDENT EXPERTISE TO IMPROVE SYSTEM RELIABILITY AND MARKET EFFICIENCY. ERCOT MANAGES THE FLOW OF ELECTRIC POWER TO MORE THAN 25 MILLION TEXAS CUSTOMERS REPRESENTING ABOUT 90 PERCENT OF THE STATE'S ELECTRIC LOAD. AS THE INDEPENDENT SYSTEM OPERATOR FOR THE REGION, ERCOT SCHEDULES POWER ON AN ELECTRIC GRID THAT CONNECTS MORE THAN 46,500 MILES OF TRANSMISSION LINES AND 650+ GENERATION UNITS. ERCOT ALSO PERFORMS FINANCIAL SETTLEMENT FOR THE COMPETITIVE WHOLESALE BULK-POWER MARKET AND ADMINISTERS RETAIL SWITCHING FOR 8 MILLION PREMISES IN COMPETITIVE

FORM 990, PART VI, SECTION A, LINE 1:

PURSUANT TO SECTION 39.151 OF THE TEXAS PUBLIC UTILITY REGULATORY ACT, THE ERCOT BOARD OF DIRECTORS IS COMPOSED OF SIXTEEN MEMBERS. FIFTEEN OF THE MEMBERS HAVE VOTING RIGHTS; THE CHAIR OF THE PUBLIC UTILITY COMMISSION OF TEXAS IS AN EX-OFFICIO NON-VOTING MEMBER. EIGHT OF THE VOTING DIRECTORS REPRESENT SEVEN SEGMENTS OF INDUSTRY IN THE ERCOT ELECTRICITY MARKET (AS THE CONSUMER SEGMENT IS FURTHER DIVIDED INTO SUBSEGMENTS); EACH SUCH MARKET

CHOICE AREAS.

Employer identification number 74-2587416

ATTEND MEETINGS IN THE ABSENCE OF THE MARKET SEGMENT DIRECTOR AND VOTE ON
THE ABSENT MARKET SEGMENT DIRECTOR'S BEHALF IN THE EVENT THAT SUCH MARKET
SEGMENT DIRECTOR CANNOT ATTEND A BOARD MEETING. TWO OTHER VOTING DIRECTORS,
ARE ALSO EX-OFFICIO DIRECTORS - ONE REPRESENTS A SUBSEGMENT OF THE CONSUMER
SEGMENT AS PUBLIC COUNSEL AND THE OTHER IS THE CHIEF EXECUTIVE OFFICER OF
ERCOT -- AND NEITHER HAVE ANY RESPECTIVE SEGMENT ALNTERNATES. FIVE OF THE
OTHER VOTING DIRECTORS ARE UNAFFILIATED WITH RESPECT TO ANY MARKET SEGMENT
AND DO NOT HAVE ANY SEGMENT ALTERNATES.

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

AS OF DECEMBER 31, 2018, ERCOT'S MEMBERSHIP INCLUDED 303 VOTING AND NON-VOTING MEMBERS. ERCOT MEMBERS MAY BE CORPORATE MEMBERS, ASSOCIATE

MEMBERS, OR ADJUNCT MEMBERS. CORPORATE MEMBERS HAVE THE RIGHT TO VOTE ON ALL MATTERS SUBMITTED TO THE GENERAL MEMBERSHIP [SUCH AS THE ELECTION OF DIRECTORS, ELECTION OF TECHNICAL ADVISORY COMMITTEE (TAC) REPRESENTATIVES, AND AMENDMENTS TO THE CERTIFICATE OF FORMATION AND BYLAWS]. CORPORATE

MEMBERS QUALIFY IN ONE OF SEVEN SEGMENTS: COOPERATIVE; INDEPENDENT

GENERATOR; INDEPENDENT POWER MARKETER; INDEPENDENT RETAIL ELECTRIC

PROVIDER; INVESTOR OWNED UTILITY; MUNICIPAL (I.E. A MUNICIPAL-OWNED UTILITY OR A RIVER AUTHORITY); OR CONSUMER (WHICH HAS SUBSEGMENTS INCLUDING COMMERCIAL, INDUSTRIAL AND RESIDENTIAL). ASSOCIATE AND ADJUNCT MEMBERS DO NOT HAVE THE RIGHT TO BE ELECTED OR APPOINTED TO THE ERCOT BOARD, TAC, OR ANY SUBCOMMITTEE OF THE BOARD OR TAC.

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

THIRTEEN OF THE FIFTEEN VOTING MEMBERS OF THE ERCOT BOARD OF DIRECTORS ARE

Employer identification number 74-2587416

ELECTED, OR APPOINTED IN LIMITED CIRCUMSTANCES, BY THE CORPORATE MEMBERS OR A PORTION OF SUCH CORPORATE MEMBERS. WITH RESPECT TO EACH OF THE SIX MARKET SEGMENT DIRECTORS WHO DO NOT REPRESENT THE CONSUMER SUBSEGMENTS, ONLY THE CORPORATE MEMBERS OF THE MEMBERSHIP SEGMENT REPRESENTED BY THE MARKET SEGMENT DIRECTOR ARE ALLOWED TO ELECT THE DIRECTOR AND THE SEGMENT ALTERNATE FOR THAT SEAT. THERE ARE THREE CONSUMER DIRECTORS, OF WHICH: (I) ONE IS THE PUBLIC COUNSEL, AN EX OFFICIO VOTING MEMBER OF THE BOARD WHO IS DESIGNATED TO REPRESENT RESIDENTIAL CONSUMERS AND SMALL COMMERCIAL CONSUMERS; (II) ONE IS ELECTED OR APPOINTED BY THE LARGE COMMERCIAL CONSUMER CORPORATE MEMBERS; AND (III) ONE IS ELECTED BY THE CORPORATE MEMBERS OF THE INDUSTRIAL CONSUMER SUBSEGMENT. THE MEMBERSHIP VOTES BY SEGMENT TO ELECT THE FIVE UNAFFILIATED VOTING DIRECTORS. THE REMAINING VOTING DIRECTOR IS THE CHIEF EXECUTIVE OFFICER OF ERCOT, WHO IS AN EX OFFICIO VOTING MEMBER OF THE BOARD.

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

AS A MATTER OF STATE LAW OR ITS GOVERNING DOCUMENTS, CERTAIN MATERIAL

MATTERS MUST BE SUBMITTED TO THE VOTING MEMBERS OF ERCOT FOR THEIR

APPROVAL, INCLUDING AMENDMENTS TO THE CERTIFICATE OF FORMATION AND THE

BYLAWS. DECISIONS OF THE ERCOT BOARD ARE GENERALLY APPEALABLE TO THE

PUBLIC UTILITY COMMISSION OF TEXAS, AN AGENCY OF THE STATE OF TEXAS.

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

THE 2018 FORM 990 WAS PREPARED INITIALLY BY THE FINANCE DEPARTMENT OF

ERCOT. IT WAS REVIEWED BY ERCOT OFFICERS AS WELL AS INTERNAL LEGAL COUNSEL,

AND SUBMITTED FOR REVIEW BY ERCOT'S INDEPENDENT AUDITORS. THE FORM 990 WAS

PROVIDED TO THE BOARD OF DIRECTORS IN ADVANCE OF, AND FOR ITS CONSIDERATION

AND INPUT AT ITS MEETING ON JUNE 11, 2019. THE FINAL VERSION OF THE 2018

Name of the organization ELECTRIC RELIABILITY COUNCIL OF TEXAS INC

Employer identification number 74-2587416

FORM 990, INCORPORATING THE COMMENTS OF ALL FOREGOING, WAS THEN FILED WITH THE INTERNAL REVENUE SERVICE.

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

EACH DIRECTOR AND SEGMENT ALTERNATE ANNUALLY MUST EXECUTE AN ETHICS AGREEMENT FOR DIRECTORS AND SEGMENT ALTERNATES, AND EACH EMPLOYEE ANNUALLY MUST ATTEND INTERNAL TRAINING SESSIONS AND EXECUTE AN EMPLOYEE ETHICS PURSUANT TO EACH ETHICS AGREEMENT, A SIGNATORY HAS AN AFFIRMATIVE DUTY TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST OF THE SIGNATORY (AND HIS OR HER EMPLOYER, IN THE CASE OF DIRECTORS OR SEGMENT ALTERNATES), AND ALSO MUST DISCLOSE ALL PERSONAL RELATIONSHIPS WITH ERCOT VENDORS, INCLUDING BUSINESS OR DIRECT OR INDIRECT OWNERSHIP INTERESTS. ANY CONFLICT OF INTEREST ISSUE INVOLVING A DIRECTOR OR SEGMENT ALTERNATE IS REFERRED TO THE ERCOT GENERAL COUNSEL WHO, IN CONSULTATION WITH THE BOARD CHAIR AND OUTSIDE LEGAL COUNSEL, IF AND WHEN NECESSARY, MAKES A LEGAL DETERMINATION AS TO WHETHER A CONFLICT EXISTS AND, IF SO, A RECOMMENDATION AS TO HOW IT MAY BE RESOLVED. ANY CONFLICT AND ITS RESOLUTION ARE REPORTED TO THE FULL BOARD OF DIRECTORS AND TO THE HUMAN RESOURCE & GOVERNANCE (HR&G) COMMITTEE OF THE BOARD, AS NEEDED. OBJECTION TO THE RECOMMENDATION IS RESOLVED BY THE HR&G COMMITTEE OR THE FULL BOARD. ANY ERCOT EMPLOYEE CONFLICTS ARE EVALUATED BY THE ERCOT LEGAL STAFF, AND THE LEGAL STAFF MAKES A RECOMMENDATION TO RESOLVE THE CONFLICT IF THE ERCOT LEGAL STAFF RECOMMENDS A RESOLUTION THAT IS OF INTEREST. OBJECTIONABLE TO THE MANAGER/DIRECTOR/OFFICER OF THE CONFLICTED EMPLOYEE, THE LEGAL DECISION IS REFERRED TO THE CHIEF EXECUTIVE OFFICER AND ULTIMATELY TO THE BOARD'S HR&G COMMITTEE.

ELECTRIC RELIABILITY COUNCIL OF TEXAS Name of the organization **Employer identification number** 74-2587416 INC IN DETERMINING COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER, ERCOT FOLLOWS A PROCEDURE WHICH ENSURES THAT (I) COMPENSATION IS APPROVED IN ADVANCE BY THE HR&G COMMITTEE OF THE BOARD OF DIRECTORS AND THE BOARD ITSELF, (II) THE BOARD AND THE HR&G COMMITTEE OBTAINS AND RELIES UPON APPROPRIATE DATA FOR COMPARABILITY, (III) THE BOARD AND THE HR&G COMMITTEE EACH ADEQUATELY DOCUMENTS THE BASIS FOR ITS RESPECTIVE DETERMINATION, AND (IV) THE PUBLIC UTILITY COMMISSION OF TEXAS REVIEWS ANY COMPENSATION TO BE PAID TO THE CHIEF EXECUTIVE OFFICER. IN PRACTICE, THE HR&G COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS PROPOSED CHANGES TO CHIEF EXECUTIVE OFFICER COMPENSATION AND SUBMITS RECOMMENDATIONS TO THE BOARD FOR ITS APPROVAL BY ALL UNINTERESTED MEMBERS OF THE BOARD OF THE DIRECTORS (THAT IS, ALL BOARD MEMBERS EXCEPT THE CHIEF EXECUTIVE OFFICER WHO IS REQUIRED TO ABSTAIN FROM SUCH VOTE). IN ITS REVIEW, THE HR&G COMMITTEE CAN REQUEST INFORMATION FROM INDEPENDENT COMPENSATION CONSULTANTS, AND THEY RECEIVE INFORMATION ANNUALLY IN REGARDS TO THE COMPENSATION LEVELS OF SIMILAR ORGANIZATIONS FROM FORMS 990 AND OTHER SOURCES. ADDITIONALLY, COMPENSATION SURVEYS/STUDIES ARE PERFORMED, AS NEEDED, TO PROVIDE INSIGHT INTO THE ELEMENTS OF COMPENSATION. THE COMPENSATION-RELATED INFORMATION AND HR&G COMMITTEE RECOMMENDATIONS ARE SUBMITTED TO THE BOARD OF DIRECTORS FOR ITS CONSIDERATION AND APPROVAL. REVIEW OF THE CHIEF EXECUTIVE OFFICER'S COMPENSATION IS PERFORMED ANNUALLY EXCEPT IN THOSE LIMITED INSTANCES IN WHICH THE COMPENSATION HAS BEEN DETERMINED PURSUANT TO THE PROVISIONS OF AN EMPLOYMENT AGREEMENT FOR A TERM EXCEEDING A YEAR BETWEEN ERCOT AND THE CHIEF EXECUTIVE OFFICER, WHICH HAS BEEN APPROVED BY THE BOARD OF DIRECTORS, AND ALL DECISIONS REGARDING THE CHIEF EXECUTIVE OFFICER'S COMPENSATION ARE DOCUMENTED AND MAINTAINED. FURTHERMORE, THE PUBLIC UTILITY COMMISSION OF TEXAS SUBSTANTIVE RULES RELATED TO ERCOT GOVERNANCE REQUIRE THAT ALL COMPENSATION TO BE PAID TO THE

CHIEF EXECUTIVE OFFICER IS SUBJECT TO REVIEW AND APPROVAL BY THE PUBLIC

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization ELECTRIC RELIABILITY COUNCIL OF TEXAS **Employer identification number** 74-2587416 INC UTILITY COMMISSION OF TEXAS. 15(B) IN DETERMINING COMPENSATION FOR OFFICERS WHO ARE THE DIRECT REPORTS OF THE CHIEF EXECUTIVE OFFICER, ERCOT FOLLOWS A PROCEDURE WHICH ENSURES THAT (I) COMPENSATION IS FULLY DISCLOSED IN ADVANCE TO THE HR&G COMMITTEE OF THE BOARD OF DIRECTORS, (II) THE HR&G COMMITTEE OBTAINS AND RELIES UPON APPROPRIATE DATA FOR COMPARABILITY, AND (III) THE HR&G COMMITTEE ADEQUATELY DOCUMENTS THE BASIS FOR ITS DETERMINATION. FOR HIS DIRECT REPORTS, THE CHIEF EXECUTIVE OFFICER INFORMS THE HR&G COMMITTEE OF PROPOSED OFFICER PAY AMOUNTS. FOR OFFICERS WHO ARE NOT THE DIRECT REPORTS OF THE CEO OR KEY EMPLOYEES, COMPENSATION IS REVIEWED AND DETERMINED BY THEIR APPROPRIATE OFFICER. FOR REVIEW OF ALL OFFICER AND KEY EMPLOYEE COMPENSATION, ERCOT USES PERFORMANCE AND DATA OBTAINED RELATING TO COMPARABLE COMPENSATION OF SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT COMPARABLE ORGANIZATIONS, INCLUDING COMPENSATION SURVEYS AND FORMS 990. THE HR&G COMMITTEE CAN REQUEST INFORMATION FROM INDEPENDENT COMPENSATION CONSULTANTS. OFFICER AND KEY EMPLOYEE COMPENSATION IS REVIEWED ANNUALLY, AND ALL DECISIONS REGARDING OFFICER AND KEY EMPLOYEE COMPENSATION ARE DOCUMENTED AND MAINTAINED. FORM 990, PART VI, SECTION C, LINE 19: ERCOT'S GOVERNING DOCUMENTS, CODE OF CONDUCT, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC THROUGH THE ERCOT WEBSITE (WWW.ERCOT.COM).

-44,630.

DEFERRED PENSION COSTS

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

DECIRIC REDIABILITY COUNCIL OF TE.

Form **990-W**

(Worksheet)

Department of the Treasury Internal Revenue Service

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations

(and on Investment Income for Private Foundations) FORM 990-T

▶ Go to www.irs.gov/Form990W for instructions and the latest information.
 ▶ Keep for your records. Do not send to the Internal Revenue Service.

OMB No. 1545-0976

2019

1	Unrelated business taxable income expected in the tax y	ear					1	
2	Tax on the amount on line 1. See instructions for tax or		2					
3	Alternative minimum tax for trusts. See instructions		3					
4	Total. Add lines 2 and 3	4						
5	Estimated tax credits. See instructions							
6	Subtract line 5 from line 4							
7	Other taxes. See instructions						7	
8	Total. Add lines 6 and 7						8	
9	Credit for federal tax paid on fuels. See instructions						9	
	Subtract line 9 from line 8. Note: If less than \$500, the cestimated tax payments. Private foundations, see instructions the tax shown on the 2018 return. See instructions zero or the tax year was for less than 12 months, skip the and enter the amount from line 10a on line 10c	ctions s. Caut i is line			10a	4,462.		
C	2019 Estimated Tax. Enter the smaller of line 10a or lin from line 10a on line 10c			•	e 10b, enter DJUSTI		10c	4,480.
			(a)	(b		(c)	100	(d)
11	Installment due dates. See instructions	11				09/16/1	9	12/16/19
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12				3,3	60.	1,120.
13	2018 Overpayment. See instructions	13						
14	Payment due (Subtract line 13 from line 12)	14				3,3	60.	1,120.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2019)

Form **990-T Exempt Organization Business Income Tax Return** OMB No. 1545-0687 (and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Name of organization (Check box if name changed and see instructions.) Check hox if address changed ELECTRIC RELIABILITY COUNCIL OF TEXAS **B** Exempt under section Print INC 74-2587416 E Unrelated business activity code X 501(c)(4 or Number, street, and room or suite no. If a P.O. box, see instructions. (See instructions.) Type 408(e) 220(e) 7620 METRO CENTER DRIVE ີ|408A | 7530(a) City or town, state or province, country, and ZIP or foreign postal code AUSTIN, TX 78744-1613 529(a) 900099 C Book value of all assets **F** Group exemption number (See instructions.) at end of year 1, 764, 219. G Check organization type ▶ 🗓 501(c) corporation 501(c) trust 401(a) trust Other trust **H** Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here **SEE STATEMENT** 1 _ . If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? X No If "Yes," enter the name and identifying number of the parent corporation. J The books are in care of SEAN TAYLOR, VP AND CFO Telephone number \triangleright 512-225-7000 Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales c Balance **b** Less returns and allowances 1c 2 Cost of goods sold (Schedule A, line 7) 3 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) 4a **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) 5 5 Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 7 8 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 9 Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) 12 12 Total. Combine lines 3 through 12 Part II **Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) 14 14 15 Salaries and wages 15 16 16 17 17 Interest (attach schedule) (see instructions) 18 18 19 Taxes and licenses 19 20 20 Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) 21 21 22b 22 Less depreciation claimed on Schedule A and elsewhere on return 23 23 Contributions to deferred compensation plans 24 24 25 25 Employee benefit programs Excess exempt expenses (Schedule I) 26 26 Excess readership costs (Schedule J) 27 27 Other deductions (attach schedule) 28 28 Total deductions. Add lines 14 through 28 29 29 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 Unrelated business taxable income. Subtract line 31 from line 30 32

RELIEF UNDER IRS NOTICE 2018-100

74-2587416 Page 2

Part I	II 7	Total Unrelated Business Taxa	ble Income							
33	Total	of unrelated business taxable income compu	ted from all unrelated trades	or businesses	(see instructions	s)	. 33			0.
34		ints paid for disallowed fringes						22	2,24	16.
35										
36										
	lines :	33 and 34					36	22	2,24	16.
37	Speci	fic deduction (Generally \$1,000, but see line						1	.,00	0.
38		ated business taxable income. Subtract line								
							. 38	21	.,24	<u> 16.</u>
Part I		Tax Computation								
39		nizations Taxable as Corporations. Multiply					▶ 39	4	1,46	<u> 52.</u>
40	Trust	s Taxable at Trust Rates. See instructions fo								
			orm 1041)				► 40			
41	Proxy	tax. See instructions)	► <u>41</u>			
42	Altern	native minimum tax (trusts only)					. 42			
43		n Noncompliant Facility Income. See instru								
44 Davit 1		. Add lines 41, 42, and 43 to line 39 or 40, wh	nichever applies				. 44	4	1,46	<u>) 2 .</u>
Part \		Tax and Payments			T T					
		gn tax credit (corporations attach Form 1118;					_			
							_			
		ral business credit. Attach Form 3800								
d		t for prior year minimum tax (attach Form 88					45.			
	Cubtr	credits. Add lines 45a through 45d					. 45e		1,46	52
46	Othor	act line 45e from line 44 taxes. Check if from: Form 4255	Form 9611	Eorn		Or (attach ashadul	. 46 e) 47		., 4	, 4 •
47 48		tax. Add lines 46 and 47 (see instructions)							1,46	5.2
40 49		net 965 tax liability paid from Form 965-A or							., =	0.
		ents: A 2017 overpayment credited to 2018					43			<u> </u>
		estimated tax payments								
C	Tax d	eposited with Form 8868			50c	4,462	2.			
		gn organizations: Tax paid or withheld at soul				•				
		up withholding (see instructions)								
f	Credit	t for small employer health insurance premiu	ms (attach Form 8941)		50f					
		credits, adjustments, and payments:								
		Form 4136 (▶ 50g					
51	Total	payments. Add lines 50a through 50g					. 51	4	1,46	<u>52.</u>
52	Estim	ated tax penalty (see instructions). Check if F	form 2220 is attached 🕨	<u> </u>			. 52			
53	Tax d	ue. If line 51 is less than the total of lines 48	, 49, and 52, enter amount o	wed			▶ 53			
54	Overp	payment. If line 51 is larger than the total of	ines 48, 49, and 52, enter a	mount overpaid	l ₁		► 54			
55		the amount of line 54 you want: Credited to				Refunded	► 55			
Part \		Statements Regarding Certain								
56		y time during the 2018 calendar year, did the	•	•		•		-	Yes	No
		a financial account (bank, securities, or other			-					
		N Form 114, Report of Foreign Bank and Fina	ancial Accounts. If "Yes," ent	er the name of	the foreign coun	try				77
	here	· ————————————————————————————————————						—— ⊦		<u>X</u>
57		g the tax year, did the organization receive a		he grantor of, o	or transferor to, a	foreign trust?				X
50		s," see instructions for other forms the organ	•	► Ф						
58		the amount of tax-exempt interest received of the control of tax-exempt interest received of tax-exempt interest.			d statements, and to	the best of my know	wledge and b	pelief it is true		
Sign		rrect, and complete. Declaration of preparer (other tha					wicago aria k	701101, 1t 10 true,		
Here				WP AN	D CFO		,	S discuss this r		ith
		Signature of officer	Date	VP AN	D CFO			er shown below s)? X Yes		No
		Print/Type preparer's name	Preparer's signature		Date	Check	if PTI			110
De:4		- τ το τγρο ριοραιοί ο παιπ ο	i roparor a arginature		Duito	self- employ				
Paid	.ro	TROY MARINE, CPA	TROY MARINE,	CPA	11/06/19			001878	363	
Prepa Use (ai Ci	Firm's name ► BAKER TILLY				Firm's EIN		9-0859		<u> </u>
OSE (Jilly		CONSIN AVE.,							
		Firm's address MILWAUKEE,	· · · · · · · · · · · · · · · · · · ·			Phone no.	414.	777.55	00	

74-2587416 Form 990-T (2018) **INC** Page 3

Schedule A - Cost of Goods	s Sold. Enter	method of inven	tory v	aluation ► N/A						
1 Inventory at beginning of year				Inventory at end of year	r		6			
				Cost of goods sold. Su						
3 Cost of labor			1	from line 5. Enter here						
4a Additional section 263A costs				line 2			7			
(attach schedule)	4a		8 Do the rules of section 263A (with respect to					Yes No		
b Other costs (attach schedule)				property produced or a	cquired	for resale) apply to				
5 Total. Add lines 1 through 4b			the organization?							
Schedule C - Rent Income (see instructions)	(From Real	Property and	Pers	sonal Property L	ease	d With Real Prop	erty	()		
Description of property										
(1)										
(2)										
(3)										
(4)										
		ed or accrued				2(a) Doductions directly	v oonn	acted with the income in		
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	` ' of rent for p	ersonal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)				
(1)										
(2)										
(3)										
(4)										
Total	0.	Total			0.					
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•	0.		
Schedule E - Unrelated Dek		Income (see	instru	ctions)			<u></u>			
			2	Gross income from or allocable to debt-		3. Deductions directly cor to debt-finan				
1. Description of debt-fit	nanced property			financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)		
(1)										
(2)										
(3)										
(4)										
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis allocable to nced property h schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)				%						
(2)				%						
(3)				%						
(4)				%			\top			
	•			-		inter here and on page 1, Part I, line 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).		
Totals						0		0.		
Total dividends-received deductions in							\div	0.		

Form **990-T** (2018)

Form 990-T (2018) **INC**

Schedule F - Interest, A				1	Controlled O						
1. Name of controlled organization		2. Employer identification number		3. Net uni (loss) (see	3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made		5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organia	zations										
7. Taxable Income		inrelated incom see instructions		9. Total	of specified payr made	ments	10. Part of column in the controllingross	mn 9 tha ing orgar s income	nization's	11 . c	eductions directly connected th income in column 10
(2)											
(3)											
(4)											
							Add colun Enter here and line 8, c		e 1, Part I,	1	Add columns 6 and 11. here and on page 1, Part I, line 8, column (B).
Totals						•			0.		0
Schedule G - Investme	nt Incor	ne of a S	Section	501(c)(7	7), (9), or (17) Org	ganization				
(see instr	,						3. Deduction		4 Cat		5. Total deductions
1. Desc	ription of inco	me			2. Amount of	income	directly conne (attach sched		4. Set- (attach s	-asides schedule)	and set-asides (col. 3 plus col. 4)
(1)											
(2)											
(3)											
(4)											
					Enter here and Part I, line 9, co						Enter here and on page Part I, line 9, column (B).
Totals				•		0.					0
Schedule I - Exploited	Exempt	Activity	Incom	e, Other	Than Adv		ng Income				
(see instru	letions)				4 Nations	(1)			T		
1. Description of exploited activity	unrelated incom	Gross business e from business	directly with pr of un	connected connected oduction related ss income	4. Net incon from unrelated business (co minus colum gain, comput- through	d trade or olumn 2 n 3). If a e cols. 5	5. Gross inco from activity t is not unrelat business inco	hat ed	attribut	penses table to ımn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
	page 1	re and on l, Part I, col. (A).	page	ere and on 1, Part I, , col. (B).							Enter here and on page 1, Part II, line 26.
Totals -		0.		0.							0
Schedule J - Advertisi											
Part I Income From I	Periodic	als Repo	orted o	n a Con	solidated	Basis					
1. Name of periodical		2. Gross advertising income	adv	3. Direct ertising costs	or (loss) (c col. 3). If a g	tising gain ol. 2 minus ain, compu nrough 7.			6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
Totals (carry to Part II, line (5))	▶	(o.	0							0
							· · · · · · · · · · · · · · · · · · ·				200 T

Form 990-T (2018) **INC**

74-2587416

Page 5

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form **990-T** (2018)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1 BUSINESS ACTIVITY

INCOME UNDER IRC SECTION 512(A)(7)

TO FORM 990-T, PAGE 1

Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit https://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only support or capital to a copies peopled.

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or ELECTRIC RELIABILITY COUNCIL OF TEXAS print 74-2587416 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filina vour 7620 METRO CENTER DRIVE return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. AUSTIN, TX 78744-1613 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Return Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 10 Form 990-PF Ω4 Form 5227 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) 06 Form 8870 12 SEAN TAYLOR, VP AND CFO • The books are in the care of \blacktriangleright 7620 METRO CENTER DRIVE - AUSTIN, TX 78744-1613 Telephone No. ► 512-225-7000 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2019 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2018 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

any nonrefundable credits. See instructions.

Form 8868 (Rev. 1-2019)

За

3b

0.

Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or ELECTRIC RELIABILITY COUNCIL OF TEXAS print 74-2587416 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filina vour 7620 METRO CENTER DRIVE return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. AUSTIN, TX 78744-1613 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return Application Return Code Is For Code Is For Form 990-T (corporation) Form 990 or Form 990-EZ 01 07 Form 1041-A Form 990-BL 02 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 10 Form 990-PF Ω4 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 SEAN TAYLOR, VP AND CFO • The books are in the care of \blacktriangleright 7620 METRO CENTER DRIVE - AUSTIN, TX 78744-1613 Telephone No. ► 512-225-7000 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2019 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2018 or tax year beginning , and ending Final return If the tax year entered in line 1 is for less than 12 months, check reason: | Initial return Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

any nonrefundable credits. See instructions.

Form 8868 (Rev. 1-2019)

За

3b

4,462.

4.462.

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

OMB No.	1545-1878
---------	-----------

For calendar year 2018, or fiscal year beginning

, 2018, and ending

Department of the Treasury Internal Revenue Service

Name of exempt organization

▶ Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879EO for the latest information.

ELECTRIC RELIABILITY COUNCIL OF TEXAS INC

Employer identification number

74-2587416

Name and title of officer SEAN TAYLOR

VP AND CFO

Part I	Type of Return and Return Information	(Whole Dollars Only
--------	---------------------------------------	---------------------

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _	244,963,920.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	
		_	

Declaration and Signature Authorization of Officer Part II

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Off

Officer's PIN: check one box only						
X authorize BAKER TILLY VIRCHOW KRAUSE, LLP	to enter my PIN	12345				
ERO firm name		nter five numbers, b do not enter all zeros				
as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within the is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also aut enter my PIN on the return's disclosure consent screen.						
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/St program, I will enter my PIN on the return's disclosure consent screen.						
Officer's signature ▶ Date ▶						
Part III Certification and Authentication						

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

39341753202

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ BAKER TILLY VIRCHOW KRAUSE, LLP

Date > 11/06/19

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So