

Public Disclosure Copy

Form **8868**
(Rev. January 2024)

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

**File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.**

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

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

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. EAST RIVER ELECTRIC POWER COOPERATIVE, INC.	Taxpayer identification number (TIN) 46-0225402
	Number, street, and room or suite no. If a P.O. box, see instructions. 211 S. HARTH AVE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MADISON, SD 57042	

Enter the Return Code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **BARBARA STROM**
211 S. HARTH AVE - MADISON, SD 57042

Telephone No. **(605) 256-8081** Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 **23** or
 tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

Form **8868** (Rev. 1-2024)

EXTENDED TO NOVEMBER 15, 2024

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2023

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2023 calendar year, or tax year beginning and ending

B Check if applicable: C Name of organization EAST RIVER ELECTRIC POWER COOPERATIVE, INC. D Employer identification number 46-0225402 E Telephone number (605) 256-4536 G Gross receipts \$ 356,938,059. H(a) Is this a group return for subordinates? H(b) Are all subordinates included? I Tax-exempt status: J Website: WWW.EASTRIVER.COOP K Form of organization: L Year of formation: 1949 M State of legal domicile: SD

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1-7a Activities & Governance, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

Part II 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.

Sign Here: Signature of officer ROBERT SAHR, CEO/GENERAL MANAGER. Date. Paid: Print/Type preparer's name LAURIE HANSON, CPA. Preparer's signature LAURIE HANSON, CPA. Date 11/04/24. PTIN P00851848. Preparer Use Only: Firm's name EIDE BAILLY LLP. Firm's address 345 N. REID PL., STE. 400 SIOUX FALLS, SD 57103-7034. Firm's EIN 45-0250958. Phone no. 605-339-1999.

May the IRS discuss this return with the preparer shown above? See instructions. [X] Yes [] No

EAST RIVER ELECTRIC POWER COOPERATIVE, INC.

Form 990 (2023)

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: EAST RIVER ELECTRIC POWER COOPERATIVE EXISTS TO ENHANCE THE VALUE OF ITS MEMBERS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$) EAST RIVER ELECTRIC POWER COOPERATIVE IS A WHOLESALE ELECTRIC POWER SUPPLY COOPERATIVE SERVING 24 RURAL ELECTRIC COOPERATIVES AND ONE MUNICIPALLY-OWNED ELECTRIC SYSTEM, WHICH IN TURN SERVES MORE THAN 93,000 HOMES AND BUSINESSES AND ABOUT 250,000 CONSUMERS. THE COOPERATIVE OPERATES AND MAINTAINS 3,236 MILES OF HIGH VOLTAGE TRANSMISSION LINE, 261 SUBSTATIONS AND RELATED FACILITIES TO SERVE AN AREA OF 40,000 SQUARE MILES THAT COVERS THE RURAL AREAS OF 41 COUNTIES IN EASTERN SOUTH DAKOTA AND 22 COUNTIES IN WESTERN MINNESOTA. EAST RIVER IS ALSO A TRANSMISSION OWNER IN THE SOUTHWEST POWER POOL.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses

EAST RIVER ELECTRIC POWER COOPERATIVE, INC.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21, with sub-questions a-f for items 11, 12, and 20. 'X' marks are present in the Yes/No columns for various items.

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Form 990 (2023)

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part 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		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

EAST RIVER ELECTRIC POWER COOPERATIVE, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes rows for employee counts (2a), tax returns (2b), unrelated business income (3a), foreign accounts (4a), prohibited transactions (5a-5c), annual gross receipts (6a-6b), deductible contributions (7), sponsoring organizations (8-9), and other IRS filings (10-17).

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

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

Section 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 22 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 22		
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	X
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	X
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	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	X
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 reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		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 chapters, 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 form?	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 rise to conflicts?	12b	X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X
13	Did the organization have a written whistleblower policy?	13	X
14	Did the organization have a written document retention and destruction policy?	14	X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	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 with 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 its 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	

Section 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 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website 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 interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
BARBARA STROM - (605) 256-8081
211 S. HARTH AVE, MADISON, SD 57042

EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT SAHR CEO/GENERAL MANAGER	47.00			X			545,859.	0.	150,740.	
(2) SCOTT SHEWEY CHIEF FINANCIAL OFFICER	44.00			X			337,928.	0.	74,814.	
(3) ELIZABETH AVERY, CHIEF HUMAN RESOURCES OFFICER	41.00					X	205,086.	0.	167,502.	
(4) JEFFREY MAY CHIEF INFORMATION OFFICER	44.00					X	234,084.	0.	126,768.	
(5) MARK HOFFMAN CHIEF OPERATIONS OFFICER	41.00			X			260,959.	0.	85,339.	
(6) CHRIS STUDER, CHIEF MEMBER & PUBLIC RELATIONS	45.00					X	236,360.	0.	65,898.	
(7) MICHAEL JASPERS BUSINESS DEVELOPMENT DIRECTOR	42.00					X	230,291.	0.	56,504.	
(8) DANIEL BROWN GENERAL COUNSEL	44.00					X	204,050.	0.	41,255.	
(9) DUANE WOLBRINK SECRETARY	4.00	X		X			18,932.	0.	0.	
(10) BERT ROGNESS TREASURER	3.00	X		X			18,658.	0.	0.	
(11) DARREL RASCHKE DIRECTOR	3.00	X					18,121.	0.	0.	
(12) ALAN HINDERMAN DIRECTOR	3.00	X					18,057.	0.	0.	
(13) DARREN STRASSER DIRECTOR	3.00	X					18,020.	0.	0.	
(14) GARY BACHMAN DIRECTOR	3.00	X					17,478.	0.	0.	
(15) JAMES RYKEN PRESIDENT	3.00	X		X			17,249.	0.	0.	
(16) DOUG DIEKMANN DIRECTOR	3.00	X					16,899.	0.	0.	
(17) JEFF HUFFORD DIRECTOR	3.00	X					16,581.	0.	0.	

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KIRK SCHAUNAMAN DIRECTOR	3.00	X						16,237.	0.	0.
(19) DAVID NEUGEBAUER DIRECTOR	3.00	X						16,141.	0.	0.
(20) JOHN OSTRAAT DIRECTOR	3.00	X						15,682.	0.	0.
(21) RODNEY DEMENT DIRECTOR	3.00	X						15,107.	0.	0.
(22) PAUL VOIGT DIRECTOR	3.00	X						15,049.	0.	0.
(23) ALAN VEDVEI VICE PRESIDENT	3.00	X		X				14,704.	0.	0.
(24) DAVE WARKENTHIEN DIRECTOR	3.00	X						14,492.	0.	0.
(25) RON SAMUELSON DIRECTOR	3.00	X						13,832.	0.	0.
(26) DON SCHURDEVIN DIRECTOR	3.00	X						13,782.	0.	0.
1b Subtotal								2,549,638.	0.	768,820.
c Total from continuation sheets to Part VII, Section A								37,754.	0.	0.
d Total (add lines 1b and 1c)								2,587,392.	0.	768,820.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 88

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 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
HIGHMARK ERECTORS, INC. PO BOX 491, BLACK HAWK, SD 57718	SUBSTATION CONSTRUCTION	5,618,249.
KEY CONTRACTING, INC 245 7TH AVE NE, WEST FARGO, ND 58078	TRANSMISSION LINE CONSTRUCTION	3,879,047.
DGR ENGINEERING, 1302 SOUTH UNION STREET, PO BOX 511, ROCK RAPIDS, IA 51246	ENGINEERING SERVICES	3,315,593.
PUETZ CORPORATION, 800 NORTH KIMBALL, PO BOX 968, MITCHELL, SD 57301	TRANSMISSION LINE CONSTRUCTION	2,923,177.
KARIAN PETERSON POWER LINE PO BOX 345, MONTEVIDEO, MN 56265	TRANSMISSION LINE CONSTRUCTION	2,672,949.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 24

SEE PART VII, SECTION A CONTINUATION SHEETS

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Form 990 (2023)

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f					
	g Noncash contributions included in lines 1a-1f	1g \$					
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a SALE OF POWER	Business Code					
		221000	302220512.	302220512.			
	b RTO & WHEELING REVENUE	221000	33,203,598.	33203598.			
	c G&T CAPITAL CREDITS	221000	20,648,082.	20648082.			
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f		356072192.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		610,163.			610,163.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			156,931.				
			(ii) Personal				
	b Less: rental expenses ...	6b	0.				
	c Rental income or (loss)	6c	156,931.				
	d Net rental income or (loss)		156,931.			156,931.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other	30,959.			
	b Less: cost or other basis and sales expenses	7b	0.				
	c Gain or (loss)	7c	30,959.				
	d Net gain or (loss)		30,959.			30,959.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISCELLANEOUS REVENUE	Business Code					
		900099	67,814.			67,814.	
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d		67,814.					
12 Total revenue. See instructions		356938059.	356072192.	0.	865,867.		

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Form 990 (2023)

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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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	68,390.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members	27,750,309.			
5 Compensation of current officers, directors, trustees, and key employees	1,776,962.			
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	15,667,407.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,314,446.			
9 Other employee benefits				
10 Payroll taxes	1,231,567.			
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
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	17,321,873.			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	16,246,989.			
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.)				
a COST OF POWER	264,558,585.			
b TRANSMISSION - OPERATIO	11,398,268.			
c TRANSMISSION - MAINTENA	3,898,680.			
d DISTRIBUTION - OPERATIO	2,165,487.			
e All other expenses	-8,460,904.			
25 Total functional expenses. Add lines 1 through 24e	356,938,059.			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	9,939,777.	2	8,838,848.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	35,599,010.	4	32,472,060.
	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	
	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	15,638,936.	8	22,969,746.
	9 Prepaid expenses and deferred charges	5,711,597.	9	4,550,077.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 798,867,098.		
	b Less: accumulated depreciation	10b 158,322,243.	578,128,813.	10c 640,544,855.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	13,334,637.	12	6,973,624.
	13 Investments - program-related. See Part IV, line 11	179,012,528.	13	193,943,052.
	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)	837,365,298.	16	910,292,262.	
Liabilities	17 Accounts payable and accrued expenses	41,386,893.	17	40,635,791.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	484,684,554.	23	487,114,022.
	24 Unsecured notes and loans payable to unrelated third parties	30,000,000.	24	88,000,000.
	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	15,522,359.	25	8,730,596.
	26 Total liabilities. Add lines 17 through 25	571,593,806.	26	624,480,409.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	2,500.	29	2,500.
	30 Paid-in or capital surplus, or land, building, or equipment fund	0.	30	0.
	31 Retained earnings, endowment, accumulated income, or other funds	265,768,992.	31	285,809,353.
	32 Total net assets or fund balances	265,771,492.	32	285,811,853.
33 Total liabilities and net assets/fund balances	837,365,298.	33	910,292,262.	

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	356,938,059.
2	Total expenses (must equal Part IX, column (A), line 25)	2	356,938,059.
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	265,771,492.
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	20,040,361.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	285,811,853.

Part 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? _____ 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? _____ 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c 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? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
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? _____		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 _____		

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

2023

Open to Public Inspection

Name of the organization EAST RIVER ELECTRIC POWER COOPERATIVE, INC. Employer identification number 46-0225402

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures.

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations? | 3a(i) | |
| (ii) Related organizations? | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		8,023,563.		8,023,563.
b Buildings		32,624,123.	3,759,180.	28,864,943.
c Leasehold improvements				
d Equipment		440,475,567.	75,755,742.	364,719,825.
e Other		317,743,845.	78,807,321.	238,936,524.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				640,544,855.

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Schedule D (Form 990) 2023

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) BASIN ELECTRIC POWER		
(2) COOPERATIVE	183,407,981.	COST
(3) NATIONAL RURAL UTILITIES		
(4) COOPERATIVE FINANCE		
(5) CORPORATION	5,357,065.	COST
(6) OTHER INVESTMENTS	946,635.	COST
(7) FEDERATED RURAL ELECTRIC		
(8) INSURANCE CORPORATION	938,845.	COST
(9) COBANK	2,863,083.	COST
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))	193,943,052.	

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED CREDITS	6,026,905.
(3) POSTRETIREMENT BENEFIT OBLIGATIONS	1,454,532.
(4) CAPITAL LEASE LIABILITY	1,249,159.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	8,730,596.

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 ...

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

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.

1	Total revenue, gains, and other support per audited financial statements	1	356,938,059.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	356,938,059.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	356,938,059.

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	329,187,750.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	329,187,750.
4	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	27,750,309.
c	Add lines 4a and 4b	4c	27,750,309.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	356,938,059.

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:

THE COOPERATIVE BELIEVES IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN AFFECTING ITS ANNUAL FILING REQUIREMENTS, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. THE COOPERATIVE WOULD RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS IN INCOME TAX EXPENSE IF SUCH INTEREST AND PENALTIES ARE INCURRED.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

ALLOCATION OF 2023 MARGINS TO MEMBERS IN 2024 27,750,309.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.** Employer identification number
46-0225402

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
DAKOTA STATE UNIVERSITY FOUNDATION 2ND ST. NE MADISON, SD 57042	23-7299995	501(C)(3)	6,800.	0.			COMMUNITY SUPPORT
FORWARD SIOUX FALLS PO BOX 907 SIOUX FALLS, SD 57101	46-0396647	OTHER	6,667.	0.			ECONOMIC DEVELOPMENT
GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT - 711 E WELLS AVE - PIERRE, SD 57501	46-6000364	GOVERNMENT	5,500.	0.			ECONOMIC DEVELOPMENT
LAKE AREA IMPROVEMENT CORPORATION PO BOX 32 MADISON, SD 57042	51-0183368	501(C)(3)	10,000.	0.			ECONOMIC DEVELOPMENT
SOUTH DAKOTA AGRICULTURAL AND RURAL LEADERSHIP FOUNDATION - PO BOX 2170, ANIMAL SCIENCE CENTER 132 - BROOKINGS, SD 57007	36-4293293	501(C)(3)	7,500.	0.			ECONOMIC DEVELOPMENT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 4.

3 Enter total number of other organizations listed in the line 1 table 1.

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

Schedule I (Form 990) 2023

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

Schedule I (Form 990) 2023

46-0225402

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ORGANIZATION MAKES GRANTS TO VARIOUS FISCALLY RESPONSIBLE AND TRUSTWORTHY ORGANIZATIONS IN SOUTH DAKOTA AND MINNESOTA. THE GRANTS ARE APPROVED BY THE ORGANIZATION'S BOARD OF DIRECTORS IN THE YEARLY BUDGET AND ALSO AUTHORIZED FOR DISBURSEMENT BY MANAGEMENT UPON RECEIPT OF INVOICE. THERE ARE NO RESTRICTIONS ON THE GRANTS EXCEPT FOR THE RECIPIENTS TO USE THE FUNDS AS REPRESENTED IN THE INVOICE TO PROMOTE EDUCATION OR TO PROMOTE ECONOMIC DEVELOPMENT IN THE AREAS SERVED BY EAST RIVER ELECTRIC.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2023

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization **EAST RIVER ELECTRIC POWER COOPERATIVE, INC.** Employer identification number **46-0225402**

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

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.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- 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:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- 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

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b	X	
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2023

**EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.**

46-0225402

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ROBERT SAHR CEO/GENERAL MANAGER	(i)	537,288.	0.	8,571.	119,770.	34,644.	700,273.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SCOTT SHEWEY CHIEF FINANCIAL OFFICER	(i)	335,877.	0.	2,051.	54,557.	23,177.	415,662.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ELIZABETH AVERY, CHIEF HUMAN RESOURCES OFFICER	(i)	201,491.	0.	3,595.	150,331.	19,085.	374,502.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JEFFREY MAY CHIEF INFORMATION OFFICER	(i)	232,925.	0.	1,159.	112,783.	16,186.	363,053.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MARK HOFFMAN CHIEF OPERATIONS OFFICER	(i)	259,456.	0.	1,503.	54,844.	33,065.	348,868.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CHRIS STUDER, CHIEF MEMBER & PUBLIC RELATIONS	(i)	235,632.	0.	728.	36,377.	31,856.	304,593.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) MICHAEL JASPERS BUSINESS DEVELOPMENT DIRECTOR	(i)	229,041.	0.	1,250.	41,566.	17,129.	288,986.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DANIEL BROWN GENERAL COUNSEL	(i)	202,400.	0.	1,650.	28,797.	14,335.	247,182.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

EAST RIVER ELECTRIC POWER
COOPERATIVE, INC.

Schedule J (Form 990) 2023

46-0225402

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Part III Supplemental Information

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

PART I, LINE 1A:

USE OF CHARTER AIR IS ALLOWED ONLY WHEN COMMERCIAL AIRLINE SERVICE IS NOT
AVAILABLE OR PRACTICAL.

PART I, LINE 4B:

ROBERT SAHR RECEIVED A PAYMENT OF \$25,860 AS A PERFORMANCE INCENTIVE 457(F)
TO SUPPLEMENT HIS COMPENSATION FOR A SPECIFIC TIME FRAME.

SCHEDULE J, PART II, COLUMN C

SCHEDULE J, PART II, COLUMN C INCLUDES THE CHANGE IN ACTUARIAL VALUE IN
THE DEFINED BENEFIT PLAN PER THE 990 INSTRUCTIONS. THIS AMOUNT DOES NOT
REPRESENT THE ACTUAL CONTRIBUTIONS MADE TO THE PLAN BY THE COOPERATIVE.

**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.

OMB No. 1545-0047

2023Open to Public
Inspection

Name of the organization	EAST RIVER ELECTRIC POWER COOPERATIVE, INC.	Employer identification number	46-0225402
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FORM 990, PART VI, SECTION A, LINE 6:

THE COOPERATIVE SHALL HAVE NO STOCK, BUT MEMBERSHIP IN THE COOPERATIVE SHALL BE EVIDENCED BY A MEMBERSHIP CERTIFICATE. MEMBERSHIP IN THE COOPERATIVE SHALL BE OF FOUR CLASSES AS FOLLOWS:

(A) CLASS "A" MEMBERSHIP. ANY INCORPORATED COOPERATIVE ASSOCIATION ORGANIZED UNDER STATE LAWS GOVERNING RURAL ELECTRIC COOPERATIVES, FOR THE PURPOSES OF CONSTRUCTING, OPERATING AND MAINTAINING ELECTRIC DISTRIBUTION LINES OR SYSTEMS MAY BECOME A CLASS "A" MEMBER UPON COMPLIANCE WITH THE OTHER MEMBERSHIP REQUIREMENTS OF THESE BYLAWS. EACH CLASS "A" MEMBER SHALL BE ENTITLED TO ONE (1) DIRECTOR AND ONE (1) VOTE AT ANY COOPERATIVE MEETING.

(B) CLASS "B" MEMBERSHIP. ANY MUNICIPALITY OR OTHER BODY POLITIC MAY BECOME A CLASS "B" MEMBER UPON COMPLIANCE WITH THE OTHER MEMBERSHIP REQUIREMENTS OF THESE BYLAWS. CLASS "B" MEMBERS SHALL COLLECTIVELY BE ENTITLED TO ONE (1) DIRECTOR AND ONE (1) VOTE AT ANY COOPERATIVE MEETING.

(C) CLASS "C" MEMBERSHIP. ANY FIRM, ASSOCIATION, CORPORATION, BUSINESS TRUST, LIMITED LIABILITY COMPANY OR OTHER ENTITY NOT FITTING THE REQUIREMENTS OF CLASS "A" OR "B" MEMBERSHIP MAY BECOME A CLASS "C" MEMBER UPON COMPLIANCE WITH THE OTHER MEMBERSHIP REQUIREMENTS OF THESE BYLAWS. CLASS "C" MEMBERS SHALL COLLECTIVELY BE ENTITLED TO ONE (1) DIRECTOR AND ONE (1) VOTE AT ANY COOPERATIVE MEETING.

(D) CLASS "D" MEMBERSHIP. ANY COOPERATIVE, FIRM, ASSOCIATION, CORPORATION,

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

Schedule O (Form 990) 2023

Name of the organization	EAST RIVER ELECTRIC POWER COOPERATIVE, INC.	Employer identification number	46-0225402
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BUSINESS TRUST, LIMITED LIABILITY COMPANY OR OTHER ENTITY NOT FITTING THE REQUIREMENTS OF CLASS "A", "B", OR "C" MEMBERSHIP MAY BECOME A CLASS "D" MEMBER UPON COMPLIANCE WITH THE OTHER MEMBERSHIP REQUIREMENTS OF THESE BYLAWS. CLASS "D" MEMBERS SHALL COLLECTIVELY BE ENTITLED TO ONE (1) DIRECTOR AND ONE (1) VOTE AT ANY COOPERATIVE MEETING.

FORM 990, PART VI, SECTION A, LINE 8B:

THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

UPON COMPLETION OF EAST RIVER'S 990, THE RETURN WILL BE POSTED TO THE SECURE AREA OF EAST RIVER'S WEB SITE FOR THE DIRECTORS, OFFICERS, AND MANagements REVIEW. ANY QUESTIONS OR CONCERNS WILL BE ADDRESSED AND THE 990 WILL BE FILED WITH THE IRS.

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

ALL DIRECTORS AND EMPLOYEES ARE COVERED BY THE CONFLICT OF INTEREST POLICY. AN EMPLOYEE OR DIRECTOR SHALL MAKE PROMPT AND FULL DISCLOSURE TO THE BOARD OR TO THE EMPLOYEE'S SUPERVISOR OF ANY POTENTIAL SITUATION WHICH MAY INVOLVE A CONFLICT OF INTEREST. DETERMINATION OF WHETHER A CONFLICT EXISTS AND REVIEW OF THE CONFLICT WILL BE MADE BY THE BOARD IF THE PERSON INVOLVED IS A BOARD MEMBER OR GENERAL MANAGER; IF THE PERSON INVOLVED IS AN EMPLOYEE, THE EMPLOYEE'S SUPERVISOR WILL MAKE THIS DETERMINATION. ANY EMPLOYEE OR DIRECTOR WHOSE CONDUCT VIOLATES THE CONFLICT OF INTEREST POLICY SHALL BE SUBJECT TO DISCIPLINARY ACTION UP TO AND INCLUDING EXPULSION FROM THE BOARD OR TERMINATION; THIS IS DETERMINED BY THE BOARD OR GENERAL MANAGER.

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FORM 990, PART VI, SECTION B, LINE 15:

THE COMPENSATION PLAN IS BASED ON A COMPILATION OF SALARY SURVEY DATA ACQUIRED THROUGH THE SERVICES OF A PROFESSIONAL CONSULTANT. AN AVERAGE OF THE MEDIAN RATES IN THE VARIOUS SURVEYS IS USED TO DETERMINE THE EAST RIVER MARKET RATE. THE BOARD OF DIRECTORS ANNUALLY REVIEWS THE MARKET DATA AND APPROVES ANY CHANGES.

FORM 990, PART VI, SECTION C, LINE 19:

AVAILABLE UPON REQUEST BY CALLING THE OFFICE, STOPPING IN, OR VIA EMAIL.

FORM 990, PART VII, COLUMN F, OTHER COMPENSATION:

INCLUDED IN OTHER COMPENSATION IS THE ESTIMATED CURRENT YEAR INCREASE OR DECREASE IN THE ACTUARIAL VALUE OF THE DEFINED BENEFIT PLAN FOR THE GENERAL MANAGER, ASSISTANT GENERAL MANAGERS AND OTHER HIGHLY COMPENSATED EMPLOYEES. THE CURRENT YEAR INCREASE OR DECREASE DOES NOT REPRESENT CURRENT YEAR CONTRIBUTIONS TO THE PLAN. RATHER, IT IS AN ESTIMATE OF THE INCREASE OR DECREASE IN THE ACTUARIAL VALUE OF THE PLAN AS CALCULATED BY THE PLAN ADMINISTRATOR.

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

RETIREMENT OF CAPITAL	-7,709,948.
ALLOCATION OF 2023 MARGINS TO MEMBERS IN 2024	27,750,309.
TOTAL TO FORM 990, PART XI, LINE 9	20,040,361.

FORM 990, PART IX, LINE 4, BENEFITS PAID TO OR FOR MEMBERS:

THE COOPERATIVE HAS INTERPRETED THE INSTRUCTIONS TO PART IX, LINE 4, TO MEAN PATRONAGE CAPITAL ALLOCATED FOR THE YEAR, RATHER THAN PATRONAGE

Name of the organization EAST RIVER ELECTRIC POWER COOPERATIVE, INC.	Employer identification number 46-0225402
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CAPITAL RETIRED. THIS IS CONSISTENT WITH THE BY-LAWS OF THE
COOPERATIVE.

FORM 990, PART IX, LINE 24E STATEMENT OF FUNCTIONAL EXPENSES:
THE LABOR, PENSION AND PAYROLL TAXES REPORTED ON LINES 5-10 ARE
INCLUDED IN DISTRIBUTION EXPENSE, ADMINISTRATIVE & GENERAL EXPENSE AND
CUSTOMER EXPENSE. THEREFORE, LABOR, PENSION AND PAYROLL TAXES ARE SHOWN
AS A REDUCTION TO OTHER EXPENSES ON LINE 24E.