Form 8879-TF

THIS IS NOT A FILEABLE COPY ***** IRS e-file Signature Authorization for a Tax Exempt E

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For calendar year 2021, or fiscal year beginning

, 2021, and ending

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of filer

▶ Do not send to the IRS. Keep for your records. ► Go to www.irs.gov/Form8879TE for the latest information.

EIN or SSN Touchstone Energy Cooperative, Inc. 54-1978503

Name and title of officer or person subject to tax Digna Louis

Asst Secretary/Treasurer

Part I Type of Return and Return Information
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Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, 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)	_. 1ь <u>9,798,586</u> .
2a	Form 990-EZ check here >	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a	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 V, line 5)	4b
5a	Form 8868 check here	b Balance due (Form 8868, line 3c)	5b
6a	Form 990-T check here	b Total tax (Form 990-T, Part III, line 4)	6b
7a	Form 4720 check here	b Total tax (Form 4720, Part III, line 1)	. 7b
8a	Form 5227 check here	b FMV of assets at end of tax year (Form 5227, Item D)	8b
9a	Form 5330 check here	b Tax due (Form 5330, Part II, line 19)	9b
10a	Form 8038-CP check here	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b
Part	II Declaration and Signat	ure Authorization of Officer or Person Subject to Tax	
Jnder p	penalties of perjury, I declare that $oxed{X}$	I am an officer of the above entity or I am a person subject to tax with res	spect to (name
of entity	<i></i>	, (EIN) and that I hav	e examined a copy of the
2021 el	ectronic return and accompanying sch	edules and statements, and, to the best of my knowledge and belief, they are tr	rue, correct, and

2021 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 electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the 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 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 electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN	: che	ck o	ne b	ox o	nly
-----	-------	------	------	------	-----

X I authorize	NATIONAL	RURAL	ELECTRIC	COOPRATIVE	 to enter my PIN	
			FRO firm	name		Enter five numbers, b

do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have 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/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have 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/State program, I will enter my PIN on the return's disclosure consent screen.

gnature of officer or person subject to tax ▶ **** THIS IS NOT A FILEABLE COPY ****

Certification and Authentication

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

545394 Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return 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

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

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

Form **8879-TE** (2021)

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

▶ 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.

Department of the Treasury Internal Revenue Service

Open to Public Inspection

A 1	OI LITE	zozi calelluai yeai, oi tax yeai begiillilig	anu	enung	_			
В	Check if applicable	C Name of organization			D Employe	er identific	ation number	
	Addres	Touchstone Energy Coope:	rative, Inc.					
	Name change	Doing business as	54-3	197850)3			
	Initial return	Number and street (or P.O. box if mail is not deliv	ered to street address)	Room/suite	E Telephor	ne number		
	Final return/	4301 Wilson Blvd.	,		703	-907-6	5354	
	termin- ated	City or town, state or province, country, and ZI	P or foreign postal code		G Gross recei	pts\$	9,798	,586.
	Ameno		50 ° '		H(a) Is this	a group re		
F	Application					ordinates?		X No
	pendin	9 4301 Wilson Blvd, Arling			1		cluded? Yes	
T-	Гах-ехе	empt status: 501(c)(3) X 501(c) (6)		or 527	7		list. See instruct	
		e: https://touchstoneenergy		<u> </u>	7		n number 🕨	
			ociation Other	I Year			State of legal dor	micile: VA
Pa	art I	Summary		L 1001	or formation;		Clate of logar dor	1110110, 1
	_	Briefly describe the organization's mission or most si	onificant activities: TOUC	hstone	Energy	z Coop	erative.	
çe	'	Inc. helps its members stre						
Jan	2	Check this box if the organization discont						
Je.	3	Number of voting members of the governing body (P				1 _ 1	Ct3.	13
ģ	4	Number of independent voting members of the gove	. , , , , , , , , , , , , , , , , , , ,					13
જ	5	Total number of individuals employed in calendar yea						0
ties	6	Total number of volunteers (estimate if necessary)						70
Activities & Governance	7.	Total unrelated business revenue from Part VIII, colu					26	,221.
Ac	' a	•	. ,,				20	0.
_	В	Net unrelated business taxable income from Form 99	90-1, Part I, line 11				Cumant V	
		Operation times and supports (Dout VIII line 41s)			Prior Yea		Current Y 9,361	
ne	8					,395.		,177.
len/	9					, 285.		,177. ,198.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, a			110			
	ייין	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9		10,240	0.	9,798	<u>,009.</u>	
		Total revenue - add lines 8 through 11 (must equal P	10,240		9,198			
	1	Grants and similar amounts paid (Part IX, column (A)				0.		0.
	1	Benefits paid to or for members (Part IX, column (A),			0.			
es	15	Salaries, other compensation, employee benefits (Pa				0.		0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line				0.		0.
ď	. b	Total fundraising expenses (Part IX, column (D), line 2	' '	0.		24.2	0 450	
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 1			8,800		9,473	
		Total expenses. Add lines 13-17 (must equal Part IX,			8,800		9,473	
	19	Revenue less expenses. Subtract line 18 from line 12) 		1,439			,003.
S OF				Be	eginning of Cur		End of Ye	
sset	20				9,757			,200.
Net Assets or	21	Total liabilities (Part X, line 26)			1,976		3,596	
Ž	22	Net assets or fund balances. Subtract line 21 from lin	ne 20		7,780	,661.	8,105	<u>,664.</u>
	art II	Signature Block						
		lties of perjury, I declare that I have examined this return, in				-	knowledge and be	lief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer)	is based on all information of wh	nich preparer	has any knowle	edge.		
Sig	n	Signature of officer			Date)		
Her	·e	Digna Louis, Asst Secret	tary/Treasurer					
		Type or print name and title			_			
		Print/Type preparer's name	Preparer's signature		Date	Check If	PTIN	
Paid	i					self-employe	d	
Pre	parer	Firm's name			Firm	n's EIN 🛌		
Use	Only	Firm's address ▶						
					Pho	ne no.		
Ma	v the IF	RS discuss this return with the preparer shown above	? See instructions				Yes	No

Other program services (Describe on Schedule O.)

Total program service expenses

including grants of \$

Form 990 (2021)

) (Revenue \$

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	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		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	۰		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		1
8	, ,			x
•	Schedule D, Part III	8		
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?			3,7
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			l
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	<u> </u>		
•	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	-		
124	Schedule D, Parts XI and XII	12a	Х	
h	,	IZa	21	_
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	106		x
40	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	12b		X
13	Did the appropriation projection of the control of the United Obstace	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
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			3,7
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			l
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
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. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	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? 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		Х
b		20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		х

- 0	Continued)		Yes	No			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	NO			
22		22		x			
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current						
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete						
	· · ·	23		x			
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			<u> </u>			
ZTU	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			
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease						
·	any tax-exempt bonds?	24c		1			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit						
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and						
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete						
	Schedule L, Part I	25b					
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current						
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%						
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х			
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			1			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х			
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,						
	instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If						
	"Yes," complete Schedule L, Part IV						
b	b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV						
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If						
	"Yes," complete Schedule L, Part IV	28c		X			
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						
	contributions? If "Yes," complete Schedule M	30		X			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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						
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and						
	Part V, line 1	34		X			
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X			
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity						
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1			
~=	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>			
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			x			
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37					
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		Х				
Pai	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance	38	- 22				
	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						
	Enter the number of Forms W-2G included on 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					
132004	‡ 12-09-21	Form	990	(2021)			

54-1978503 Part 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **b** If "Yes," has it filed a Form 990-T for this year? *If* "No" to line 3b, provide an explanation on Schedule O Х 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O.

> 5 Form **990** (2021)

Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

If "Yes," complete Form 6069

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

	Check if Schedule O contains a response or note to any line in this Part VI					X		
Sec	tion A. Governing Body and Management							
					Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	13					
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.							
b	Enter the number of voting members included on line 1a, above, who are independent	1b	13					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other					
	officer, director, trustee, or key employee?			2		Х		
3	Did the organization delegate control over management duties customarily performed by or under the	direc	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 99			4		Х		
5	Did the organization become aware during the year of a significant diversion of the organization's asset	ets?		5		X		
6	Did the organization have members or stockholders?			6	X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point (one or					
	more members of the governing body?			7a	X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto							
	persons other than the governing body?			7b	X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year							
а	The governing body?			8a	Х			
b	Each committee with authority to act on behalf of the governing body?			8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read							
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev							
			,		Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10a		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such characteristics.	apters	, affiliates,					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х			
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.							
12a								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	licts?	12b	X			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe					
	on Schedule O how this was done			12c	X			
13	Did the organization have a written whistleblower policy?			13	Х	<u> </u>		
14	Did the organization have a written document retention and destruction policy?			14	Х			
15	Did the process for determining compensation of the following persons include a review and approval	by in	dependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official			15a		X		
b	Other officers or key employees of the organization			15b		X		
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nent w	th a					
	taxable entity during the year?			16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	e its p	articipation					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	's					
_	exempt status with respect to such arrangements?			16b				
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► None							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	d 990	T (section 501(c)(3)	s only)	availal	ble		
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website Another's website X Upon request Other (explain							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	nflict c	f interest policy, an	d finan	cial			
	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	records					
	Dustin Young c/o NRECA - 703-907-6554							
	4301 Wilson Blvd, Arlington, VA 22203-1860							

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

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

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

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

X Check this box if neither the organization r	nor any related	orga	niza	tion	con	nper	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		າ than d	nne	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation	amount of
	week	—	Ceran	lu a u	recto	I I I I I I	lee)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	mper		1099-NEC)	10001120)	and related
	below	idual	tution	e e	Key employee	est co loyee	Je.	· ·		organizations
	line)	Indiv	Insti	Officer	Key	Highest compensated employee	Former			
(1) Jack Bragg	1.00								_	_
Director		Х		Х				0.	0.	0.
(2) Deborah Mirasola	2.00	1							_	_
Director/President		Х		Х				0.	0.	0.
(3) Jennifer Goss	1.00	1							_	_
Director/Vice President		Х		Х				0.	0.	0.
(4) Veneicia Lockhart	0.10									_
Asst. Secretary-Treasurer				Х				0.	0.	0.
(5) Kevin Bernson	1.00									_
Director		Х						0.	0.	0.
(6) Jim Gossett	1.00	ļ								
Director	1	Х						0.	0.	0.
(7) Lou Green	1.00	ļ								
Director	1	Х						0.	0.	0.
(8) Marty Haught	1.00	ļ								
Director	1	Х						0.	0.	0.
(9) Jeremy Richert	1.00	l								
Director	1 00	Х						0.	0.	0.
(10) Dick Johnson	1.00	١.,								
Director	1 00	Х						0.	0.	0.
(11) Tim McCarthy	1.00	٠,							_	
Asst. Secretary-Treasurer	1.00	Х						0.	0.	0.
(12) Marty Lasure Director	1.00	х						0.	0.	0.
(13) Geoff Oldfather	1.00	^						· ·	0.	· ·
Director	1.00	x						0.	0.	0.
(14) Jana Adams	40.00	^						· ·	0.	.
Executive Director	40.00	-		х				0.	0.	0.
(15) Doug Tracy	1.00			^				0.	0.	<u></u>
Director	1.00	X						0.	0.	0.
(16) Jeffrey Connor	0.50	125						•	<u> </u>	•
Interim Executive DIrector	1 30	1		х				0.	0.	0.
				 ^`	\vdash			†	•	· ·
		1								
								L		

Form 990 (2021)

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) Name and business address	(B) Description of services	(C) Compensation
Assembly, One World Trade Center Floor 67,		
New York, NY 10007	Ad Agency	1,882,937.
LinkedIn Corporation, 62228 Collections	Professional	
Center Dr, Chicago, IL 60693	development content	617,100.
Harvest Creative Services	Produce Advertising	
1011 N Washington Ave., Lansing, MI 48906	spots	423,977.
ACSI LLC	Consumer	
3916 Ranchero Drive, Ann Arbor, MI 48108	Satisfaction Surveys	302,750.
Appnovation USA Inc., 200 Madison Avenue,		
Suite 2100, New York, NY 10016	Computer Services	212,126.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization		

Form 990 (2021)

. u	1 L V	····		or note to any lin	o in this Dort VIII			
			Check if Schedule O contains a response	e or note to any iin	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512 - 514
	4.	_	Forderstand communication and a second					300000113 0 12 0 14
ants	1 7		Federated campaigns 1a	,361,202.				
يق و	'			,301,202.	1			
Ţŝ,	•		Fundraising events 1c		-			
ਫ਼ੵਫ਼	•		Related organizations 1d		1			
ns,	(Government grants (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	1	f	All other contributions, gifts, grants, and					
			similar amounts not included above 1f					
d de	9	_	Noncash contributions included in lines 1a-1f		0 261 000			
<u>೧</u> <u></u>		h	Total. Add lines 1a-1f		9,361,202.			
				Business Code	160 105	160 105		
မွ	2 8	а	Website Design	541511	162,125.			
ē Š			Professional Developme	611430	158,659.	158,659.		
Scu			Co-op Connections Prog	541990	26,221.		26,221.	
ev ev	(d	Other Professional Ser	541990	4,172.	4,172.		
Program Service Revenue		е						
₫	1	f	All other program service revenue					
		g	Total. Add lines 2a-2f)	351,177.			
	3		Investment income (including dividends, inte	rest, and				
			other similar amounts)		54,198.	54,198.		
	4		Income from investment of tax-exempt bond	proceeds				
	5 Royalties				32,009.			32,009.
			(i) Real	(ii) Personal				
	6 a	а	Gross rents 6a					
	- 1	b	Less: rental expenses 6b					
	(С	Rental income or (loss) 6c					
		d	Net rental income or (loss)					
	7 8	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
	ı	b	Less: cost or other basis					
ne			and sales expenses 7b					
Ven		С	Gain or (loss)7c					
Revenue		d	Net gain or (loss))				
Ē	8 8	а	Gross income from fundraising events (not					
₹			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18	а				
	ı	b	Less: direct expenses8	b				
	(С	Net income or (loss) from fundraising events	_				
			Gross income from gaming activities. See					
			Part IV, line 19	а				
	- 1	b	Less: direct expenses	b				
			Net income or (loss) from gaming activities_					
	10 a	а	Gross sales of inventory, less returns					
			and allowances 10)a				
	1	b	Less: cost of goods sold)b				
			Net income or (loss) from sales of inventory	>				
				Business Code				
Miscellaneous Revenue	11 a	а						
ine nue	ı	b						
		С						
is R		d	All other revenue					
2	(Total. Add lines 11a-11d					
	12		Total revenue. See instructions		9,798,586.	379,154.	26,221.	32,009.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses **(D)** Fundraising Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): 4,373,187. Management 13,911. Legal 15,900. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 246,710. column (A), amount, list line 11g expenses on Sch O.) 2,480,852. Advertising and promotion 12 731,841. Office expenses 13 540,300. Information technology 14 Royalties 15 16 Occupancy 53,344. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 172,489. Conferences, conventions, and meetings 19 20 Payments to affiliates _____ 21 129,823. Depreciation, depletion, and amortization 22 27,353. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 306,869. Research Consulting Fees 187,690. 112,846. Contracted Personnel 44,017. Telephone, Postage and 36,451. e All other expenses 9,473,583. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	9,262,806.	4	11,039,392.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
Assets	6	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	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
Ą	9	Prepaid expenses and deferred charges	112,593.	9	387,023.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,139,303.			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation 10a 1,139,303. 10b 863,518.	381,733.	10c	275,785.
	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	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	9,757,132.	16	11,702,200.
	17	Accounts payable and accrued expenses	129,019.	17	120,611.
	18	Grants payable		18	
	19	Deferred revenue	1,847,452.	19	3,475,925.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ģ	22	Loans and other payables to any current or former officer, director,			
<u>I</u> tie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
=	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		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 Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,976,471.	26	3,596,536.
		Organizations that follow FASB ASC 958, check here			
ces		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions		27	
Ва	28	Net assets with donor restrictions		28	
pur		Organizations that do not follow FASB ASC 958, check here X			
Ę		and complete lines 29 through 33.			
S O	29	Capital stock or trust principal, or current funds	0.	29	0.
set	30	Paid-in or capital surplus, or land, building, or equipment fund	0.	30	0.
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	7,780,661.	31	8,105,664.
Net	32	Total net assets or fund balances	7,780,661.	32	8,105,664.
	33	Total liabilities and net assets/fund balances	9,757,132.	33	11,702,200.

Pai	T XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,79		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,47		
3	Revenue less expenses. Subtract line 2 from line 1	3	32	5,0	03.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,78	0,6	<u>61.</u>
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	8,10	5,6	64.
Par	t XII Financial Statements and Reporting				
	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:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	$oxed{oxed}$
	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	$oxed{oxed}$
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Forn	990	(2021)

132012 12-09-21

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			· · · · · · · · · · · · · · · · · · ·	loyer identification number
	Touchst	one Energy Coope	rative, Inc.	•	54-1978503
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		> \$	
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶\$	
	Enter the amount of any excise tax				
	If the organization incurred a section				
48	a Was a correction made?				Yes No
_	If "Yes," describe in Part IV.				\ (-)
Pa	art I-C Complete if the org	anization is exempt und	er section 501(c),	except section 501(c	<u>)(3).</u>
	Enter the amount directly expended	, ,	·		
2	Enter the amount of the filing organ				
_	exempt function activities				
3	Total exempt function expenditures			•	
	line 17b				
	3 3				
5	Enter the names, addresses and en made payments. For each organizar	• •			
	contributions received that were pro	·			•
	political action committee (PAC). If			•	3 3
	(a) Name	(b) Address	(o) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Sche	edule C (Form 990) 2021 rt II-A Complete if the orga	<u> </u>	tone	Energy Coope	erative, Inc	54-1	1978503 Page 2
Pa	-	anizatior	is exen	npt under section	501(c)(3) and file	ed Form 5768 (el	ection under
	expenses, and share	e of excess	lobbying e	• •		group member's nan	ne, address, EIN,
<u>в</u> с	check 🕨 💹 if the filing organizat	tion checke	d box A ar	nd "limited control" pro	visions apply.		T
		s on Lobby		nditures ınts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influ	ence public	opinion (grassroots lobbying)			
b	Total lobbying expenditures to influ	ence a legi	slative boo	ly (direct lobbying)			
С	: Total lobbying expenditures (add lir	nes 1a and	1b)				
d	I Other exempt purpose expenditure	s					
е	Total exempt purpose expenditures	s (add lines	1c and 1d)			
f	Lobbying nontaxable amount. Ente	r the amou	nt from the	e following table in both	n columns.		
	If the amount on line 1e, column (a) or	r (b) is:	The lob	bying nontaxable amo	ount is:		
	Not over \$500,000		20% of	the amount on line 1e.			
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.						
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.			ess over \$1,000,000.			
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.			ss over \$1,500,000.			
	Over \$17,000,000		\$1,000,	000.			
_	Grassroots nontaxable amount (ent		,				
	Subtract line 1g from line 1a. If zero						
i	Subtract line 1f from line 1c. If zero	or less, en	ter -0				
j	If there is an amount other than zer	o on either	line 1h or	line 1i, did the organiza	ation file Form 4720		
	reporting section 4911 tax for this y	/ear?					Yes No
	(Some organizations th	at made a	section 50	eraging Period Under 01(h) election do not l ate instructions for lin	nave to complete all o	of the five columns b	pelow.
		Lobby	/ing Expe	nditures During 4-Yea	r Averaging Period		_
	Calendar year (or fiscal year beginning in)	(a) 2	018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
<u>C</u>	: Total lobbying expenditures						
	Grassroots nontaxable amount						
	Grassroots ceiling amount (150% of line 2d, column (e))						

Schedule C (Form 990) 2021

Schedule C (Form 990) 2021 Touchstone Energy Cooperative, Inc. 54-19785 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description (a)		(a)		(b)	
of the lobbying activity.			No	Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state, or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of:					
а	Volunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?	_				
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?	+				
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	+				
	Other activities?					
	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	(a)(E)		1:		
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(C)(5),	or sec	tion		
ar	5U1(C)(b).					
art	501(c)(6).			Yes	N	
			1	Yes		
1	Were substantially all (90% or more) dues received nondeductible by members?			Yes X		
1 2 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior till-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No"	year? (c)(5),	2 3 or sec	X	3, is	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

Touchstone Energy Cooperative, Inc.

Employer identification number 54-1978503

Total number at end of year 2 Aggregate value of grants from (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 5 Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? 6 Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in grants, some, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit of the donor advisor, or for any other purpose conferring impermissible private benefit of the donor advisor, or for any other purpose conferring impermissible private benefit of the donor advisor, or for any other purpose conferring impermissible private benefit of the donor advisor, or for any other purpose conferring impermissible private branch and the preservation of a conservation assertments benefit of the organization assertation of a conservation of the first private and p	Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	r Accounts. Complete if the
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

	dule D (Form 990) 2021 Touchsto	ne Energy	Coor	perati	ve, Ind	C •		54-1	<u> 97850</u> :	3 Pa	age 2
Pai	t III Organizations Maintaining Co	llections of A	t, Histo	orical Tre	easures, o	r Othe	r Sim	nilar Asso	ets _{(contir}	nued)	
3	Using the organization's acquisition, accessio	n, and other record	ls, check	any of the f	following tha	t make s	ignific	ant use of i	ts		
	collection items (check all that apply):										
а	Public exhibition		d 🗌	Loan or exc	hange progr	am					
b	Scholarly research		е 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's col	lections and explai	n how th	ey further th	ne organizati	on's exer	mpt pu	urpose in P	art XIII.		
5	During the year, did the organization solicit or	receive donations	of art, his	storical treas	sures, or oth	er similar	asset	S			
	to be sold to raise funds rather than to be mai								Yes		No
Par	t IV Escrow and Custodial Arrang		ete if the	organizatio	n answered	"Yes" on	Form	990, Part I	V, line 9, or		
	reported an amount on Form 990, Part	X, line 21.									
1a	Is the organization an agent, trustee, custodia		•								_
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fo	llowing to	able:			_				
							_ <u> </u> _		Amoun	t	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
	Did the organization include an amount on Fo						lity?		Yes		No
Par	If "Yes," explain the arrangement in Part XIII.										
Pai	T V Endowment Funds. Complete if							roo vooro bo	ok (a) Four	. vooro	hook
		(a) Current year	(B) P	rior year	(c) Two yea	ars back	(a) 11	iree years ba	ck (e) Four	years	Dack
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
a	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 curre	•	, •	j, column (a)) neid as:						
a	Board designated or quasi-endowment		%								
b	Permanent endowment ► Term endowment ► 9										
C	The percentages on lines 2a, 2b, and 2c shou	•									
22	Are there endowment funds not in the posses	•	ation that	t are hold ar	ad administa	rod for th	o ora	anization			
Sa		sion of the organiz	alion ina	t are rielu ar	iu auministe	ileu ioi ti	ie orga	ariizatiori	1	Yes	No
	by: (i) Unrelated organizations								3a(i)		
	(ii) Related organizations										
h	If "Yes" on line 3a(ii), are the related organizat	ione lietad ae raqui	red on Sc	chedule R2					3b		
4	Describe in Part XIII the intended uses of the										
_	t VI Land, Buildings, and Equipme		AVIIIOITE II	ariao.							
	Complete if the organization answered		0, Part IV	, line 11a. S	See Form 990	D, Part X,	line 1	0.			
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) A	ccum	ulated	(d) Boo	k valu	—— е
	2 222p. 31 proporty	basis (invest		` '	(other)	1 , ,	precia		(2, 200		-
1a	Land	<u> </u>	•		,						
b	Buildings										
c	Leasehold improvements		390.				194	,131.	6	6,2	59.
d	Equipment	0.00						,387.	20	9,5	26.
	Other										

275,785.
Schedule D (Form 990) 2021

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B). line 10c.)

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990. Part X. col. (B) line 25.)	

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

Schedule D (Form 990) 2021

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements		1		9,473,583.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e	•	0.
3	Subtract line 2e from line 1		3		9,473,583.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b		4c	:	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5		9,473,583.

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 X, Line 2:

TSEC has adopted the accounting standard on accounting for uncertainty in income taxes, which addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Under this guidance, TSEC may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authorities, based on the technical merits of the position. The tax benefits recognized in the financial statements from such a position are measured based on the largest benefit that has a greater than 50% likelihood of being realized upon ultimate settlement. The guidance on accounting for uncertainty in income taxes also addresses de-recognition,

Schedule D (Form 990) 2021

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or Form 990-EZ.

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

2021
Open to Public Inspection

Name of the organization

Touchstone Energy Cooperative, Inc.

Employer identification number 54-1978503

Form 990, Part I, Line 1, Description of Organization Mission:

member-owners. It is a national network of electric cooperatives across

45 states that provides research, communications resources, and

employee training programs to help member cooperatives better engage

and serve their members. As a result, Touchstone Energy members are

positioned to achieve superior member-owner satisfaction and engagement

to strengthen the member cooperative, the community they serve, and the

electric cooperative community at large. Through access to targeted

programs and a unifying, national brand, Touchstone Energy cooperatives

stand out as a trusted source of power and information to their 30

million member-owners every day.

Form 990, Part VI, Section A, line 1a:

The board has an executive committee made up of the president, vice president, secretary/treasurer, second vice president, immediate past president if still a director, and an at-large director elected by the board. The executive committee is authorized to approve non-budgeted expenses up to \$200,000. The Second Vice President is a non-voting member of the committee.

Form 990, Part VI, Section A, line 3:

TSEC has a written agreement with National Rural Electric Cooperative

Association (NRECA), a seperate non-profit organization, to provide

administrative and management services to TSEC.

Form 990, Part VI, Section A, line 6:

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

Schedule O (Form 990) 2021

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization

Employer identification number 54-1978503

Touchstone Energy Cooperative, Inc.

The members of TSEC are: 1) full members, 2) regional members, and 3) any other types or classes of membership ("associate members"), with respective rights, responsibilities, and dues as the board of directors may from time to time establish in the best interest of the organization.

Form 990, Part VI, Section A, line 7a:

TSEC has 13 board members. They elect a President, Vice-President,

Secretary/Treasurer, Assistant Treasurer, Second Vice-President and an

Officer At-Large.

Form 990, Part VI, Section A, line 7b:

The organization is incorporated under the Virginia Cooperative

Associations and Non-Stock Corporations Acts. Under the organization's

articles of incorporation and bylaws, there are three classes of members;

full members, regional members and associate members. Full members and

regional members have voting rights. Under Non-Stock Corporation Act, the

members of the organization must approve a plan of merger recommended by

the board or a board proposal to dissolve the organization. Additionally,

the organization's bylaws require that an amendment or repeal of any bylaw

must be approved by a two-thirds majority vote of the voting members.

Form 990, Part VI, Section B, line 11b:

The Director of Corporate Accounting and Senior VP of Finance review the

Form 990 and supporting work papers in detail. The Form 990 is then

provided to the TSEC Board of Directors through their electronic portal and also by email for their review and comment in advance of the return being filed.

<u>Schedule O (Form 990) 2021</u> Page **2**

Name of the organization
Touchstone Energy Cooperative, Inc.

Employer identification number
54-1978503

Form 990, Part VI, Section B, Line 12c:

The policy is monitored and enforced by review of the annual conflicts

disclosure forms submitted by each Board member. Additionally, legal

counsel reviews the requirements of the policy with the Board at least

annually and is available for questions regarding potential conflicts and

policy interpretation at any time. Further, regarding the policy:

--The conflict of interest policy applies to the board members

--Actual conflicts are reviewed by the Board President with the assistance

of legal counsel

--Restrictions that may be imposed in the event of an actual conflict,

depend on the magnitude of the conflict and include: prohibiting the board

member with the conflict from participating in the deliberations and

recusal from voting.

Form 990, Part VI, Section B, Line 15:

Since TSEC does not have any employees, TSEC does not have a compensation determination process. The Board of Directors does approve the annual expenses paid to its outside management company via their annual budget review and approval process.

Form 990, Part VI, Section C, Line 19:

TSEC distributes its audited financial statements and annual Form 990 tax
returns to the TSEC Board of Directors. TSEC makes the Form 990 available
on the member-only section of Cooperative.com. The conflict of interest
policy is reviewed annually with board members.