Introduction to the Form 990

As a not-for-profit member-owned cooperative, Surry-Yadkin Electric Membership Corporation is required to file an IRS Form 990 annually, which is made available as public record once it is completed by the cooperative's auditing firm and filed with the IRS.

The Form 990 includes information on the mission of the cooperative, its finances and compensation amounts for all members of the board of directors. The directors' compensation is determined based on information provided from an independent consultant.

Elected by the SYEMC membership, the 10 directors are tasked with overseeing the governance and operations of the cooperative. Along with many other responsibilities, the board retains and works with outside consultants to review short and long range operational and financial plans, the cooperative's rate schedule, service rules and regulations, and policies.

The board also works with outside consultants and sets the compensation for the Executive Vice President and General Manager, which is comparable to other industry leaders. Employee compensation ranges are set by the Executive Vice President and General Manager, who also uses an outside consultant to ensure employees' salaries are based on fair market values for the industry and region.

Each director works an average of four hours a week on cooperative business. They attend a monthly board meeting and are expected to gain and maintain training to keep them abreast of and knowledgeable about the electric industry and issues affecting SYEMC operations and its members.

The compensation also includes hours for training for members, as well as the individual director's participation in SYEMC representation in state and national cooperative-related organizations.

All 10 directors have earned their Credentialed Cooperative Director certificate. In addition, seven earned a Board Leadership certificate, and four have their Director Gold Credential certificate.

The average annual compensation for SYEMC's board of directors for 2022 was \$18,666.

Schedule O of the 990 provides additional information about the Surry-Yadkin EMC Form 990 financials provided.

Copies of the previous two years' Form 990s are available upon request by contacting Debbie Benge, executive assistant, at debbiebenge@syemc.com or calling 336-356-5262.

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization SURRY-YADKIN ELECTRIC MEMBERSHIP CORPORATION

Employer identification number 56-0421795

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

THE COOPERATIVE HAS MEMBERS AS PROVIDED FOR IN ITS BYLAWS WHICH ARE

INCLUDED AS A PART OF THIS RETURN.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE COOPERATIVE HAS MEMBERS WHO ELECT MEMBERS OF THE GOVERNING BODY AS

PROVIDED FOR IN ITS BYLAWS WHICH ARE INCLUDED AS A PART OF THIS RETURN.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS

CERTAIN DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY MEMBERS

AS PROVIDED FOR IN ITS BYLAWS WHICH ARE INCLUDED AS A PART OF THIS RETURN.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS REVIEWED BY THE BOARD WITH ALL SUPPORTING DOCUMENTATION MADE AVAILABLE TO THEM.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE COOPERATIVE REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES

COMPLIANCE WITH THEIR CONFLICT OF INTEREST POLICY AS PROVIDED FOR

IN ITS POLICY WHICH IS INCLUDED AS A PART OF THIS RETURN.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL SALARIES ARE REVIEWED BY THE BOARD OF DIRECTORS AND FILES ARE MAINTAINED FOR THE REVIEW PROCESS BY WHICH MERIT RAISES ARE GRANTED.

Employer identification number

SURRY-YADKIN ELECTRIC MEMBERSHIP

56-0421795

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

SALARIES ARE REVIEWED BY THE BOARD OF DIRECTORS AND FILES ARE MAINTAINED

FOR THE REVIEW PROCESS BY WHICH MERIT RAISES ARE GRANTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

A COPY OF THE BYLAWS ARE PROVIDED TO NEW MEMBERS. A FINANCIAL STATEMENT IS

PROVIDED TO THE MEMBERS AS A PART OF THE ORGANIZATION'S ANNUAL REPORT.

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM 990 AND FINANCIAL

STATEMENTS ARE AVAILABLE UPON REQUEST AT THE ORGANIZATIONS'S HEADQUARTERS.

FORM 990, PART VII - ADDITIONAL INFORMATION

SYEMC BYLAWS:

SECTION 5.11 - DIRECTOR COMPENSATION.

THE BOARD SHALL DETERMINE THE MANNER AND METHOD OF ANY REASONABLE DIRECTOR REIMBURSEMENT AND COMPENSATION. SUCH COMPENSATION MAY INCLUDE PAYING DIRECTORS A MONTHLY STIPEND AND/OR A FIXED PER DIEM FEE, PLUS DOCUMENTED BUSINESS EXPENSES, AS DETERMINED IN THE BOARD'S REASONABLE DISCRETION, FOR ATTENDING OR ATTENDING TO:

- 1. THE ONGOING NEEDS OF THE COOPERATIVE, DUTIES OF THE POSITION, AND COMMUNICATIONS WITH MEMBERS;
- 2.BOARD MEETING;
- 3. FUNCTION INVOLVING THE COOPERATIVE; OR
- 4.MEETING OF STATE, NATIONAL OR OTHER COOPERATIVE OR INDUSTRY ORGANIZATION,
 OR
- 5. FUNCTION REASONABLY ENHANCING THE DIRECTOR'S ABILITY TO SERVE AS A DIRECTOR.

PAGE 1 OF 2

| SURRY-YADKIN ELECTRIC MEMBERSHIP | Employer identification number 56-0421795 | | | | |
|---|---|---|--|--|--|
| FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS | EXPLA | NATION | | | |
| ACCUM OTHER COMPREHENSIVE INCOME | \$ | 2,798,759 | | | |
| DONATED CAPITAL | \$ | 4,350 | | | |
| BENEFITS PAID TO MEMBERS | \$ | 4,597,045 | | | |
| CAPITAL RETIREMENT GAINS | \$ | 757,909 | | | |
| CAPITAL CREDIT RETIREMENT | \$ | -2,694,965 | | | |
| TOTAL | \$ | 5,463,098 | | | |
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| | PAGE | 2 OF 2 | | | |

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2022 Open to Public

5

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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection For the 2022 calendar year, or tax year beginning and ending C Name of organization Check if applicable: SURRY-YADKIN ELECTRIC MEMBERSHIP D Employer identification number CORPORATION Address change Doing business as 56-0421795 Name change Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 305 Initial return 336-356-8241 Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated DOBSON NC 27017-0305 60,388,840 G Gross receipts \$ Amended return Name and address of principal officer: Application pending H(a) Is this a group return for subordinates? WILLIAM GREGORY PUCKETT P.O. BOX 305 H(b) Are all subordinates included? DOBSON NC 27017 If "No." attach a list. See instructions X 501(c) 12) (insert no.) 501(c)(3) Tax-exempt status 4947(a)(1) or 527 WWW.SYEMC.COM Website: H(c) Group exemption number Form of organization: X Corporation Year of formation: 1940 Association NC Part I Summary 1 Briefly describe the organization's mission or most significant activities: PROVIDE OUTSTANDING SERVICE THAT POWERS OUR RURAL COMMUNITIES Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 10 4 Number of independent voting members of the governing body (Part VI, line 1b) 10 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 81 5 6 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 54,382,315 59,911,943 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 198,410 273,638 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 284,381 203,259 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 54,865,106 60,388,840 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 4,479,000 4,597,045 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 593,012 601,151 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 55,190,644 49,793,094 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 54,865,106 60,388,840 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 160,081,171 165,218,021 21 Total liabilities (Part X. line 26) 102,338,537 102,012,289 22 Net assets or fund balances. Subtract line 21 from line 20 57,742,634 63,205,732 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sian Signature of officer Here WILLIAM GREGORY PUCKETT EXECUTIVE VP & GM Type or print name and title Print/Type preparer's name Preparer's signature **₽**023 Paid JASON A. PEACOCK self-employed P00978537 Preparer MCNAIR, MCLEMORE, MIDDLEBROOKS & CO, Firm's name LLC Firm's EIN 58-1094351 Use Only POST OFFICE BOX ONE MACON, GA 31202-0001 478-746-6277 Phone no

May the IRS discuss this return with the preparer shown above? See instructions

X Yes

) (Revenue \$

including grants of \$

(Expenses \$

DAA

4e Total program service expenses

| | | | Yes | No |
|-----|--|---|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| • | complete Schedule A | 1 | | X |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | | Х |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | ., |
| 4 | candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | 3 | | Х |
| 4 | election in effect during the tay year? If "Yea" complete Schedule C. Red II | | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | 4 | | |
| | assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | - | | |
| | have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If | | | |
| | "Yes," complete Schedule D, Part I | 6 | | х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | | | |
| | complete Schedule D, Part III | 8 | | х |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a | | | |
| | custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or | | | |
| | debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | Х |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | | | |
| | or in quasi endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | | | |
| | VII, VIII, IX, or X, as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," | | | |
| | complete Schedule D, Part VI | 11a | Х | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more | | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | X |
| С | Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more | | | |
| d | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | X | |
| u | 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 | 44.1 | | х |
| 6 | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11d 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | Tie | Λ | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | х |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | <u> </u> | | |
| | Schedule D, Parts XI and XII | 12a | 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 | | х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| 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 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other | *************************************** | | |
| | assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on | | | |
| 40 | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | | v |
| 10 | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | 40 | | v |
| 20a | If "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 19 | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20a 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | 200 | | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | х |
| | the state of the s | | | |

Form 990 (2022) SURRY-YADKIN ELECTRIC MEMBERSHIP
Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-------|---|--|-----|----|
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | | |
| 12705 | 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 | Literra | l | |
| 242 | employees? If "Yes," complete Schedule J | 23 | Х | |
| 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 | 04- | | v |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24a 24b | | X |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | 240 | | |
| | to defease any tay-evemnt honds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | | - 1.0 | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior | | | |
| | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? | | | |
| | If "Yes," complete Schedule L, Part I | 25b | | |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | 2 | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key | | | |
| | employee, creator or founder, substantial contributor or employee thereof, a grant selection committee | | | |
| | member, or to a 35% controlled entity (including an employee thereof) or family member of any of these | | | |
| 20 | persons? If "Yes," complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> | | | |
| u | "Ves." complete Schedule I. Port IV | 28a | | х |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | X |
| С | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If | 200 | | |
| | "Yes," complete Schedule L, Part IV | 28c | | х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | Х |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | Х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | |
| | complete Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| 200 | 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, | | | |
| 25- | or IV, and Part V, line 1 | 34 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | Х |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 254 | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable | 35b | | |
| 00 | related arganization? If "Van " complete Schodule D. Bort V. line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | 30 | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | x |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and | 0, | | |
| | 19? Note: All Form 990 filers are required to complete Schedule O. | 38 | х | |
| Pa | art V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | |
| | | [::::::::::::::::::::::::::::::::::::: | Yes | No |
| 1a | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 45 | _ | | |
| b | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 | 4 | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and | | | |
| | reportable gaming (gambling) winnings to prize winners? | 1c | X | |

| Pa | Int V Statements Regarding Other IRS Filings and Tax Compliance (continu | ued) | | | 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 | 81 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax return | ns? | | 2b | X | |
| 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 on Schedule | 0 | | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other a | authorit | y over, | | | |
| | a financial account in a foreign country (such as a bank account, securities account, or other financial | accou | nt)? | 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 A | ccount | ts (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 | tion? | | 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 | е | | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | | ************ | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributio | ns 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 g | oods | | | | |
| | and services provided to the payor? | | | 7a | | |
| b | | | | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | S | | | | |
| 22 | required to file Form 8282? | | ***************** | 7c | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co | | ? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra | | | 7f | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file For | | | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations are printed by the contribution of cars, boats, airplanes, or other vehicles, did the organizations are printed by the contribution of cars, boats, airplanes, or other vehicles, did the organizations are printed by the contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, and the cars of cars, and the cars, and the cars of cars, and the cars of cars | | | 7h | 100000000000000000000000000000000000000 | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained | d by the | e | | | |
| 9 | sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. | | | 8 | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | | | | ļ | £ |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | | 9a | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | 9b | | |
| a | 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: | 100 | | | | |
| а | | 11a | 58,626,535 | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources | 114 | 00/020/000 | | | |
| | against amounts due or received from them) | 11b | 275,932 | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | | | 12a | 00000000000 | .00000000000 |
| 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 | Did the organization receive any payments for indoor tanning services during the tax year? | | | 14a | | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule | e O | | 14b | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner | ation o | r | | | |
| | excess parachute payment(s) during the year? | | | 15 | | X |
| | If "Yes," see instructions and file Form 4720, Schedule N. | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment | income | ∍? | 16 | | X |
| | If "Yes," complete Form 4720, Schedule O. | | | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activity | | | | | |
| | that would result in the imposition of an excise tax under section 4951, 4952 or 4953? | | | 17 | 3000000000 | 10000000000 |
| | If "Yes," complete Form 6069. | | | | | . |

Page 6

Part VI

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

| Sec | tion A. Governing Body and Management | | | | | |
|----------|--|----------|---------------|-----------|---|------------|
| | | | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 10 | | | |
| | If there are material differences in voting rights among members of the governing body, or | | | | | |
| | if the governing body delegated broad authority to an executive committee or similar | | | | | |
| | committee, explain on Schedule O. | | 1 | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent | 1b | 10 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | | | |
| | any other officer, director, trustee, or key employee? | | | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | | | |
| | supervision of officers, directors, trustees, or key employees to a management company or other person? | | | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed | ? | | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | | 5 | | X |
| 6 | Did the organization have members or stockholders? | | | 6 | Х | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint | | | | | |
| | one or more members of the governing body? | | | 7a | Х | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, | | | | | |
| | stockholders, or persons other than the governing body? | | | 7b | Х | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year | ar by tl | he following: | | | |
| а | The governing body? | | | 8a | Х | |
| b | Each committee with authority to act on behalf of the governing body? | | | 8b | Х | |
| 9 | 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 on Schedule O | | | 9 | | X |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Inte | nal R | evenue Co | de.) | | |
| 40 | PULL THE RESERVE TO T | | | | Yes | |
| 10a | Did the organization have local chapters, branches, or affiliates? | | | 10a | | _X_ |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, | | | 11.000.00 | | |
| 44- | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | | | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing | the fo | orm? | 11a | X | |
| b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris | e to co | nflicts? | 12b | Х | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | | ., | |
| 12 | describe on Schedule O how this was done | | | 12c | X | |
| 13 14 | Did the organization have a written whistleblower policy? | | | 13 | X | |
| 15 | Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by | | | 14 | X | |
| 15 | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | |
| а | TI | | | 45- | х | |
| b | Other officers or key employees of the experimental | | | 15a | X | |
| Б | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | 15b | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | | | |
| . • • | with a tayable entity during the year? | | | 16a | (00000000000000000000000000000000000000 | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | | | 100 | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the | | | | | |
| | organization's exempt status with respect to such arrangements? | | | 16b | (00000000000000000000000000000000000000 | 2000000000 |
| Sec | tion C. Disclosure | | | 100 | | |
| 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 (s | ection ! | 501(c) | | | |
| | (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | 20.011 | (0) | | | |
| | X Own website Another's website X Upon request Other (explain on Schedule O) | | | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte | rest no | licv. | | | |
| | and financial statements available to the public during the tax year. | Po | ·/J1 | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and reco | rds | | | | |
| SI | JRRY-YADKIN EMC 510 SOUTH MAIN STREET | | | | | |
| DO | DBSON NC 270: | L7 | 336 | -35 | 6-8 | 241 |

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

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

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

| | | _ | | | | 200/2010/2010 | | | | |
|---|--|-----|---------|----------------------|--------|------------------------------------|----|---|---|--|
| (A) Name and title | (B) Average hours per week (list any hours for related organizations below | box | k, unle | Pos heck ss pe | rson i | than or so the Highest compensated | an | (D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC) | (E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC) | (F) Estimated amount of other compensation from the organization and related organizations |
| | dotted line) | ее | stee | | | nsated | | | | |
| (1) WILLIAM GREGORY | PUCKETT | | | | | | | | | |
| EXECUTIVE VP & GM | 50.00 | | | x | | | | 302,925 | 0 | 111,566 |
| (2) MISTY UTT | 0.00 | | | Λ | | | | 302,923 | 0 | 111,366 |
| VP OF FINANCE & ACCT | 45.00 0.00 | | | | | х | | 161,133 | 0 | 68,127 |
| (3) RICKY BOWMAN | 45.00 | | | | | | | | | |
| VP OF OPERATIONS | 0.00 | | | | | x | | 149,664 | 0 | 66,907 |
| (4) RICHARD BRYON KE | NNEDY | | | | | | | | | 00/001 |
| <u> </u> | 45.00 | | | | | | | | | SAUCE - Heat orientonic |
| VP OF MBR SRVC & PUB (5) MICAH MILLS | 0.00 | | | | | Х | | 142,598 | 0 | 47,237 |
| (5)MICAH MILLS | 45.00 | | | | | | | | | |
| MANAGER OF OPER. | 0.00 | | | | | х | | 121,933 | 0 | 58,331 |
| (6) SAM KIDD | | | | | | | | | | 00/001 |
| 5-551-5553.5-5555-5-55555-5-3-5-3-5-3-5-3-3-3-3 | 45.00 | | | | | | | | | |
| ENGINEERING TECHNICI | 0.00 | | | | | Х | | 124,249 | 0 | 47,965 |
| (7) LEE VON SPEAKS | 6.00 | | | | | | | 16 | | |
| DIRECTOR | 0.00 | x | | х | | | | 23,220 | 0 | 0 |
| (8) KAROLINE OVERBY | 0.00 | | | | | | | 23,220 | <u> </u> | 0 |
| | 5.00 | | | | | | | | | |
| PRESIDENT | 0.00 | X | | X | | | | 20,580 | 0 | 0 |
| (9) EDDIE CAMPBELL | 4 00 | | | | | | | | | |
| VICE DECIDENT | 4.00 | x | | | | | | 10 600 | • | • |
| VICE PRESIDENT (10) BRENDA HARDY | 0.00 | Λ | | | | | | 18,600 | 0 | 0 |
| (10) 21 111 111 121 | 4.00 | | | | | | | | | |
| SECRETARY | 0.00 | x | | | | | | 18,600 | 0 | 0 |
| (11) STEPHEN HUTSON | | | | | | | | | | |
| DIRECTION | 4.00 | ,, | | | | | | 10 600 | | _ |
| DIRECTOR | 0.00 | X | | | | | | 18,600 | 0 | Form 990 (2022) |

| FOIII 990 (2022) SORRI - IAL | | | | | | | | | | Page |
|---|---|--------------------------------|-----------------------|------------------------|--------------|--------------------------------|-----------------------------------|---|--|---|
| Part VII Section A. Officers | , Directors, Tru | stee | s, K | ey E | mpl | oyee | s, a | and Highest Compensated | Employees (continued) | |
| (A) (B) Name and title Average hours | | | | Pos check ess pe | erson | than o is both or/truste | an Reportable ee) compensation | | (E) Reportable compensation | (F) Estimated amount of other |
| | per week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/ 1099-MISC/ 1099-NEC) | from related organizations (W-2/ 1099-MISC/ 1099-NEC) | compensation from the organization and related organizations |
| (12) DAVID PENDRY DIRECTOR | 4.00 | x | | | | | | 18,600 | 0 | |
| (13) ALVIN REID JE | ł. 4.00 | | | | | | | | | |
| DIRECTOR | 0.00 | x | | | | | | 17,940 | 0 | × |
| (14) STEPHEN JOYCE | | | | | | | | 2.7520 | | |
| | 3.00 | | | | | | | | | |
| DIRECTOR | 0.00 | X | | | | | | 17,280 | 0 | |
| (15) DAVID MILLER | 2 00 | | | | | | | | | |
| TREASURER | 3.00 0.00 | x | | x | | | | 17 200 | 0 | - |
| (16) WILLARD SWIFT | | ^ | | Λ | | | | 17,280 | 0 | |
| , , | 4.00 | | | | | | | | | |
| DIRECTOR | 0.00 | X | | Х | | | | 15,960 | 0 | |
| | | | | | | | | | | |
| | ********** | | | | | | | | | |
| | | | | | | | | | | |
| 1b Subtotal | | | | | | | | 1,189,162 | | 400,133 |
| c Total from continuation shee | | | | | | | | 1 100 100 | | |
| d Total (add lines 1b and 1c) . 2 Total number of individuals (inc.) | oludina but not l | imito | d to | 4b o o | | | In a | 1,189,162 | 0400 000 1 | 400,13 |
| 2 Total number of individuals (in reportable compensation from | | | 21 | tnos | e iis | ted a | vodi | e) who received more than | \$100,000 of | |
| 3 Did the organization list any for employee on line 1a? If "Yes," 4 For any individual listed on line | complete Sche | dule of re | J for | suc able | h ind | lividu pens | <i>ial</i> satio | on and other compensation | from the | Yes No |
| 5 Did any person listed on line 1 | a receive or acc | rue o | comp | ens | atior | fron | n an | ny unrelated organization or | individual | 4 X |
| for services rendered to the organic | | es," | com | plete | e Sci | hedu | le J | for such person | | 5 X |
| Section B. Independent Contracto1 Complete this table for your five | | | tod i | - do | | | | | h 0400 000 f | |
| compensation from the organiz | zation. Report c | ompe | ensa | tion | for the | ne ca | lenc | dar year ending with or with | in the organization's tax ye | ear. |
| Name and | (A) business address | | | | | | | | (B) ion of services | (C) Compensation |
| PIKE ELECTRIC INC ATLANTA | | . 3 | 03 | | PO | воз | | 46308 PLANT CONSTRUC | | 2,905,75 |
| LEE ELECTRICAL CONST ABERDEEN | | NC 2 | 83 | | PO | воз | | 55 PLANT CONSTRUC | ·m | |
| CARTER UTILITY TREE | | | 03 | | 152 | GF | | STONE LANE | ,1 | 2,176,57 |
| MOUNT AIRY | | 2 | 70 | | | . 01 | | ROW TRIMMING | | 1,390,17 |
| DAVEY RESOURCE GROUP | | 24 250 | E 500 | | PO | воз | 1 222 | 4142 | | , ===,=: |
| CLEVELAND | | 4 | | | _ | | | DATA COLLECTIO | N | 783,11 |
| TOP GUN APPLICATION INMAN | | LLC | | | т60 | EU | | NKS FARM RD ROW SPRAYING | | 04202000_0 100000000 |
| 2 Total number of independent of | | | | | limit | ed to | | | | 419,56 |
| received more than \$100,000 c | | | | | | | | so listed above) WIIO | 11 | |

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (B) Related or exempt (D) Revenue excluded Unrelated function revenue business revenue from tax under sections 512-514 , Gifts, Grants illar Amounts 1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d Contributions, and Other Simi Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f 1g h Total. Add lines 1a-1f. Business Code 221000 58,684,691 58,684,691 2a ELECTRIC SERVICE REVENUE Program Service 221000 G & T CAPITAL CREDITS 892,151 892,151 221000 170,403 POLE RENTAL 170,403 221000 OTHER CAPITAL CREDITS 164,698 164,698 f All other program service revenue g Total. Add lines 2a-2f. 59,911,943 Investment income (including dividends, interest, and other similar amounts) 273,638 26,851 246,787 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents b Less: rental expenses 6b c Rental inc. or (loss) d Net rental income or (loss) 7a Gross amount from (i) Securities (ii) Other sales of assets other than inventory 7a Other Revenue b Less: cost or other basis and sales exps. 7b c Gain or (loss) 7c d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 221000 11a EARNINGS OR LOSS- DIVERSIFIED 465,992 465,992 GAIN ON DISPOSITION OF PROPER 221000 1,845 1,845 221000 -1,711 LOSS ON DISPOSITION OF PROPER -1,711d All other revenue -262,867 -262,867 e Total. Add lines 11a-11d 203,259

60,388,840

59,505,658

Total revenue. See instructions

| | ert IX Statement of Functional Ex | | | | |
|--------|---|------------------------------|------------------------------------|---|--------------------------------|
| Sect | ion 501(c)(3) and 501(c)(4) organizations must o | complete all columns. All of | ther organizations must co | mplete column (A). | |
| _ | Check if Schedule O contains a resp | | | T | |
| | ot include amounts reported on lines 6b, 7b, 0b, 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 | | | | |
| 2 | and domestic governments. See Part IV, line 21 Grants and other assistance to domestic | | | | |
| 2 | individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | | | | |
| ٥ | organizations, foreign governments, and | | | | |
| | foreign individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | 4,597,045 | | | |
| 5 | Compensation of current officers, directors, | 270017020 | | | |
| | trustees, and key employees | 601,151 | | | 19 |
| 6 | Compensation not included above to disqualified | • | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (nonemployees): | | | | |
| а | Management | | | | |
| b | Legal | | | | |
| C | Accounting | | | | |
| | Lobbying | | | | |
| | 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 Schedule O.) | | | | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | | | | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest | 2,176,484 | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 4,662,107 | | | |
| 23 | Insurance | | | | |
| 24 | Other expenses. Itemize expenses not covered | | | | |
| | above (List miscellaneous expenses on line 24e. If | | | | |
| | line 24e amount exceeds 10% of line 25, column | | | | |
| • | (A) amount, list line 24e expenses on Schedule O.) PURCHASE POWER | 30,163,451 | | | |
| a b | DISTRIBUTION MAINTENANCE | 6,689,358 | | | |
| C | DISTRIBUTION OPERATIONS | 4,796,091 | | | |
| d | ADMIN & GENERAL | 3,733,989 | | | |
| e | All other expenses | 2,969,164 | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 60,388,840 | 0 | 0 | 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 | 00,000,010 | 0 | 0 | 0 |
| | following SOP 98-2 (ASC 958-720) | | | | |

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year Cash—non-interest-bearing 9,558,367 9,075,514 2 Savings and temporary cash investments 21,569 108,364 2 Pledges and grants receivable, net Accounts receivable, net 8,584,247 9,707,740 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 871,833 749,833 981,495 930,290 Inventories for sale or use 8 880,250 Prepaid expenses and deferred charges 764,410 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 171,044,749 10a 41,972,521 10b 125,314,240 129,072,228 b Less: accumulated depreciation 10c 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13,985,010 14,693,802 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 160,081,171 Total assets. Add lines 1 through 15 (must equal line 33) 165,218,021 16 Accounts payable and accrued expenses 5,663,871 5,097,680 17 17 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 76,429,799 Secured mortgages and notes payable to unrelated third parties 23 80,464,763 Unsecured notes and loans payable to unrelated third parties 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 Schedule D 20,244,867 16,449,846 25 Total liabilities. Add lines 17 through 25 102,338,537 102,012,289 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 27 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here X and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds 31 57,742,634 63,205,732 57,742,634 32 Total net assets or fund balances 63,205,732 160,081,171 Total liabilities and net assets/fund balances 165,218,021

Form 990 (2022)

| Pa | art XI Reconciliation of Net Assets | | | | F | age 12 |
|----|---|----|-----|-----|------|--------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | | X |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 6 | 0,3 | 388 | 840 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | | 840 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | | 0 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 5 | 7,7 | 742, | 634 |
| 5 | Net unrealized gains (losses) on investments | 5 | | | | |
| 6 | Donated services and use of facilities | 6 | | | | |
| 7 | Investment expenses | 7 | | | | |
| 8 | Prior period adjustments | 8 | | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | | 5,4 | 163, | 098 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | | |
| | 32, column (B)) | 10 | 6 | 3,2 | 205, | 732 |
| Pŧ | art XII Financial Statements and Reporting | | 7.6 | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | | . 🔲 |
| | | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain on | | | | | |
| | Schedule O. | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2a | | X |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or | | | | | |
| | reviewed on a separate basis, consolidated basis, or both: | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | | 2b | X | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a | | | | | |
| | separate basis, consolidated basis, or both: | | | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of | | | | | |
| | the audit, review, or compilation of its financial statements and selection of an independent accountant? | | | 2c | X | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on | | | | | |
| | 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 | | | | | |
| | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | | 3a | | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the | | | | | |
| | required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | | 3b | | |

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

SURRY-YADKIN ELECTRIC MEMBERSHIP

Employer identification number

| _ c | ORPORATION | | 56-0421795 |
|---------|---|---|---------------------------------------|
| P. | art I Organizations Maintaining Donor Advised Fu | unds or Other Similar Funds o | |
| | Complete if the organization answered "Yes" on | Form 990, Part IV, line 6. | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors in writing th | at the assets held in donor advised | |
| | funds are the organization's property, subject to the organization's ex- | clusive legal control? | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor advisors i | n writing that grant funds can be used | |
| | only for charitable purposes and not for the benefit of the donor or do | | |
| 2000225 | conferring impermissible private benefit? | | Yes No |
| P | art II Conservation Easements. | | |
| | Complete if the organization answered "Yes" on | Form 990, Part IV, line 7. | |
| 1 | Purpose(s) of conservation easements held by the organization (chec | | |
| | Preservation of land for public use (for example, recreation or edu | ucation) Preservation of a historica | ally important land area |
| | Protection of natural habitat | Preservation of a certified | historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified cons | ervation contribution in the form of a con | nservation |
| | easement on the last day of the tax year. | | Held at the End of the Tax Year |
| а | | *************************************** | 2a |
| b | Total acreage restricted by conservation easements | | 2b |
| С | | cluded in (a) | 2c |
| d | Number of conservation easements included in (c) acquired after July | / 25, 2006, and not on a | |
| | historic structure listed in the National Register | | 2d |
| 3 | Number of conservation easements modified, transferred, released, e | extinguished, or terminated by the organ | ization during the |
| | tax year | | |
| 4 | Number of states where property subject to conservation easement is | s located | |
| 5 | Does the organization have a written policy regarding the periodic mo | nitoring, inspection, handling of | |
| | violations, and enforcement of the conservation easements it holds? | | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, handling | | |
| | 5300 (1300) | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, handling of view | olations, and enforcing conservation eas | sements during the year |
| | | 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
| 8 | Does each conservation easement reported on line 2(d) above satisfy | the requirements of section 170(h)(4)(E | 3)(i) |
| | and section 170(h)(4)(B)(ii)? | | Yes No |
| 9 | In Part XIII, describe how the organization reports conservation easer | ments in its revenue and expense staten | nent and |
| | balance sheet, and include, if applicable, the text of the footnote to the | | |
| | organization's accounting for conservation easements. | 79 | |
| P | art III Organizations Maintaining Collections of Art | , Historical Treasures, or Othe | er Similar Assets. |
| | Complete if the organization answered "Yes" on | Form 990, Part IV, line 8. | |
| 1a | If the organization elected, as permitted under FASB ASC 958, not to | | |
| | of art, historical treasures, or other similar assets held for public exhib | pition, education, or research in furtherar | nce of public |
| | service, provide in Part XIII the text of the footnote to its financial state | ements that describes these items. | · · · · · · · · · · · · · · · · · · · |
| b | If the organization elected, as permitted under FASB ASC 958, to rep | ort in its revenue statement and balance | e sheet works of |
| | art, historical treasures, or other similar assets held for public exhibition | on, education, or research in furtherance | e of public service, |
| | provide the following amounts relating to these items: | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | \$ |
| | (ii) Assets included in Form 990, Part X | ****************************** | \$ |
| 2 | If the organization received or held works of art, historical treasures, of | or other similar assets for financial gain. | provide the |
| | following amounts required to be reported under FASB ASC 958 relat | | L - 5 272 |
| а | | | \$ |
| b | Assets included in Form 990, Part X | | \$ |

| | dule D (Folili 990) 2022 BORKI TAL | | | | | 36-0 | | | | | age 2 |
|------|---|-----------------------|-------------|-----------------|----------------|---------------|------------|-----------|--------------|-------------|-------|
| Pa | art III — Organizations Maintaining | | | | | | | | sets (conti | nued) | |
| 3 | Using the organization's acquisition, accessic collection items (check all that apply): | on, and other record | ds, check | any of the fo | llowing that r | make signi | ficant us | e of its | Ì | | |
| a | Public exhibition | d | Loan or | exchange pro | ogram | | | | | | |
| b | Scholarly research | e | | | 11.7 | | | | | | |
| С | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explai | n how th | ev further the | organization | 's evemnt | nurnose | in Part | | | |
| | XIII. | moonono ana expiai | ii iiow tii | cy further the | organization | 3 exempt | purpose | шгац | | | |
| 5 | During the year, did the organization solicit o | r receive donations | of art hi | storical trace | roo or other | aimilar | | | | | |
| · | assets to be sold to raise funds rather than to | | | | | | | | П, | , | |
| Pa | art IV Escrow and Custodial Arra | | part or tri | e organization | 15 Collection | ſ | | | | es | No |
| | Complete if the organization 990, Part X, line 21. | | " on Fo | orm 990, Pa | art IV, line | 9, or rep | orted a | an amo | ount on For | m | |
| 1a | Is the organization an agent, trustee, custodi | an or other intermed | diary for | contributions (| or other asse | ats not | | | | | |
| | included as Farm 000 Ded VO | | | | | | | | | 'es | No |
| b | If "Yes," explain the arrangement in Part XIII | and complete the fo | | | | | | | | es | NO |
| - | in ree, explain the arrangement in rait Air | and complete the it | onowing t | able. | | | | ГТ | Amou | nt | |
| С | Beginning balance | | | | | | | | Amou | ш | - |
| | | | | | | | | 1c | | | |
| a | Additions during the year | | | | | | | 1d | | | |
| | Distributions during the year | | | | | | | 1e | | | |
| f | Ending balance | | | | | | | 1f | | | |
| 2a | Did the organization include an amount on Fo | orm 990, Part X, line | e 21, for | escrow or cus | todial accou | nt liability? | | | | 'es | No |
| | If "Yes," explain the arrangement in Part XIII. | Check here if the e | explanation | on has been p | rovided on P | art XIII | | | | | |
| Pa | irt V Endowment Funds. | | | | | | | | | | |
| | Complete if the organization | answered "Yes | on Fo | rm 990, Pa | art IV, line | 10. | | | | | |
| | | (a) Current year | 1 | Prior year | (c) Two ye | | (d) Th | ree years | back (e) Fo | our years b | ack |
| 1a | Beginning of year balance | | | | | | | | | • | |
| b | Contributions | | | | | | | | | | |
| | Net investment earnings, gains, and | | | | | | | | | | |
| 1550 | lacaca | | | | | | | | | | |
| ч | 0 - 1 | | | | | | | | | | |
| | | | - | | | | | | | | |
| е | Other expenditures for facilities and | | | | | | | | | | |
| _ | programs | | - | | | | | | | | |
| Ť | | | | | | | | | | | |
| g | End of year balance | | | | | | | | | | |
| 2 | Provide the estimated percentage of the curr | ent year end baland | e (line 1 | g, column (a)) | held as: | | | | | | |
| а | Board designated or quasi-endowment | % | | | | | | | | | |
| b | Permanent endowment % | | | | | | | | | | |
| | Term endowment % | | | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | uld equal 100%. | | | | | | | | | |
| 3a | Are there endowment funds not in the posses | | ation that | t are held and | administere | d for the | | | | | |
| | organization by: | J | | | | u 101 tilo | | | | Yes | No |
| | (i) Uprolated associations | | | | | | | | 3a(i | | 110 |
| | // = 1 · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| h | If "Yes" on line 3a(ii), are the related organiza | tions listed as resu | irod on C | Cobodula DO | | | | | 3a(ii | 4 | |
| 4 | Describe in Dest VIII the intended organiza | illons listed as requ | ned on S | chequie R? | | | | | <u>3b</u> | | |
| | Describe in Part XIII the intended uses of the lart VI Land, Buildings, and Equi | | owment t | unds. | | | | | | | |
| Га | | | , – | 000 5 | | | 100 | | | 0. 2 | |
| | Complete if the organization | | | | | 11a. See | Form | 990, F | Part X, line | 10. | |
| | Description of property | (a) Cost or other | 5 | (b) Cost or o | | 48 90 | ccumulate | d | (d) Boo | k value | |
| | | (investment) | | (oth | | de | preciation | | | | |
| 1a | Land | | | 1,7 | 71,399 | | | | 1,7 | 71,3 | 399 |
| b | Buildings | | | | | | | | | | |
| С | Leasehold improvements | | | | | | | | | | |
| | Equipment | | | 169,2 | 73,350 | 41 | ,972 | ,521 | 127,3 | 00.8 | 329 |
| е | Other | | | | , | | | , | ', 5 | /- | |
| Tota | I. Add lines 1a through 1e. (Column (d) must e | gual Form 990. Par | t X. colu | mn (B), line 10 | Oc.) | L | | | 129,0 | 72 2 | 228 |
| | <u> </u> | | | 1 / / | / | | | | , | , _ | |

| Schedule D (Form 990) 2022 SURRY-YADKIN ELECTRI | C MEMBERSHIP | 56-0421795 | Page |
|---|----------------------------------|-----------------------------------|----------------|
| Part VII Investments – Other Securities. | | | |
| Complete if the organization answered "Yes" o | n Form 990, Part IV, line | e 11b. See Form 990, Part | X, line 12. |
| (a) Description of security or category | (b) Book value | (c) Method of valu | |
| (including name of security) | | Cost or end-of-year ma | rket value |
| (1) Financial derivatives | | | |
| (2) Closely held equity interests | ••) | | |
| (3) Other | ., | | |
| (A) | | | |
| (B) | | 1 | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) (G) | | | |
| (H) | NA 1 | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII Investments – Program Related. | | | |
| Complete if the organization answered "Yes" o | n Form 990 Part IV line | 11c Soo Form 000 Part | V line 12 |
| (a) Description of investment | (b) Book value | (c) Method of value | N/A |
| <u> </u> | (D) Dook Value | Cost or end-of-year ma | |
| (1) PAT CAP - NCEMC | 10,962,196 | 1550 | |
| (2) PAT CAP - NRUCFC | 1,245,885 | | |
| (3) PAT CAP - TEMA | 1,206,975 | | |
| (4) OTHER INVESTMENTS | 711,076 | | |
| (5) PAT CAP - FEDERATED | 326,032 | | |
| (6) PAT CAP - NISC | 241,638 | COST | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) | 14,693,802 | | |
| Part IX Other Assets. | | | |
| Complete if the organization answered "Yes" o | n Form 990, Part IV, line | e 11d. See Form 990, Part | X, line 15. |
| (a) Description | | | (b) Book value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) | | | |
| Part X Other Liabilities. | - F 000 D-41/41 | 44.0.5 | . 5 |
| Complete if the organization answered "Yes" o | n Form 990, Part IV, line | e 11e or 11f. See Form 990 |), Part X, |
| line 25. | • | | |
| 1. (a) Description of liability | ty | | (b) Book value |
| (1) Federal income taxes (2) REGULATORY LIABILITY - ASC 980 | | | 0 100 000 |
| | | | 9,100,000 |
| (4) CONSUMER DEPOSITS | | | 6,366,809 |
| (5) DEFERRED CREDITS | | | 887,177 |
| _(=/ | | | 95,860 |
| <u>(6)</u> (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | | | 16,449,846 |
| Liability for uncertain tax positions. In Part XIII, provide the text of the forms of the f | notnote to the organization's fi | nancial statements that same 4-1 | |
| == Lasting for anothern tax positions. In Fait Alli, provide the text of the it | ochole to the organization's fi | nanciai statements that reports t | ile |

6728200 Schedule D (Form 990) 2022 SURRY-YADKIN ELECTRIC MEMBERSHIP 56-0421795 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 60,388,840 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments b Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e Subtract line 2e from line 1 60,388,840 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) 4b c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 60,388,840 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 55,791,795 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d 2e 3 Subtract line 2e from line 1 55,791,795 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII.) 4b 4,597,045 c Add lines 4a and 4b 4,597,045 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 60,388,840 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER PATRONAGE CAPITAL CREDITS 4,597,045

| Schedule D (F | orm 990) 2022 | SURRY-YAL | OKIN ELECTRI | C MEMBERSHIP | 56-0421795 | Page 5 |
|---------------|---------------|---|---------------------|--------------|--------------------------|---------------|
| Part XIII | Suppleme | ntal Information | (continued) | | | |
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SCHEDULE J

(Form 990)

Compensation Information

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SURRY-YADKIN ELECTRIC MEMBERSHIP CORPORATION

Employer identification number

56-0421795

| | | 92-17-1-1 | 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 organization follow a written policy regarding payment | | | |
| | or reimbursement or provision of all of the expenses described above? If "No," complete Part III to | 0000000000 | 0000000000 | 000000000000000000000000000000000000000 |
| | 93 V 91 O 12 Popular Constant Control of Con | 1b | | |
| | explain | | | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all | | | |
| _ | directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line | | | |
| | | | | |
| | 1a? | 2 | | |
| 2 | Indicate which if any of the fallowing the appoint to the LUC | | | |
| 3 | Indicate which, if any, of the following the organization used to establish the compensation of the | | | |
| | organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a | | | |
| | related organization to establish compensation of the CEO/Executive Director, but explain in Part III. | | | |
| | Compensation committee Written employment contract | | | |
| | Independent compensation consultant Compensation survey or study | | | |
| | Form 990 of other organizations X Approval by the board or compensation committee | | | |
| | | | | |
| 4 | During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing | | | |
| | organization or a related organization: | | | |
| а | Receive a severance payment or change-of-control payment? | 4a | | X |
| b | Participate in or receive payment from a supplemental nonqualified retirement plan? | 4b | | Х |
| С | Participate in or receive payment from an equity-based compensation arrangement? | 4c | | х |
| | If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III. | | | |
| | | | | |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | | |
| 5 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any | | | |
| | compensation contingent on the revenues of: | | | |
| а | | F-0 | | |
| | | 5a | | |
| | Any related organization? If "Yes" on line 5a or 5b, describe in Part III. | 5b | | |
| | in residifilite 3a of 3b, describe in Part III. | | | |
| c | For personne listed on Form 2000, Port VIII, Continue A. Fine A. Fine A. Fine II. | | | |
| 6 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any | | | |
| | compensation contingent on the net earnings of: | | | |
| | The organization? | 6a | | |
| b | Any related organization? | 6b | | |
| | If "Yes" on line 6a or 6b, describe in Part III. | | | |
| | | | | |
| 7 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed | | | |
| | payments not described on lines 5 and 6? If "Yes," describe in Part III | 7 | | |
| 8 | Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject | | | |
| | to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe | | | |
| | in Part III | 8 | | |
| | | | | |
| 9 | If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in | 600000000000000000000000000000000000000 | s (2000000000000000000000000000000000000 | |
| | Regulations section 53.4958-6(c)? | 9 | | |
| | | | | |

Page 2

56-0421795 SURRY-YADKIN ELECTRIC MEMBERSHIP Schedule J (Form 990) 2022

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

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

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. instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

| | | W-2 and/or 1099-MISC and/or 1099-NEC compensation | 9-NEC compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|-------------------------|-----------------------|---|-------------------------------------|--------------------------------|----------------|----------------------|--|
| (A) Name and Title | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(i)–(D) | in column (B) reported as deferred on prior Form 990 |
| WILLIAM GREGORY PUCKETT | (1) 270,685 | 11,608 | 20,632 | 81,558 | 30,008 | 414,491 | 0 |
| 1 EXECUTIVE VP & GM | (ii) 0 | | 0 | 0 | 0 | 0 | 0 |
| MISTY UTT | (1) 140,604 | 080'9 | 14,449 | 42,504 | 25,623 | 229,260 | 0 |
| 2 VP OF FINANCE & ACCT | (ii) 0 | | 0 | 0 | 0 | 0 | 0 |
| RICKY BOWMAN | (1) 135,325 | 5,880 | 8,459 | 41,375 | 25,532 | 216,571 | 0 |
| 3 VP OF OPERATIONS | (ii) | | 0 | 0 | 0 | 0 | 0 |
| RICHARD BRYON KENNEDY | 130,589 | 5,480 | 6,529 | 35,208 | 12,029 | 189,835 | 0 |
| 4 VP OF MBR SRVC & PUB | (ii) | | 0 | 0 | 0 | 0 | 0 |
| MICAH MILLS | (1) 113,326 | 4,708 | 3,899 | 33,413 | 24,918 | 180,264 | 0 |
| 5 MANAGER OF OPER. | (ii) 0 | | | 0 | | 0 | 0 |
| SAM KIDD | () 112,383 | 3,619 | 8,247 | 23,797 | 24,168 | 172,214 | 0 |
| 6 ENGINEERING TECHNICI | (ii) | | | 0 | 0 | 0 | 0 |
| | (0) | | | | | | |
| 2 | (ii) | | | | | | |
| | (E) | | | | | | |
| ν | 6. | | | | | | |
| 9) | (II) | | | | | | |
| 10 | (II) | | | | | | |
|) (0 | (ii) | | | | | | |
| 12 (0 | (ii) | | | | | | |
| 13 (1 | (ii) | | | | | | |
| () | (ii) | | | | | | |
| (i) (i) | (i) (ii) | | | | | | |
|) (i | (i) | | | | | | |

| Schedule J (Form 990) 2022 SUKKY - YAUKIN ELECTRIC MEMBERSHIP 56-0421/95 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part | Page 3 |
|--|--------|
| for any additional information. PART III - OTHER ADDITIONAL INFORMATION | |
| PART II. LINE 1-WILLIAM GREGORY PUCKETT SECTION B) (III) INCLUDES ACCRUED | |
| LEAVE TIME WHICH IS IN ACCORDANCE WITH THE CORPORATION'S POLICY. | |
| | |
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Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization SURRY-YADKIN ELECTRIC MEMBERSHIP CORPORATION

Employer identification number 56-0421795

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

THE COOPERATIVE HAS MEMBERS AS PROVIDED FOR IN ITS BYLAWS WHICH ARE

INCLUDED AS A PART OF THIS RETURN.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE COOPERATIVE HAS MEMBERS WHO ELECT MEMBERS OF THE GOVERNING BODY AS

PROVIDED FOR IN ITS BYLAWS WHICH ARE INCLUDED AS A PART OF THIS RETURN.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS

CERTAIN DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY MEMBERS

AS PROVIDED FOR IN ITS BYLAWS WHICH ARE INCLUDED AS A PART OF THIS RETURN.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS REVIEWED BY THE BOARD WITH ALL SUPPORTING DOCUMENTATION MADE AVAILABLE TO THEM.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE COOPERATIVE REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES

COMPLIANCE WITH THEIR CONFLICT OF INTEREST POLICY AS PROVIDED FOR

IN ITS POLICY WHICH IS INCLUDED AS A PART OF THIS RETURN.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL SALARIES ARE REVIEWED BY THE BOARD OF DIRECTORS AND FILES ARE MAINTAINED FOR THE REVIEW PROCESS BY WHICH MERIT RAISES ARE GRANTED.

Employer identification number

SURRY-YADKIN ELECTRIC MEMBERSHIP

56-0421795

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

SALARIES ARE REVIEWED BY THE BOARD OF DIRECTORS AND FILES ARE MAINTAINED

FOR THE REVIEW PROCESS BY WHICH MERIT RAISES ARE GRANTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

A COPY OF THE BYLAWS ARE PROVIDED TO NEW MEMBERS. A FINANCIAL STATEMENT IS

PROVIDED TO THE MEMBERS AS A PART OF THE ORGANIZATION'S ANNUAL REPORT.

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM 990 AND FINANCIAL

STATEMENTS ARE AVAILABLE UPON REQUEST AT THE ORGANIZATIONS'S HEADQUARTERS.

FORM 990, PART VII - ADDITIONAL INFORMATION

SYEMC BYLAWS:

SECTION 5.11 - DIRECTOR COMPENSATION.

THE BOARD SHALL DETERMINE THE MANNER AND METHOD OF ANY REASONABLE DIRECTOR REIMBURSEMENT AND COMPENSATION. SUCH COMPENSATION MAY INCLUDE PAYING DIRECTORS A MONTHLY STIPEND AND/OR A FIXED PER DIEM FEE, PLUS DOCUMENTED BUSINESS EXPENSES, AS DETERMINED IN THE BOARD'S REASONABLE DISCRETION, FOR ATTENDING OR ATTENDING TO:

- 1. THE ONGOING NEEDS OF THE COOPERATIVE, DUTIES OF THE POSITION, AND COMMUNICATIONS WITH MEMBERS;
- 2.BOARD MEETING;
- 3. FUNCTION INVOLVING THE COOPERATIVE; OR
- 4.MEETING OF STATE, NATIONAL OR OTHER COOPERATIVE OR INDUSTRY ORGANIZATION,
 OR
- 5. FUNCTION REASONABLY ENHANCING THE DIRECTOR'S ABILITY TO SERVE AS A DIRECTOR.

PAGE 1 OF 2

| SURRY-YADKIN ELECTRIC MEMBERSHIP | 8 | dentification number |
|---|------------|--|
| FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS | EXPLA | NATION |
| ACCUM OTHER COMPREHENSIVE INCOME | \$ | 2,798,759 |
| DONATED CAPITAL | \$ | 4,350 |
| BENEFITS PAID TO MEMBERS | \$ | 4,597,045 |
| CAPITAL RETIREMENT GAINS | \$ | 757,909 |
| CAPITAL CREDIT RETIREMENT | \$ | -2,694,965 |
| TOTAL | \$ | 5,463,098 |
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| | PAGE | 2 OF 2 |

6728200 SURRY-YADKIN ELECTRIC MEMBERSHIP

Federal Statements

FYE: 12/31/2022

56-0421795

Form 990 - Federal General Footnote

Description

SURRY-YADKIN ELECTRIC MEMBERSHIP CORPORATION (SURRY-YADKIN) IS A MEMBER OF A NUMBER OF ORGANIZATIONS WHERE AN SURRY-YADKIN OFFICER OR DIRECTOR MAY SERVE AS SURRY-YADKIN'S REPRESENTATIVE ON THE BOARD OF DIRECTORS. THESE INDIVIDUALS SERVE AT THE PLEASURE OF SURRY-YADKIN AND CAN SERVE ONLY AS LONG AS THEY REPRESENT SURRY-YADKIN. THE FOLLOWING INDIVIDUALS SERVED IN SUCH POSITIONS:

W. GREGORY PUCKETT - CHAIR (DIRECTOR) OF NORTH CAROLINA ELECTRIC MEMBERSHIP CORPORATION (NCEMC); DIRECTOR OF NORTH CAROLINA ASSOCIATION OF ELECTRIC COOPERATIVES, INC. (NCAEC).

LEE VON SPEAKS - DIRECTOR OF NCEMC AND DIRECTOR OF NCAEC (JANUARY - OCTOBER 2022)

KAROLINE OVERBY - DIRECTOR OF NCEMC AND DIRECTOR OF NCAEC (NOVEMBER - DECEMBER 2022)

NCEMC IS A POWER SUPPLIER FOR MOST OF THE STATE OF NORTH CAROLINA'S MEMBER COOPERATIVES. NCEMC PROVIDES RELIABLE, AFFORDABLE AND SAFE ELECTRIC AND RELATED SERVICES INCLUDING OPERATION OF A LOAD MANAGEMENT SYSTEM, POWER SUPPLY PLANNING AND DEMAND SIDE MANAGEMENT PLANNING.

NCAEC IS A MEMBER-OWNED COOPERATIVE OF 26 ELECTRIC MEMBERSHIP COOPERATIVES IN NORTH CAROLINA. NCAEC PROGRAMS SERVE THE NEEDS OF THEIR MEMBER COOPERATIVES INCLUDING:

- -GOVERNMENT RELATIONS
- -MONTHLY MAGAZINE PUBLISHED FOR CONSUMER-MEMBERS
- -TRAINING PROGRAMS AND CONFERENCES FOR COOPERATIVE DIRECTORS, MANAGERS AND STAFF
- -YOUTH SCHOLARSHIPS, EDUCATION PROGRAMS AND TOURS
- -SAFETY AND JOB TRAINING FOR LINE WORKERS
- -STRATEGIC COMMUNICATIONS PLANNING, ADVERTISING AND BRANDING, AND COMMUNITY RELATIONS EFFORTS ON BEHALF OF THE MEMBER COOPERATIVES.

FORM 990, PART VIII

THE CORPORATION'S DEFERRED REVENUE PLANS WERE PREVIOUSLY APPROVED BY THE RURAL UTILITIES SERVICE AND ADHERE TO U.S.GAAP UNDER ASC 980. THE FORM 990 DOES NOT RECOGNIZE ASC 980. THE CORPORATION DID NOT RECOGNIZE OR DEFER ANY REVENUES UNDER ASC 980 IN 2022.

SCHEDULE D, PART XII, LINE 4B (DISCLOSURE FOR SCHEDULE D, PART XIII) FORM 990 REQUIRES 501(C)(12) ORGANIZATIONS TO REPORT PATRONAGE CAPITAL CREDITS AS AN EXPENSE. U.S. GAAP DOES NOT RECOGNIZE THIS AMOUNT AS AN EXPENSE. THE RESULT WAS \$4,597,045 MORE EXPENSE ON FORM 990, PART IX THAN REPORTED IN THE AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2022.