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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

2009

Open to Public Inspection

A Fo	r the :	2009 ca	alendar yea	r, or tax year beginning 01-01	-2009 and ending 12-31-20	09						
_		pplicable	Please	C Name of organization SOUTH MISSISSIPPI ELECTRIC PO	OWER ASSOCIATION			D Employer i	dentificatio	on number		
_	tress ch	-	use IRS label or	Doing Business As				64-03679 E Telephone				
Naı	me cha	nge	print or type. See	being business / is				•				
Init	ial retu	rn	Specific Instruc-		f mail is not delivered to street add	ress) Room	/suite	(601) 268 G Gross receip		3 278		
Ter	mınate	d	tions.	PO BOX 15849			ŀ	G Gloss receip		7,270		
☐ Am	ended	return		City or town, state or country, ar HATTIESBURG, MS 394045849	nd ZIP + 4							
☐ App	olication	n pending		HATTIESBORG, MS 394043049								
			F Nan	ne and address of principal off	icer	H(a)	Is thi	s a group reti	urn for			
				Compton X 15849			affilia	tes?	Γ	Yes 🔽 No		
				ESBURG, MS 394045849		Н(Ь)	Are all	affiliates incl	uded?	┌ Yes ┌ No		
			L					," attach a lı				
I Ta	x-exem	npt status	▼ 501(c)	(12) ◀ (Insert no)	(1) or 527	H(c)	Grou	p exemption	number 🟲			
J W	ebsite	e: 🕨 http	p //www.sm	epa coop/								
K For	n of or	ganızatıon	✓ Corporat	ion Trust Association Othe	r ▶	L Yea	r of for	mation 1941	M State of	legal domicile MS		
	rt I					l						
	1			e organization's mission or mo								
01				RANSMIT THROUGH GENERA COOPERATIVES, EACH SEF			CITY	, WHOLESAL	EELECTE	RICITY TO 11		
ဋ				,								
Governance												
See	2	Check t	this hox 🛏	if the organization discontin	ued its operations or dispose	ed of more	than 2	25% of its ne	t assets			
ూ శు			,	nembers of the governing bod						22		
8	4		_	dent voting members of the g					4			
Ě	5			nployees (Part V, line 2a) .					5	367		
Activities	6	Total no	umber of vo	lunteers (estimate if necessa				6	С			
•	7a	Total gr	ross unrela	ted business revenue from Pa				7a	C			
	b	Net unr	elated busi	ness taxable income from For	m 990-T, line 34				7b	С		
						Prio	Year	Curi	rent Year			
g,	8			d grants (Part VIII, line 1h)						0		
enue	9			revenue (Part VIII, line 2g)			7	35,890,489		773,862,041		
Ravenu	10			ne (Part VIII, column (A), line			30,835			29,887		
_	11		•	art VIII, column (A), lines 5,						0		
	12			dd lines 8 through 11 (must e		ine	7	35,921,324		773,891,928		
	13			r amounts paid (Part IX, colu				1,270,739		0		
	14	Benefi	ts paid to o	r for members (Part IX, colum	nn (A), line 4)					0		
ø	15		es, other co	ompensation, employee benefi	5 5 -	- 25,305,455			28,098,776			
DS 6	16a	10) Profes	sional fund	raising fees (Part IX, column			23,303,433		0			
Expenses	ь			enses (Part IX, column (D), line 25)								
Э	17			Part IX, column (A), lines 11:	_	6	90,267,129	715,316,152				
	18			Add lines 13-17 (must equal	·		716,843,323			743,414,928		
	19			enses Subtract line 18 from				19,078,001		30,477,000		
88						Beg	inning	of Current	Enc	d of Year		
Not Assets or Fund Balances								ear				
Ass Ba	20			t X, line 16)				70,816,451		.,153,660,182		
¥ 55	21			Part X, line 26)				35,330,211		974,422,913		
	22 1111		ature Blo	d balances Subtract line 21 f	rom line 20		1	35,486,240		179,237,269		
Га				rjury, I declare that I have examine	d this return, including accompanyir	na schedules	and st	atements, and t	o the best o	f my knowledge		
				correct, and complete Declaration of								
Sign		****				ı	2010)F 44				
Here			ature of office	er			2010-0 Date	J5-11				
		Ravi	mond Haley C	Chief Financial Officer								
			e or print nam									
		Preparer			Date	Check If		Preparer's ide		ber		
Paid		signature	e 🚩			self- empolyed	٠	(see instructions)				
Prepa			ame (or yours	; •	l	1	•	EIN Þ				
Use (Only	ıf self-employed), address, and ZIP + 4										
								Phone no 🕨				
May	ha ID	C discus	a this ratio	rn with the preparer shown abo	ove? (see instructions)			•		Гио		

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

PROVIDE AND TRANSMIT THROUGH GENERATION AND PURCHASE OF ELECTRICITY, WHOLESALE ELECTRICITY TO 11 MEMBER OWNER COOPERATIVES, EACH SERVING RETAIL CONSUMERS

2		on undertake any signifi o or 990-EZ?			r which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on S	Schedule O			
3		on cease conducting, or			onducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Sche	dule O			
4	Section 501(c)(3)		ations and secti	on 4947(a)(1) trusts	e largest program services b are required to report the an service reported	
4a	(Code) (Expenses \$	743,414,928	ıncludıng grants of \$	0) (Revenue \$	773,891,928)
		tric and the 11 member syst			ratives provide service to more tha ses During 2009 South Mississippi	n 400,000 meters in Mississippi Electric provided member systems
4b	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
	-					
4c	(Code) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
		.				
4d		ervices (Describe in Sc	•	£ #) (D h	,
	(Expenses \$		cluding grants o) (Revenue \$)
4e	Total program se	rvice expenses -\$	743,414,92	28		

Part IV	Checklist	of Red	uired	Schedules

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νο
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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If</i> " <i>Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		Νο
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? <i>If</i> "Yes," complete Schedule G, Part I	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		N o
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		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Form	990 (2009)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part</i>			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
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>	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		Νo
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</i> "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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? If "Yes," complete Schedule R, Part VI	37		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements	Regarding	Other:	IRS Filings	and Tax	Compliance
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			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
la l	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? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νo
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		N O
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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?	7c		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

PO BOX 15849

(601) 268-2083

HATTIESBURG, MS 394045849

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

Se	ction A. Governing Body and Management				
	calon Ar coverning body and management			Yes	No
					- 110
1a	Enter the number of voting members of the governing body 1a	22			
b	Enter the number of voting members that are independent 1b	22			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine other officer, director, trustee, or key employee?	ss relationship with any	2	Yes	
3	Did the organization delegate control over management duties customarily performed by supervision of officers, directors or trustees, or key employees to a management compa		3		No
4	Did the organization make any significant changes to its organizational documents since filed?		4		Νο
5	Did the organization become aware during the year of a material diversion of the organiz	ation's assots?	5		No
6	Does the organization have members or stockholders?		6	Yes	NO
	•		-	res	
7a	Does the organization have members, stockholders, or other persons who may elect one governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders,		7b	Yes	
8	$\mbox{\rm Did}$ the organization contemporaneously document the meetings held or written actions year by the following	undertaken during the			
а	The governing body?		8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who organization's mailing address? If "Yes," provide the names and addresses in Schedule		9		Νο
Se	ction B. Policies (This Section B requests information about policies not rec				
	venue Code.)	·			
				Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activaffiliates, and branches to ensure their operations are consistent with those of the organ		10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing b	ody before filing the form?			
			11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form	990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 $$.		12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually inte to conflicts?	rests that could give rise	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this is done	ne policy? If "Yes,"	12c	Yes	
13	Does the organization have a written whistleblower policy?		13	Yes	
14	Does the organization have a written document retention and destruction policy?		14	Yes	
15	Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the de				
а	The organization's CEO, Executive Director, or top management official		15a	Yes	
	Other officers or key employees of the organization		15b	Yes	
_	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			1 00	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or s	mılar arrangement with a			
b	taxable entity during the year?		16a		Νo
_	participation in joint venture arrangements under applicable federal tax law, and taken s organization's exempt status with respect to such arrangements?	teps to safeguard the	16b		
Se	ction C. Disclosure		100		
<u> </u>	List the States with which a copy of this Form 990 is required to be filed►MS				
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 9	90 and 900-T (501/c)			
10	(3)s only) available for public inspection. Indicate how you make these available. Check Own website. Another's website. Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing d interest policy, and financial statements available to the public. See Additional Data Ta	•			
20	State the name, physical address, and telephone number of the person who possesses t		ie orga	nızatıor	n þ -
	Raymond Haley		3-		

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

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 Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee										
(A) Name and Title			(0	chec	:kal			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC) (W- 2/1099 MISC)		compensation from the organization and related organizations
James D Baldree Director	7 00	Х						8,000	0	0
Travis Baxter Director	4 70	Х						18,400	0	0
Lavell Bond Director	8 50	Х		Х				4,000	0	0
Alan Bradley Director	4 30	Х						21,600	0	0
William H Hardin Director	5 80	Х		х				18,400	0	0
Harvey Lee Hedegaard Director	6 20	Х						20,800	0	0
W Keith Hurt Director	7 90	Х						23,200	0	0
Charles Lopez Director	3 30	х						11,200	0	0
Don Jordan Director	10 10	Х		Х				25,600	0	0
Mack J Mauldın Dırector	2 80	х		х				20,000	0	0
Percy McCaa Director	4 60	Х						23,200	0	0
Bruce McCaffery Director	5 60	Х						17,600	0	0
W R Miller Director	3 80	Х						12,800	0	0
John W Mosely Director	6 30	Х						20,000	0	0
Robert J Occhi Director	3 10	Х						20,000	0	0
John Reed Director	4 60	Х						15,200	0	0
RW Robertson Director	3 80	х						20,800	0	0

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

(A) Name and Title	(B) Average hours		(C) Position (c) that ap			I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Harlan B Rogers Dırector	7 40	х						14,400	0	0
Joe Shelton III Director	2 60	х						14,400	0	0
CH Shelton Director	5 10	х						20,800	0	0
William D Smith Director	3 60	х						20,000	0	0
Louis S Thompson Director	4 40	х						16,800	0	0
Randy Wallace Director	4 00	х						21,600	0	0
Henry C Waterer Jr Director	11 40	х		х				31,200	0	0
James Compton General Manager/CEO	55 00			х				355,715	0	93,497
Raymond Haley Chief Financial Officer	59 00			х				195,909	0	64,966
Marcus Ware Asst General Manager	50 00				Х			238,317	0	204,702
Nathan Brown Chief Operating Officer	54 00				Х			197,175	0	63,052
Terry Lee Chief Engineering Office	46 00				х			174,763	0	102,050
James Edwards Nuclear Specialist	57 50					х		173,121	0	37,058
Brad Wolfe Chief Transmission & Sup	45 00					х		160,031	0	34,456
Roger Smith Wholesale Services Direc	50 00					х		152,669	0	79,684
Charles Stuart Plant Manager	46 40					х		135,743	0	85,090
Jerry Pierce Dir Transmission Constr	40 00					х		135,256	0	39,872
1b Total							•	2,358,699	0	804,427

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization►16

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule I for such individual	,		NI -
	chimic 2d 17 year, compress constants year additional and the constant and	3		Νo
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? If "Yes," complete Schedule J for such individual	4	Yes	
		-		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

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

(A) Name and business address	(B) Description of services	(C) Compensation
URS Corporation PO Box 116183 Atlanta, GA 30368	Engineering/Project MGT	3,942,168
Macs Construction Company Inc PO Box 17017 Hattiesburg, MS 39404	Facility Const/Rennovate	3,831,438
Structural Preservation Systems PO Box 75090 Baltimore, MD 21275	Generating Plant Modif	3,424,963
Burns&McDonnell PO Box 41883 Kansas City, MO 64141	Engineering/Project MGT	1,807,474
Harper Electric Contruction Co Inc PO Box 698 Andalusia, AL 36420	Trans Line Construction	1,184,103
2 Total number of independent contractors (including but not limited to those listed above)) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►36

Form 99			6 B					Page 9
Part V	<u> </u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
its si	1a	Federated cam	paigns 1a					
퍒	ь	Membership du	es 1b					
Contributions, gifts, grants and other similar amounts	С	Fundraising eve	ents 1c					
	d	Related organiz	zations 1d					
	e	Government grants	s (contributions) 1e					
lion r si	f	All other contribution	ons, gifts, grants, and 1f			İ		İ
<u>후</u>	g	sımılar amounts no Noncash contri	ot included above ibutions included in					
를		lines 1a-1f\$_						
ဝွန်း	h		s 1a-1f	▶				
				Business Code				
nue	2a	Sales to Members		221,000	763,439,965	763,439,965		
₽ev	ь	Sales to Non-mem	bers	221,000	8,373,417	8,373,417		
Program Service Revenue	с	Program related In	nvest	221,000	1,741,015	1,741,015		
er E	d	By Product sales		221,000	307,644	307,644		
ဒ	e							
ମୟ ଆ	f	All other progra	am service revenue					
<u>\$</u>	g	Total Add lines	s 2a-2f	<u> </u>	773,862,041			
	3		ome (including dividen		773,002,041			
			ar amounts)	. h				
	4		stment of tax-exempt bond	F				
	5	Royalties		▶				
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	Ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of		41,237				
		assets other than inventory						
	ь	Less cost or other basis and		11,350				
		sales expenses Gain or (loss)		29,887				
	c d		ss)		29,887	29,887		
	8a		rom fundraising		25,667	25,007		
e e		events (not inc						
Other Revenue		\$	s reported on line 1c)					
ě			ne 18					
<u>.</u>			а					
Ě	b		penses b					
	c 9a		(loss) from fundraising	events F				
	"		ne 19					
			а					
	ь		penses b					
	C		(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo						
	b		oods sold b					
	с		(loss) from sales of inv					
		Miscellaneous	s Revenue	Business Code				
	11a							
	Ь							
	С							
	d	All other reven						
	е	Total. Add lines	s 11a-11d					
	12	Total revenue	See Instructions .	▶				
	I		-		773,891,928	773,891,928	0	0

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) but are not required to complete columns (B), (C), and (D).								
			<u>s (B), (C), and (</u> (B)	(D).	(D)			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22							
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	1,899,840	1,899,840					
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	17,933,325	17,933,325					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,133,440	3,133,440					
9	Other employee benefits	3,245,232	3,245,232					
10	Payroll taxes	1,886,939	1,886,939					
11	Fees for services (non-employees)		· · ·					
 a	Management							
ь	Legal	611,232	611,232					
_	Accounting	201,650	201,650					
d	Lobbying	201,030	201,030					
e	Professional fundraising See Part IV, line 17							
f 	Investment management fees	202 202	202 202					
g	Other	382,383	382,383					
12	Advertising and promotion	97,720	97,720					
13	Office expenses	935,585	935,585					
14	Information technology	1,013,944	1,013,944					
15	Royalties							
16	Occupancy							
17	Travel	221,477	221,477					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings							
20	Interest	38,793,377	38,793,377					
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	46,294,105	46,294,105					
23	Insurance	1,461,017	1,461,017					
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)							
а	Purchase Power for Resa	462,805,427	462,805,427					
b	Coal, Natural Gas, Nucl	115,577,346	115,577,346					
c	Power Plant Operation &	26,266,058	26,266,058					
d	Transmission System Ope	17,502,727	17,502,727					
e	Miscellaneous	3,152,104	3,152,104					
f	All other expenses		. ,					
25	Total functional expenses. Add lines 1 through 24f	743,414,928	743,414,928	0	0			
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	773,714,320	, +3, +14, 320		0			

Pa	rt X	Balance Sheet			- rage 11
	T C A	balance sheet	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	135,539	1	129,455
	2	Savings and temporary cash investments	2,708,828	2	5,169,189
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	62,278,457	4	65,020,834
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ Complete Part II of			
		Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use	56,281,803	8	105,446,908
٧	9	Prepaid expenses and deferred charges	108,596,244	9	84,116,430
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i> 1,445,689,272			
	b	Less accumulated depreciation 10b 602,369,385	790,551,422	10c	843,319,887
	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	50,098,954	13	50,298,807
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	165,204	15	158,672
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,070,816,451	16	1,153,660,182
	17	Accounts payable and accrued expenses .	51,347,500	17	67,648,145
	18	Grants payable		18	
	19	Deferred revenue		19	_
	20	Tax-exempt bond liabilities	30,979,408	20	59,169,220
è	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ä		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	645,459,497	23	581,140,865
	24	Unsecured notes and loans payable to unrelated third parties	78,380,000	24	100,300,000
	25	Other liabilities Complete Part X of Schedule D	129,163,806	25	166,164,683
	26	Total liabilities. Add lines 17 through 25	935,330,211	26	974,422,913
Ņ		Organizations that follow SFAS 117, check here ▶ ┌ and complete lines 27			
Fund Balances		through 29, and lines 33 and 34.			
ılar	27	Unrestricted net assets		27	
8	28	Temporarily restricted net assets		28	
pui	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ → and complete			
0.	30	lines 30 through 34.	0	20	0
Assets	30	Capital stock or trust principal, or current funds	0	30	
is si	31	Paid-in or capital surplus, or land, building or equipment fund	135,486,240	31	
A A	32	Retained earnings, endowment, accumulated income, or other funds		32	179,237,269
Net	33	Total liabilities and not assets (fund balances	135,486,240		179,237,269
l	34	Total liabilities and net assets/fund balances	1,070,816,451	34	1,153,660,182

Part XI	Financial Statements	and	Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Yes	
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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 in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
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 in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

DLN: 93493132030750

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Name of the organization

Employer identification number

	SSISSIPPI ELECTRIC POWER ASSOCIATION			-	•	cation numbe	•
					367992		
art I	Organizations Maintaining Donor Adv organization answered "Yes" to Form 990		ner Similar Fu	nas c	or Accoun	ts. Complet	e if tr
	organization answered Tes to Form 550	(a) Donor advis	ed funds	(b) Funds and	l other accour	nts
Total	I number at end of year	. ,			•		
	egate contributions to (during year)						
	egate grants from (during year)						
	egate value at end of year						
	·						
	the organization inform all donors and donor advisors are the organization's property, subject to the or			oradvis	sea	☐ Yes	□No
used	the organization inform all grantees, donors, and d I only for charitable purposes and not for the benef erring impermissible private benefit					☐ Yes	┌ No
rt II		the organization an	swered "Yes" to	Form	990, Part	IV, line 7.	
Г Г	ose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space plete lines 2a-2d if the organization held a qualifi	n or pleasure)	reservation of an reservation of a c	ertıfıed	l historic stri		a
	ment on the last day of the tax year		Г	Т		ne End of the	Year
Tota	I number of conservation easements			2a			
Tota	l acreage restricted by conservation easements			2b			
Num	ber of conservation easements on a certified histo	oric structure included	ın (a)	2c			
Num	ber of conservation easements included in (c) acc	uired after 8/17/06	` '	2d			
the t	ber of conservation easements modified, transferr				e organizatio	n during	
	ber of states where property subject to conservat		•				
	s the organization have a written policy regarding treement of the conservation easements it holds?	the periodic monitoring	, inspection, hand	ling of	violations, a	nd Yes	┌ No
Staff	fand volunteer hours devoted to monitoring, inspe	cting and enforcing co	nservation easeme	ents du	iring the yea	r >	
A mo	unt of expenses incurred in monitoring, inspecting	g, and enforcing conser	vation easements	during	the year ► 🤄	\$	
	s each conservation easement reported on line 2((h)(4)(B)(i)?	d) above satisfy the red	quirements of sect	ion		┌ Yes	Γ Nα
balar	art XIV, describe how the organization reports cor nce sheet, and include, if applicable, the text of th organization's accounting for conservation easeme	e footnote to the organ					
rt III	Organizations Maintaining Collection Complete if the organization answered "Y			or Oth	er Simila	r Assets.	
art, h	e organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held fo ide, in Part XIV, the text of the footnote to its fina	. 16, not to report in its or public exhibition, edi	revenue statemer ication or researc	h ın fur			 !,
histo	e organization elected, as permitted under SFAS 1 orical treasures, or other similar assets held for pu ide the following amounts relating to these items					•	
(i) _R	Revenues included in Form 990, Part VIII, line 1				► \$		
(ii) ∆	Assets included in Form 990, Part X				- \$		
Ifthe	e organization received or held works of art, histor wing amounts required to be reported under SFAS	· ·		r financ	ial gain, pro	vide the	
	enues included in Form 990, Part VIII, line 1				► \$		
1/5 1 5	anaco meradea mirorni 550, rait viii, ille i				- ₽		

b Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Co	llections of Ar	<u>t, His</u>	tori	<u>cal Tı</u>	reas	ures, or C	<u> the</u>	r Simila	r Asse	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing	that a	are a significa	ant u	se of its co	ollectio	n	
а	Public exhibition		d	Γ	Loan	orex	change prog	rams				
b	Scholarly research		e	\sqcap	Other	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	y furthe	er the	organization	n's ex	cempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					nılar	Г	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						on answere	d "Y	es" to Fo	rm 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	ediary	for c	ontribu	utions	or other ass	etsı	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	/ and complete the	follow	/ing ta	able		г					
							-	_		A mou	ınt	
C	Beginning balance						-	1c				
d	Additions during the year						}	1d				
e	Distributions during the year							1e				
f	Ending balance						L	1f				_
2a	Did the organization include an amount on Fo		ie 21?							Γ	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV											
Pai	rt V Endowment Funds. Complete	If the organizatio)Prior \			Form 990, wo Years Back		t IV, line Three Years		NEQUE V	ears Back
1a	Beginning of year balance	(a)Current rear	(6)	PHOL	rear	(6)	WO TEATS DACK	(a)	Tillee rears	DACK (E	e)rour r	ears back
b	Contributions											
c	Investment earnings or 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 yea	r end balance held	as			<u> </u>						
а	Board designated or quasi-endowment	%										
ь	Permanent endowment %											
c	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	zation	that a	are held	d and	admınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)	<u> </u>	<u> </u>
	If "Yes" to 3a(II), are the related organizatio	•				•		٠		3b		<u></u>
4	Describe in Part XIV the intended uses of the tVI Investments—Land, Buildings	<u> </u>				1 00	Dart V Juna	10				
Pai	Tilvestillents—Land, Buildings	s, and Equipme	:III. 5	1					(-) 1			
	Description of investment				Cost or o		(b)Cost or of basis (othe		(c) Accumi deprecia		(d) Bo	ok value
1 a l	Land		•				31,19	2,442			3	1,192,442
b i	Buildings		•				266,13	7,601	140,0	94,538	12	6,043,063
c l	Leasehold improvements						1,41	0,006	8	97,884		512,122
	Equipment			1		- 1	1 056 34	4 469	415.8	17,252	64	0,527,217
d I	Equipment		•				1,056,34	1,105	113,0	17,232		•
e (Other	· · · · · · · · · · · · · · · · · · ·	<u>. </u>				90,60			59,711		5,045,043

(a) Description of security or category			d of valuation
(including name of security)	(b) Book value		f-year market value
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value		d of valuation
		Cost or end-or	f-year market value
			<u> </u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III	ne 15.		
(ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, III	ne 15. tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	ne 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	ne 15. tion		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value

Schedule D (Form 990) 2009

Part	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	773,891,928
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	743,414,928
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	30,477,000
4	Net unrealized gains (losses) on investments	4	5,856,534
5	Donated services and use of facilities	5	
6	Investment expenses	6	
_	Prior period adjustments	7	
	Other (Describe in Part XIV)	8	7,417,495
_	Total adjustments (net) Add lines 4 - 8	9	13,274,029
	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	43,751,029
Part		er R	
1	Total revenue, gains, and other support per audited financial statements	1	772,121,026
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	772,121,026
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	1,770,902
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	773,891,928
Part 2		per	
1	Total expenses and losses per audited financial statements	1	741,644,026
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	741,644,026
4	A mounts 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 XIV)]	
С	Add lines 4a and 4b	4c	1,770,902
			742 414 020
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	743,414,928

Complete this part to 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 XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
		PROGRAM RELATED INVESTMENT INCOME INCLUDED IN AUDITED FINANCIAL STATEMENTS AS CONTRA-EXPENSE \$1,740,215 INCLUDED IN FORM 990 AS PROGRAM REVENUE NET GAIN ON SALE OF FIXED ASSETS INCLUDED IN AUDITED FINANCIAL STATEMENTS AS CONTRA EXPENSE \$29,887 INCLUDED ON FORM 990 AS REVENUE Part XI, Line 8 Reclassified Balance in Unrealized Loss Account to Regulatory Asset Account \$7,417,495

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DLN: 93493132030750

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization SOUTH MISSISSIPPI ELECTRIC POWER ASSOCIATION **Employer identification number**

64-0367992

Pa	rt I Questions Regarding Compensation			
			Yes	Νο
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract			
	✓ Independent compensation consultant			
	Form 990 of other organizations Approval by the board or compensation committee			
	Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization	n		
а	Receive a severance payment or change-of-control payment?	4a		Νo
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
ь	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 67 If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
0		•		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	,			. ,	, ,				
(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	•	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	compensation	Deficits	(0)(1)-(0)	Form 990 or Form 990-EZ	
James Compton	(1) (11)	348,024	5,000	2,691	69,457	24,040	449,212		
Raymond Haley	(1) (11)	185,876	6,707	3,326	45,578	19,388	260,875		
Marcus Ware	(I) (II)	225,802	7,965	4,550	183,245	21,457	443,019		
Nathan Brown	(I) (II)	188,611	6,774	1,790	42,817	20,235	260,227		
Terry Lee	(I) (II)	167,516	6,060	1,187	82,981	19,069	276,813		
James Edwards	(I) (II)	165,755	4,003	3,363	18,815	18,243	210,179		
Brad Wolfe	(I) (II)	153,550	5,602	879	18,837	15,619	194,487		
Roger Smith	(I) (II)	148,203	3,817	649	61,752	17,932	232,353		
Charles Stuart	(ı) (ıı)	131,631	3,441	671	68,008	17,082	220,833		
Jerry Pierce	(I) (II)	130,409	3,189	1,658	27,565	12,307	175,128		
							Sahadi	ulo 1 / Form 000) 2000	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

_			
	Ident if ier	Return Reference	Explanation
	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule K

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

(Form 990)

DLN: 93493132030750 OMB No 1545-0047

Schedule K (Form 990) 2009

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a, Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number SOUTH MISSISSIPPI ELECTRIC POWER ASSOCIATION 64-0367992 **Bond Issues** (h) O n (g) Defeased Behalf of (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued (e) Issue Price (f) Description of Purpose Issuer Yes Yes Mississippi Business Finance Corporation 64-0679132 60528BAP7 10-08-2009 40,000,000 See Attached Schedule O Χ Х **Proceeds** A В C D Ε Total proceeds of issue 40,000,000 Gross proceeds in reserve funds 2 Proceeds in refunding or defeasance escrows 3 Other unspent proceeds 3,475,780 Issuance costs from proceeds 124,380 Working capital expenditures from proceeds Capital expenditures from proceeds 38,178,317 Year of substantial completion 2009 Yes No Yes Yes Yes No Yes No Were the bonds issued as part of a current refunding issue? 9 Were the bonds issued as part of an advance refunding issue? Χ 10 Has the final allocation of proceeds been made? Х 11 Does the organization maintain adequate books and records to support 12 Х the final allocation of proceeds? Part III **Private Business Use** В С Ε Α D Yes No Yes No No Yes No Yes Yes No Was the organization a partner in a partnership, or a member of an LLC, 1 Х which owned property financed by tax-exempt bonds? Are there any lease arrangements with respect to the financed property Х which may result in private business use?

Cat No 50193E

Were any gross proceeds invested beyond an available

Did the bond issue qualify for an exception to rebate?

5

6

temporary period?

	dule K (Form 990) 2009 Private Business Use (Continued)										Page 2	_
			4	В			С		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X									
3b	Are there any research agreements with respect to the financed property which may result in private business use?	′	×									
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	Х										
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %									
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %									
6	Total of lines 4 and 5		0 %									
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	×										
Par	t IV Arbitrage											_
		Α		В		C -	_	D			E	
1	Yes Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	No	Yes	No	Yes	'	lo	Yes	No	Yes	No	
	the bond issue	X										
2	Is the bond issue a variable rate issue?	×										
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and											
	records?	Х										
b	Name of provider											
c	Term of hedge											
4a	Were gross proceeds invested in a GIC?	Х										
b	Name of provider											
с	Term of GIC											
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	×										

Χ

Χ

OMB No 1545-0047

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SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Name of the organization SOUTH MISSISSIPPI ELECTRIC POWER ASSOCIATION

Employer identification number

64-0367992

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		The Board of Directors of South Mississippi Electric Power Association consists of 2 directors from each of the 11 member nonprofit distribution cooperatives that own South Mississippi Electric Power for a total of 22 directors. One of 2 directors serving on South Mississippi Electric Power Association's Board of Directors is the general manager of the member cooperative and the other is a director serving on the board of directors of the member cooperative. Thus the general manager and director from each member cooperative have a business relationship with each other while serving as directors for South Mississippi Electric Power Association.
Form 990, Part VI, Section A, line 6		Reference explanation for Part VI, Question 2, and Part VI Question 15 in Schedule O
Form 990, Part VI, Section A, line 7a		Reference explanation for Part VI, Question 2, and Part VI Question 15 in Schedule O
Form 990, Part VI, Section A, line 7b		Reference explanation for Part VI, Question 2, and Part VI Question 15 in Schedule O
Form 990, Part VI, Section B, line 11		A copy of the 2009 Form 990 was reviewed with the Audit Committee and reported to the Board of Directors. On the Audit Committee's recommendation, the Board authorized the execution and filing of the return
Form 990, Part VI, Section B, line 12c		Conflict of Interest Policy Enforcement - directors, officers, and key employees annually complete, and sign, a questionnaire relative to independence, business relationships, etc
Form 990, Part VI, Section B, Iine 15		A salary survey was conducted in 2008 by an independent entity. Five similarly sized generation and transmission cooperatives were surveyed. The following positions were surveyed. General Manager/CEO, Assistant General Manager, Chief Engineering Officer, Chief Financial Officer, Chief of Transmission, and Chief Operating Officer. The Board of Directors was provided the salary survey results. The Board determines the salary for the General Manager/CEO. The Board utilized this study again in 2009 for determining compensation of the General Manager/CEO. The General Manager/CEO utilized the survey for key employees. Additionally, the General Manager/CEO advises the Board of average annual salary increase as part of the annual budget approval process. Approval of the annual budget is documented in Board minutes.
Form 990, Part VI, Section C, line 19		Receptionists and Communications Director have been informed that the Form 990 will be made available. A Form is utilized for parties requesting a copy of the Form 990. This form advises requesting parties that photocopies will be made available upon receipt of copying fees (also specified in the request form). Financial statements are available on the organization's wiebsite.

ldentifier	Return Reference	Explanation
Schedule K Supplental Information		The purpose of the bond issues is for South Mississippi Electric Power Association to construct and install approximately 2.3 miles of new 115kv power lines and switching stations in Yazoo City, MS and 2.8 miles of new 115kv power lines and switching stations in Adams County, MS. Bond proceeds have also been used for the purpose of construction and/or purchase and installation of fixed improvements in connection therewith of the following projects located at the following addresses. 1. Headquarters Expansion located at 7037 US HWY 49, Hattiesburg, MS 2. Field Operations Center located at 3492 HWY 42, Hattiesburg, MS 3. Plant Morrow Facilities, Building and Office Renovation located at 304 Old Okahola Road, Purvis, MS.

Additional Data

Software ID:

Software Version:

EIN: 64-0367992

Name: SOUTH MISSISSIPPI ELECTRIC POWER ASSOCIATION

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Purchase Power for Resa	462,805,427	462,805,427		
Coal, Natural Gas, Nucl	115,577,346	115,577,346		
Power Plant Operation &	26,266,058	26,266,058		
Transmission System Ope	17,502,727	17,502,727		
Mıscellaneous	3,152,104	3,152,104		

Additional Data

Software ID: Software Version:

EIN: 64-0367992

Name: SOUTH MISSISSIPPI ELECTRIC POWER ASSOCIATION

Form 990, Schedule D, Part X, - Other Liabilities

1 (a) Description of Liability	(b) A mount
Provision for Pensions & Benefits	7,201,800
Nuclear Decommissioning Obligation (ARO)	46,823,090
Deferred Credit - Purchase Power Agreement	1,320,800
Deferred Credits - Gas Hedging	22,287,135
Deferred Credits - Revenue	8,121,761
Deferred Credit - Economic Development & Grant	2,610,961
Clean air (CAIR) Permits	10,456,509
power suppy development fund	14,000,000
Member Prepayments	52,342,627
Def Credit-Benefit Plan Premium Increase	1,000,000