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Department of the Treasury

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)

2009

OMB No 1545-0047

Open to Public

	tovonao	Service						Inspection	
A Fo	the 2	2009 calendar yea	r, or tax year beginning 01	01-2009 and ending	12-31-2009		D Employer ide	ntification number	
_		pplicable Please	C Name of organization FIRST ELECTRIC COOPERATI	VE CORPORATION					
Address change use IRS label or			Doing Business As	71-0056715 E Telephone number					
	ne chai	type. See					(501) 982-4	545	
Initial return Specific Instruc- Terminated Specific Instruc- tions. Number and street (or P O box if mail is not delivered to street address 1000 S JP WRIGHT LOOP ROAD) Room/suite	G Gross receipts \$		
						<u></u>	1		
_	ended r		City or town, state or country JACKSONVILLE, AR 7207652						
Арр	lication	n pending					J		
			ne and address of principa E ANDREWS	IOMICER			ns a group return ates?	for	
			S JP WRIGHT LOOP ROAD ONVILLE, AR 72076526					· _ · _	
		JACKS	ONVILLE, AR 72070320	7		• •	ll affiliates include	•	
r Tax	-exem	npt status 🔽 501(c)) (12) 4 (insert no)	7(a)(1) or			o, attach a list up exemption nun	(see instructions) nber 🟲	
J W	ebsit e	∷► WWW FIRSTE	LECTRIC COOP						
K Form	of org	ganization 🔽 Corporat	tion Trust Association C	Other 🕨		L Year of fo	ormation 1937 M	State of legal domicile Al	
Par		Summary							
	1	· ·	e organization's mission oi ALITY, RELIABLE AND Al	-		TO MEMBE	RS OF THE COO	PERATIVE	
క్							<u></u>	1	
를									
Governance	2	Chack this hav		ntinued its operations o	r disposed o	f more than	25% of its not a	seate	
3		•	members of the governing l						
		_	ndent voting members of th						
Activities &			nployees (Part V, line 2a)		v1, mic 15,			29	
4		Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, column (C), line 12 .					7a	34,20	
	b	Net unrelated busi	iness taxable income from	Form 990-T, line 34			7b	32,4!	
						Pric	or Year	Current Year	
	8	Contributions and	d grants (Part VIII, line 1h	1)				(
를	9	Program service	revenue (Part VIII, line 2g	3)			162,342,132	143,828,48	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)					2,408,403		
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					1,121,360	1,280,31	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)					165,871,895	147,549,89	
	13		ar amounts paid (Part IX, c					!	
	14	Benefits paid to o	or for members (Part IX, co	lumn (A), line 4)					
ဖွ	15		ompensation, employee be	nefits (Part IX, column	(A), lines 5–		14,650,442	18,114,67	
Expenses	16a	10) Professional fund	Iraısıng fees (Part IX, coluı	mn (A) line 11e)			14,030,442	10,114,07	
⊕ 1	ь		enses (Part IX, column (D), line						
ا ش	17		(Part IX, column (A), lines				136,252,031	118,392,38	
	18		Add lines 13–17 (must eq				150,902,473	136,507,06	
	19		penses Subtract line 18 fr			14,969,422		11,042,83	
රීල්						_	g of Current	End of Year	
Net Assets or Fund Balances	20	Total accets (Dar	rt X, line 16)				Year 378,106,309	389,429,37	
A B	21		Part X, line 26)		<u></u>			224,323,91	
25 E	22		nd balances Subtract line 2				218,989,934 159,116,375	165,105,46	
Par		Signature Blo							
			erjury, I declare that I have exam correct, and complete Declaration						
		——————————————————————————————————————		m or preparer (other than or			which prepare	Thas any knowledge	
Sign		*****		-11-13					
Here	1	Signature of office	er .	Date					
		BRUCE ANDREWS Type or print nam							
		T Type of print half	io and title						
		Preparer's Bill Mill	ler	Date 2010-11-13	self		Preparer's identify (see instructions)	ring number	
		 			em	npolyed 🕨 🦵	1		
Paid				EIN ▶					
Prepa		Firm's name (or yours if self-employed),	BOLINGER SEGARS GILBER	T AND MOSS LLP			EIN Þ		
			•	T AND MOSS LLP			EIN Phone no Phone no	(c) 747 2005	

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

IMPROVING QUALITY OF LIFE THROUGH RELIABLE AND AFFORDABLE ELECTRIC SERVICE TO THE MEMBERS

2			rogram services during the year whi		「Yes ▼ No
		these new services on Schedu			,
	Did the organizati	on cease conducting, or make	significant changes in how it conduction.		┌ Yes ┌ No
	If "Yes," describe	these changes on Schedule O			
	Section 501(c)(3)	and 501(c)(4) organizations	each of the organization's three larg and section 4947(a)(1) trusts are ro venue, if any, for each program serv	equired to report the amo	•
a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		C ENERGY TO OUR MEMBERS - 84,8 PATRONAGE CAPITAL	95 ACTIVE SERVICES AT YEAR END WERE PI	ROVIDED ELECTRICITY ON A C	OOPERATIVE BASIS THROUGH
<u></u>	(Code) (Expenses \$	including grants of \$) (Revenue \$)
:	(Code) (Expenses \$	including grants of \$) (Revenue \$.)
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	(Code) (Expenses \$	including grants of \$) (Revenue \$)
:) (Expenses \$ ervices (Describe in Schedule) (Revenue \$	

Part IV	Checklis	t of I	Reauired	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		Νο
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		N o
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	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		Νo
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	ļ	ļ	ı
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
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		Νο
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> "Yes," complete Schedule F, Part II	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		N o
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> " <i>Yes," complete Schedule G, Part I</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		No
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

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		N o
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		N o
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		N o
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		N o
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		N o
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? If "Yes," complete Schedule L, Part			
	IV	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
c	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? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		N o
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N o
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		N o
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		N o
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	Yes	
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	Yes	
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		N o
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	
		F	orm 990	(2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance
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			Yes	No		
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		ies			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 207 1b 0					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes			
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes			
la	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		N o		
b	If "Yes," enter the name of the foreign country ▶					
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo		
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				
ā						
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?					
7	Organizations that may receive deductible contributions under section 170(c).					
а	a 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?					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?					
d	If "Yes," indicate the number of Forms 8282 filed during the year					
e	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				
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?					
3	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	a Did the organization make any taxable distributions under section 4966?					
b	b Did the organization make a distribution to a donor, donor advisor, or related person?					
L O	Section 501(c)(7) organizations. Enter	Ī				
	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	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)					
L2a	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					

1000 S JP WRIGHT LOOP ROAD JACKSONVILLE, AR 720765264

(501) 982-4545

Part VI 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	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
Ь	Enter the number of voting members that are independent 1b 7			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	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 cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue 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 activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		V	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990	11	Yes	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
_	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	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 and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	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)			
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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	Let the States with which a conventible Form 000 is required to be filed.			
17 18	List the States with which a copy of this Form 990 is required to be filed. Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
10	(3)s only) available for public inspection Indicate how you make these available Check all that apply Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of th	ie orga	ınızatıor	n 🕨
	BRUCE ANDREWS			

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	(B) (C) A verage Position (check all that apply)							(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
ROBERT HILL CHAIRMAN	9 60	х		Х				31,952	0	0
LARRY WOOD VICE CHAIR	6 40	х		Х				38,361	0	0
ROBERT MAERTENS SEC/TREAS	5 20	х		Х				31,251	0	0
BJ SWAFFAR DIRECTOR	6 60	х		Х				31,570	0	0
JIMMIE CROCKETT DIRECTOR	4 40	Х						29,427	0	0
PEGGY CUSICK DIRECTOR	7 00	Х						25,760	0	0
TOM HASTY JR DIRECTOR	5 30	Х						29,646	0	0
RICK LOVE DIRECTOR	6 00	Х						31,217	0	0
DAVID LUEBKE DIRECTOR	4 70	Х						29,646	0	0
DON CRABBE PRESIDENT/CEO	48 00			Х				300,255	0	337,693
BRAD FORD COO	45 00			Х				156,556	0	88,246
BRUCE ANDREWS CFO	45 00			Х				175,826	0	65,421
CHARLES N FRIZZELL VP - MARKETING & COMM	45 00					х		110,718	0	62,603
LARRY L HARP VP - OPERATIONS	45 00					х		131,568	0	111,945
JONATHAN R JOYCE VP - ENGINEERING	45 00					х		139,470	0	82,858
THEODORE DEWEESE JR SERVICEMAN	60 00					х		108,541	0	22,084

2	Total number of individuals (including but not limited to those listed above) who received more than
	\$100,000 in reportable compensation from the organization▶7

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes," complete Schedule J for such individual</i>	3		No
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			
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		No

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)	(B)	(C)			
Name and business address	Description of services	Compensation			
UNDERGROUND UTILITY CONTRACTORS INC PO BOX 5095 CABOT, AR 72023	DISTRIBUTION PLANT CONSTRUCTION	4,959,306			
ARKANSAS ELECTRIC COOPERATIVESINC 1 COOPERATIVE WAY LITTLE ROCK, AR 722194208	RIGHT OF WAY CLEARING	3,694,291			
APPLE TREE SERVICE INC 316 N CEDAR STREET NORTH LITTLE ROCK, AR 72114	RIGHT OF WAY CLEARING	1,492,239			
OSMOSE UTILITIES SERVICE INC PO BOX 8000 BUFFALO, NY 14267	POLE INSPECTION,TREATMENT, & MAPPING	635,250			
PROGRESSIVE SOLUTIONS LLC 203 HWY 27 SOUTH MARSHALL, AR 72650	HERBICIDE SPRAYING	418,540			
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►9					

Form 9								Page 9
		Statement o			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts Dist	1a	Federated cam	paigns 1a					
gu	b	Membership du	ıes 1b					
ts, ⊞	C	_	ents 1c					
<u> </u>	d		zations 1d					
A P	e	Government grant						
美声	'	sımılar amounts no						
	g		ibutions included in					
Contributions, gifts, grants and other similar amounts	h	_	s 1a-1f	▶				
				Business Code				
an in	2a	SALE OF ELECTRIC	СІТҮ	221,000	141,084,061	141,084,061		
- Be ₹	ь	PATRONAGE DIVID	DENDS	221,000	1,700,436	1,700,436		
- 60 -	c	SERVICE FEES		221,000	1,043,990	1,043,990		
ž.	d							
Program Serwce Revenue	e							
200	f	All other progra	am service revenue					
<u>Ā</u>	g	Total. Add lines	s 2a-2f		143,828,487			
	3		ome (including dividen	-	2 224 442			0.001.110
			ar amounts) stment of tax-exempt bond		2,394,118			2,394,118
	4 5			· · · · ·	396			396
		,	(ı) Real	(II) Personal				
	6a	Gross Rents		1,274,771				
	Ь	Less rental expenses		4,442				
	c	Rental income or (loss)		1,270,329				
	d	, ,	me or (loss)		1,270,329	209,470	34,208	1,026,651
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory		99,533				
	b	Less cost or other basis and		52,557				
	c	sales expenses Gain or (loss)		46,976				
	d	Net gain or (los	ss)	▶	46,976			46,976
une	8a	Gross income f events (not inc \$	from fundraising Iuding					
Other Revenue			s reported on line 1c) ne 18 a					
‡	ь		penses b					
0	c		(loss) from fundraising	events ┡╴ I				
	9a		from gaming activities ne 19 a					
	b		penses b					
	10a	Gross sales of returns and allo	• •	vitiesF				
			а	312,965				
	b	=	oods sold b	303,376	9,589	9,589		
	С	Miscellaneous	(loss) from sales of inv	entory ► Business Code	9,389	9,389		
	11a	, , , s cananeou:	5 Novelluc	Dasiness code				
	ь							
	С							
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d					
	12	Total royanus	See Instructions .	· .				
	**	iotai ievenue.	See THRUNCHOUR .	• • •	147,549,895	144,047,546	34,208	3,468,141

Part IX Statement of Functional Expenses

Do no	ll other organizations must complete column (A) but are not required to ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(c)	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	general expenses	ехрепьев
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	1,402,827			
5	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	11,402,581			
3	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,185,266			
•	Other employee benefits	3,354,291			
0	Payroll taxes	769,710			
1	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
2	Advertising and promotion				
3	Office expenses				
ı	Information technology				
5	Royalties				
5	Occupancy				
7	Travel				
8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
•	Conferences, conventions, and meetings				
)	Interest	12,355,327			
L	Payments to affiliates				
2	Depreciation, depletion, and amortization	12,246,846			
3	Insurance				
4	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	PURCHASED POWER	78,462,739			
b	DISTRIBUTION EXPENSE	9,477,165			
c	ADMIN & GENERAL EXP	3,243,756			
d	CUSTOMER SERVICE	1,931,006			
е	TRANSMISSION EXPENSE	628,432			
f	All other expenses	47,116			
5	Total functional expenses. Add lines 1 through 24f	136,507,062			
6	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				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			741,124	1	954,727
	2	Savings and temporary cash investments			3,420,002	2	9,662,510
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			9,709,081	4	12,509,166
	5	Receivables from current and former officers, directors, trustee highest compensated employees. Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		1 4958(f)(1)) and			
		Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
8	8	Inventories for sale or use			3,539,922	8	162,100
⋖	9	Prepaid expenses and deferred charges			1,127,896	9	1,110,403
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	389,569,940			
	ь	Less accumulated depreciation	10b	109,487,746	278,612,852	10c	280,082,194
	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			72,429,672	13	74,735,604
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			8,525,760	15	10,212,669
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			378,106,309	16	389,429,373
	17	Accounts payable and accrued expenses .			3,166,224	17	4,129,951
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
<u>.</u>	21	Escrow or custodial account liability Complete Part IV of Schedu	le D.	•		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			193,327,492	23	196,084,669
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			22,496,218	25	24,109,293
	26	Total liabilities. Add lines 17 through 25			218,989,934	26	224,323,913
ķ		Organizations that follow SFAS 117, check here ► and comp through 29, and lines 33 and 34.	olet e I	ines 27			
anc	27	Unrestricted net assets			27		
Balance	28	Temporarily restricted net assets		28			
	29	Permanently restricted net assets				29	
5		Organizations that do not follow SFAS 117, check here ▶	ıd con	ıplete			
or Fund		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			668,640	30	679,235
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			0	31	0
	32	Retained earnings, endowment, accumulated income, or other fu	ınds		158,447,735	32	164,426,225
Š	33	Total net assets or fund balances			159,116,375	33	165,105,460
	34	Total liabilities and net assets/fund balances			378,106,309	34	389,429,373

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
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			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit 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)

Additional Data

Software ID:

Software Version:

EIN: 71-0056715

Name: FIRST ELECTRIC COOPERATIVE CORPORATION

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
PURCHASED POWER	78,462,739			
DISTRIBUTION EXPENSE	9,477,165			
ADMIN & GENERAL EXP	3,243,756			
CUSTOMER SERVICE	1,931,006			
TRANSMISSION EXPENSE	628,432			

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DLN: 93493319065570

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

FALLAC	ii to Foriii 990. F See separate ilistructions.	1115	pection
me of the organization ST ELECTRIC COOPERATIVE CORPORATION		Employer identification r	umber
		71-0056715	
	or Advised Funds or Other Similar	Funds or Accounts. Co	nplete if the
organization answered "Yes" to Fo	(a) Donor advised funds	(b) Funds and other a	ccounts
Total number at end of year		, ,	
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and dono funds are the organization's property, subject to		_	Yes
Did the organization inform all grantees, donor used only for charitable purposes and not for the conferring impermissible private benefit	· /	rany other purpose	Yes
rt III Conservation Easements. Com	plete if the organization answered "Yes	" to Form 990, Part IV, line	2 7.
Purpose(s) of conservation easements held by Preservation of land for public use (e g , re Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held easement on the last day of the tax year	ecreation or pleasure) Preservation o	f an historically importantly land f a certified historic structure orm of a conservation	d area
easement on the last day of the tax year		Held at the End o	f the Year
Total number of conservation easements		2a	i the real
Total acreage restricted by conservation ease	ments	2b	
Number of conservation easements on a certif		2c	
Number of conservation easements included in	` '	2d	
Number of conservation easements modified, t	transferreu, refeaseu, extinguisheu, or termir	ated by the organization during	ı
Number of states where property subject to co	nservation easement is located 🛌		
Does the organization have a written policy req enforcement of the conservation easements it			Yes
Staff and volunteer hours devoted to monitorin	g, inspecting and enforcing conservation ea	ements during the year ►	
A mount of expenses incurred in monitoring, in	specting, and enforcing conservation easem	ents during the year ► \$	
Does each conservation easement reported or $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	n line 2(d) above satisfy the requirements of	section	Yes
In Part XIV, describe how the organization rep balance sheet, and include, if applicable, the to the organization's accounting for conservation	ext of the footnote to the organization's finan		
	ections of Art, Historical Treasure ered "Yes" to Form 990, Part IV, line 8		ts.
If the organization elected, as permitted under art, historical treasures, or other similar asset provide, in Part XIV, the text of the footnote to	s held for public exhibition, education or res	earch in furtherance of public s	
If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to these	eld for public exhibition, education, or research		•
(i) Revenues included in Form 990, Part VIII,	, line 1	▶ \$	
(ii) Assets included in Form 990, Part X		- \$	
If the organization received or held works of ar following amounts required to be reported under			
Revenues included in Form 990, Part VIII, line	e 1	► \$	
,,			

b Assets included in Form 990, Part X

Pari	Till Organizations Maintaining Co	llections of Art	, His	tori	<u>cal Tre</u>	asures, or (Othe	<u>r Similar As</u>	sets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	ne foll	owing th	at are a sıgnıfıc	ant u	ise of its collect	ion	
а	Public exhibition		d	Γ	Loan or	exchange prog	grams	;		
ь	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	ollections and expla	ın hov	w they	/ further	the organizatio	n's e	xempt purpose	ın	
5	During the year, did the organization solicity assets to be sold to raise funds rather than t								┌ Yes	┌ No
Par	t IV Escrow and Custodial Arrang						ed "Y	es" to Form 9	90,	
	Part IV, line 9, or reported an ar									
	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ons or other as	sets		┌ Yes	Г No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	/ing ta	able	I		· -		
_							_	An	nount	
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 Fo		e 21?						Yes	No
	If "Yes," explain the arrangement in Part XI\				L UN7 U		- D-	1.777 1 40		
Рα	rt V Endowment Funds. Complete	(a)Current Year)Prior Y		c)Two Years Back		TT IV, IINE IU. Three Years Back	(e) Four Y	ears Back
la	Beginning of year balance	(4,54,151,151,151,151,151,151,151,151,151		, , ,,,,,,		(0)	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(-),	
b	Contributions									
c	Investment earnings or losses									
d	Grants or scholarships									
e	Other expenditures for facilities									
f	and programs				+		+			
g	End of year balance									
9 2	Provide the estimated percentage of the year	r and halance held a								
			13							
a	Board designated or quasi-endowment	%								
Ь	Permanent endowment • %	1								
c 3a	Term endowment % Are there endowment funds not in the posse	ssion of the organize	ation :	that a	re held s	and administers	d for	the		
Ja	organization by	331011 Of the organize	ation	tilat a	ire ireia e	ana aanimistere	- u 101	tile	Yes	No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	<u> </u>
	If "Yes" to 3a(II), are the related organizatio							31)	
4 0 a c	Describe in Part XIV the intended uses of the trial trial trial trials.					n Dart V line	. 10			
æ.	Text Transfer Transfe	s, and Equipme	<u> </u>	(a) (Cost or oth (investme	er (b) Cost or o	ther	(c) Accumulated depreciation	(d) Bo	ok value
1 - 1	Land					` `	, 8,537	-	1	3,028,53
	Buildings		•			13,760		3,602,438	1	0,157,612
	Leasehold improvements		•			13,760	0,000	3,002,430	1	0,137,01
	Equipment		•			365,32	3,515	105,885,308	3 25	9,438,20
	Other						7,838	200,000,000		7,457,838
- '				1		.,,,,	,			, ,

280,082,194

Part VII Investments—Other Securities. 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
Financial derivatives		Cost of effu-of-year market value
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	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
	(=) Book value	Cost or end-of-year market value
See Additional Data Table		
	1	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin		
(a) Descrip	ition	(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		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
CONSUMER DEPOSITS AND PREPAYMENTS	5,773,080	
INTEREST PAYABLE	1,027,451	
ACCUMULATED PROVISION FOR PENSIONS AND OTHER POST-RETIREMENT BENEFITS	12,719,041	
DEFERRED CREDITS	314,709	
OTHER CURRENT AND ACCRUED LIABILITIES	4,275,012	
T. M. Z. COMMENT AND ACCROSED LIABILITIES	7,213,012	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	24,109,293	
	, , -	

_	rotal revenue (Form 990, Part VIII, column (A), line 12)		147,349,093
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	136,507,062
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	11,042,833
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-5,053,748
9	Total adjustments (net) Add lines 4 - 8	9	-5,053,748
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	5,989,085
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	147,547,577
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 4,441		
e	Add lines 2a through 2d	2e	4,441
3	Subtract line 2e from line 1	3	147,543,136
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) 6,759		
c	Add lines 4a and 4b	4c	6,759
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	147,549,895
Part	XIIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	136,504,744
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	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d 4,441	1	
e	Add lines 2a through 2d	2e	4,441
3	Subtract line 2e from line 1	3	136,500,303
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)	1	
С	Add lines 4a and 4b	4c	6,759
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	136,507,062
			·

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

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

Ident if ier	Return Reference	Explanation
Part X	Description of Uncertain Tax Positions Under FIN 48	ON JANUARY 1, 2009, THE COOPERATIVE ADOPTED THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA THE PRIMARY TAX POSITION OF THE COOPERATIVE IS ITS FILING STATUS AS A TAX EXEMPT ENTITY THE COOPERATIVE DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT ITS TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE, AND THAT ALL TAX BENEFITS ARE LIKELY TO BE REALIZED UPON SETTLEMENT WITH TAXING AUTHORITIES
Part XI, Line 8 - Other Adjustments		NET INCREASE IN MEMBERSHIPS 10595 OTHER COMPREHENSIVE INCOME PROVISION FOR PENSIONS AND BENEFITS -889353 UNCLAMINED CAPITAL CREDIT RETIREMENTS RETAINED PER STATE LAW 865030 PATRONAGE CAPITAL RETIREMENTS -5040015 TRANSFER TO OTHER EQUITIES -5
Part XII, Line 2d - Other Adjustments		TO WER RENTAL EXPENSES ALLO CATED TO TO WER RENTAL INCOME 4441
Part XII, Line 4b - Other Adjustments		GENERAL EXPENSES RECLASSED TO NON-OPERATING MARGINS 6759
Part XIII, Line 2d - Other Adjustments		TO WER RENTAL EXPENSES ALLO CATED TO TO WER RENTAL INCOME 4441
Part XIII, Line 4b - Other Adjustments		GENERAL EXPENSES RECLASSED TO NON-OPERATING MARGINS 6759
		Part IX THE AMOUNT OF OTHER ASSETS ON FORM 990, PAGE 11, PART IX, LINE 15 DOES NOT EQUAL OR EXCEED 5 PERCENT OF THE TOTAL ASSETS ON FORM 990, PAGE 11, PART X, LINE 16, COLUMN B CONSEQUENTLY IN ACCORDANCE WITH IRS INSTRUCTIONS SCHEDULE D, PART IX HAS BEEN LEFT BLANK

Additional Data

Software ID: Software Version:

EIN: 71-0056715

Name: FIRST ELECTRIC COOPERATIVE CORPORATION

Form 990, Schedule D, Part VIII - Investments— Program Related

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value		
PATRONAGE CAPITAL - CFC	3,714,843	С		
PATRONAGE CAPITAL - AECC	51,341,136	С		
PATRONAGE CAPITAL - AECI	4,569,888	С		
PATRONAGE CAPITAL - NISC	232,752	С		
PATRONAGE CAPITAL - FEDERATED RURAL ELECTRIC INSURANCE EXCHANGE	448,321	C		
PATRONAGE CAPITAL - NRTC	13,714	С		
PATRONAGE CAPITAL - ARESIT	481,972	С		
CAPITAL TERM CERTIFICATES - CFC	12,798,990	С		
MEMBER CAPITAL SECURITIES	1,000,000	С		
INVESTMENT IN CRC	20,721	С		
OTHER INVESTMENTS	3,200	С		
ENERGY EFFICIENCY LOANS	110,067	C		

DLN: 93493319065570

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

lame	e of	the c	organizat ion	
IRST	ELEC	CTRIC	COOPERATIVE	CORPORATION

Employer identification number

71-0056715

Pa	Questions Regarding Compensation	on				
					Yes	Νo
1a	Check the appropiate box(es) if the organization possible 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement orprovision of all the expenses des			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		
3	Indicate which, if any, of the following the organiza organization's CEO/Executive Director Check all					
	∇ Compensation committee	Г	Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	I, Section A, line ${f 1}{f a}$ with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	nt?	4a		Νo
Ь	Participate in, or receive payment from, a supplem	ental non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	provide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only n	nust comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a,	did the organization pay or accrue any			
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 compensation contingent on the net earnings of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			6a		
b	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 payments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described	ın Regs	section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	he rebutta	able presumption procedure described in Regulations	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)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	ļ	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation			other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
DON CRABBE	(ı) (ıı)	278,551 0	442	21,262	319,735	5 17,958 0 0	8 637,948 0 0	
BRAD FORD	(ı) (ıı)	151,482 0	472		74,113	3 14,133 0 0	3 244,802 0 0	
BRUCE ANDREWS	(ı) (ıı)	163,811	472			1	6 241,247 0 0)
CHARLES N FRIZZELL	(ı) (ıı)	106,752 0	513		3 45,507 0	17,096	6 173,321 0 0)
LARRY L HARP	(ı) (ıı)	127,356 0	472 0	3,740	98,512	13,433	3 243,513 0 0)
JONATHAN R JOYCE	(ı) (ıı)	128,776 0	469	10,225	I	1	3 222,328 0 0	
	'							
				-			'	
	+			'			-	
			<u> </u>					
	<u></u> '			-	 		'	
	+			-				
	+	<u> </u>			<u> </u>			

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
Supplemental Information	Part III	Part II, Column C INCLUDED IN THIS AMOUNT IS THE INCREASE IN ACTUARIAL VALUE OF BENEFITS PAYABLE UNDER A DEFINED BENEFIT RETIREMENT PLAN THE CONTRIBUTION RATE FOR PARTICIPANTS IN THE NRECA R&S DEFINED BENEFIT PENSION PLAN ARE THE SAME FOR ALL INDIVIDUALS IN THIS MULTI-EMPLOYER PLAN THE CHANGE IN ACTUARIAL VALUE FOR EACH PARTICIPANT, HOWEVER, VARIES WITH AGE IN OTHER WORDS, THE OLDER A PLAN PARTICIPANT IS, THE GREATER THE INCREASE IN THAT INDIVIDUAL'S CHANGE IN ACTUARIAL VALUE, ALL OTHER WORDS, THE OLDER A PLAN PARTICIPANT IS, THE GREATER THE INCREASE IN THAT INDIVIDUAL'S CHANGE IN ACTUARIAL VALUE, ALL OTHER THINGS BEING EQUAL BECAUSE THIS RELATES TO A MULTI-EMPLOYER PLAN, CASH CONTRIBUTION TO THE PLAN IN LIEU OF THE ACTUARIAL INCREASE ARE EXPENSED IN THE FINANCIAL STATEMENTS DON CRABBE ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$314,835 401(K) EMPLOYER MATCH 4,900 TOTAL COLUMN C 319,735 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (314,835) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN \$6,146 TOTAL COOPERATIVE CASH CONTRIBUTION \$61,046 BRAD FOR ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$70,975 401(K) EMPLOYER MATCH 3,138 TOTAL COLUMN C 74,113 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN 30,779 TOTAL COOPERATIVE CASH CONTRIBUTION \$33,917 BRUCE ANDREWS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$48,449 401(K) EMPLOYER MATCH 3,376 TOTAL COLUMN C 51,825 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$43,709 TOTAL COLUMN C 51,825 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$43,246 401 (K) EMPLOYER MATCH 2,261 TOTAL COLUMN C 45,507 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$43,246 401 (K) EMPLOYER MATCH 2,261 TOTAL COLUMN C 45,507 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$43,246 401 (K) EMPLOYER MATCH 2,261 TOTAL COLUMN C 45,507 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$43,246 401 (K) EMPLOYER MATCH 2,261 TOTAL COLUMN C 45,507 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$43,246 401 (K) EMPLOYER MATCH 2,261 TOTAL COLUMN C 45,507 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$43,24
		PLAN \$95,871 401(K) EMPLOYER MATCH 2,642 TOTAL COLUMN C 98,512 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (95,871) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 24,740 TOTAL COOPERATIVE CASH CONTRIBUTION \$27,382 JONATHAN R JOYCE ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$66,041 401(K) EMPLOYER MATCH 2,684 TOTAL COLUMN C 68,725 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (66,041) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 25,202 TOTAL COOPERATIVE CASH CONTRIBUTION \$27,886

Schedule L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions with Interested Persons

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

DLN: 93493319065570

2009

Open to Public Inspection

Name	of	t he	organizat ion	

FIRST FLECTRIC COOPERATIVE CORPORATION

Employer identification number

71-0056715

Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

(a) Name of disqualified person 1

(b) Description of transaction

(c) Corrected?

Yes No

2	Enter the amount of tax imposed on the organization managers or disqualified persons during the year under		
	section 4958	ŧ.	
	·		
3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization 🕨 🕏	١,	

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(f) (b) Loan to **(e)** In Approved (g)Written (a) Name of interested person and or from the (c)O riginal default? by board or agreement? (d)Balance due organization? purpose principal amount committee? Yes Τо From Yes No Yes

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person

(b)Relationship between interested person and the organization

(c)A mount of grant or type of assistance

Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
ARKANSAS ELECTRIC COOPERATIVES INC	THE PRESIDENT/CEO AND A DIRECTOR OF THE COOPERATIVE SERVE ON AECI'S BOARD	7,752,600	THE COOPERATIVE PURCHASES ELECTRIC UTILITY SUPPLIES FROM ARKANSAS ELECTRIC COOPERATIVES, INC		No
ARKANSAS ELECTRIC COOPERATIVE CORP	THE PRESIDENT/CEO AND A DIRECTOR OF THE COOPERATIVE SERVE ON AECC'S BOARD	78,462,739	THE COOPERATIVE PURCHASES WHOLESALE ELECTRICITY FROM ARKANSAS ELECTRIC COOPERATIVE CORP		No
ARKANSAS RURAL ELECTRIC SELF INSURANCE TRUST	THE PRESIDENT/CEO SERVES ON THE TRUST'S BOARD	245,072	THE COOPERATIVE PURCHASES WORKER'S COMPENSATION INSURANCE FROM ARKANSAS RURAL ELECTRIC SELF INSURANCE TRUST		No
NATIONAL INFORMATION SOLUTIONS COOPERATIVE (NISC)	THE PRESIDENT/CEO OF THE COOPERATIVE SERVES ON NISC'S BOARD	891,924	NATIONAL INFORMATION SOLUTIONS COOPERATIVE (NISC)PROVIDES SOFTWARE AND SOFTWARE SUPPORT TO THE COOPERATIVE		No

OMB No 1545-0047

Inspection

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 FIRST ELECTRIC COOPERATIVE CORPORATION **Employer identification number**

71-0056715

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		BUSINESS RELATIONSHIP DON CRABBE (CEO) AND ROBERT HILL (DIRECTOR) BOTH SERVE ON THE BOARD OF ARKANSAS ELECTRIC COOPERATIVE CORPORATION (AECC) AT THE REQUEST OF AND FOR THE BENEFIT OF THE COOPERATIVE DON CRABBE (CEO) AND BJ SWAFFAR (DIRECTOR) BOTH SERVE ON THE BOARD OF ARKANSAS ELECTRIC COOPERATIVES, INC (AECI) AT THE REQUEST OF AND FOR THE BENEFIT OF THE COOPERATIVE
Form 990, Part VI, Section A, line 4		ARTICLE VI, SECTION 2, ELECTION AND TERM OF OFFICE OF OFFICERS OF THE COOPERATIVE, WAS AMENDED TO ALLOW THE PRESIDENT OF THE COOPERATIVE, WHEN HE OR SHE IS A PAID EMPLOYEE OF THE COOPERATIVE, TO BE ELECTED BY THE BOARD FOR NO SPECIFIC TERM, THUS REMOVING THE REQUIREMENT FOR A ANNUAL ELECTION BY THE BOARD THIS BY LAW AMENDMENT OF SECTION 2 ALSO ALLOWS THE PRESIDENT TO APPOINT ONE OR MORE PAID EMPLOYEES OF THE COOPERATIVE AS CHIEF OPERATING OFFICER, CHIEF FINANCIAL OFFICER, VICE PRESIDENTS AND ASSISTANT SECRETARIES OF THE COOPERATIVE WITHOUT THE ELECTION OF THE BOARD, THE OFFICERS APPOINTED BY THE PRESIDENT WILL HAVE NO SPECIFIC TERM OF OFFICE
Form 990, Part VI, Section A, line 6		THE COOPERATIVE WAS FORMED BY THE MEMBERS TO PROVIDE ELECTRIC SERVICE AT COST ON A COOPERATIVE BASIS
Form 990, Part VI, Section A, line 7a		THE MEMBERS OF THE COOPERATIVE VOTE ON THE BOARD OF DIRECTORS ELECTIONS ARE DONE ON A ONE MEMBER ONE VOTE BASIS
Form 990, Part VI, Section A, line 7b		THE FOLLOWING ACTS REQUIRE APPROVAL OF THE MEMBERS OF THE COOPERATIVE 1 DISSOLUTION/LIQUIDATION OF THE COOPERATIVE 2 MERGER OR CONSOLIDATION OF THE COOPERATIVE WITH ANOTHER ORGANIZATION 3 THE DISPOSAL OF A SUBSTANTIAL PORTION OF THE COOPERATIVE'S ASSETS 4 INCREASE IN BONDED INDEBTEDNESS
Form 990, Part VI, Section B, line 11		MANAGEMENT PRESENTED A COPY OF THE FORM 990 TO the BOARD FOR DISCUSSION, REVIEW AND APPROVAL PRIOR TO FILING
Form 990, Part VI, Section B, Ine 12c		ON AN ANNUAL BASIS, THE COOPERATIVE WILL REQUIRE THE BOARD OF DIRECTORS AND ITS OFFICERS TO COMPLETE AND SIGN A CONFLICT OF INTEREST CERTIFICATION AND DISCLOSURE FORM AND SUBMIT THEM TO THE GENERAL MANAGER/CEO AND BOARD CHAIRMAN
Form 990, Part VI, Section B, line 15		THE BOARD OF DIRECTORS USE A RETENTION AND COMPENSATION PLAN COMMITTEE AND THE EXPERTISE OF AN INDEPENDENT COMPENSATION CONSULTANT WHEN DETERMINING THE COMPENSATION OF THE PRESIDENT/CEO THE INDEPENDENT COMPENSATION CONSULTANT ANALYZES THE COMPENSATION PAID TO THE CEOS OF ELECTRIC COOPERATIVES OF SIMILAR SIZE STATEWIDE AND NATIONWIDE THE CEO USES THE EXPERTISE OF AN INDEPENDENT COMPENSATION CONSULTANT AND A COMPENSATION SURVEY WHEN DETERMINING THE COMPENSATION OF THE COOPERATIVES OTHER EMPLOYEES MEETING THE DEFINITION OF OFFICER AND KEY EMPLOYEES, IF ANY THE SURVEY INCLUDES SALARIES FROM SIMILAR COOPERATIVES THROUGHOUT ARKANSAS AND THE NATION

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE COOPERATIVE PROVIDES A SUMMARIZED COPY OF THE AUDITED FINANCIAL STATEMENTS TO ALL MEMBERS OF THE COOPERATIVE PRIOR TO THE ANNUAL MEETING THE COOPERATIVE'S BY LAWS AND ANNUAL REPORT ARE ALSO AVAILABLE ON THE COOPERATIVE'S WEBSITE THE COOPERATIVE MAKES A COMPLETE COPY OF THE AUDITED FINANCIAL STATEMENTS AVAILABLE AT THE ANNUAL MEETING AND UPON REQUEST OF ANY MEMBER

Form 990, Part XI, Line 2c AUDIT COMMITTEE THE BOARD OF DIRECT THE FINANCIAL STATEMENT AUDIT AND SELECT THE INDEPENDENT OF THE FINANCIAL STATEMENT AUDIT AND SELECT THE INDEPENDENT OF THE FINANCIAL STATEMENT AUDIT AND SELECT THE INDEPENDENT OF THE FINANCIAL STATEMENT AUDIT AND SELECT THE INDEPENDENT OF THE FINANCIAL SEXTABLISHED A DEFINED CONTRIBUTION PLASES TO THE PLAN DOCUMENT, THE COOPERATIVE PROVIDES A MATCHING ASSE FOR ALL EMPLOYEES HIRED IN 2006 OR LATER YEARS FOR A MATCHING CONTRIBUTION OF UP TO 2% FOR ALL PARTICIPATING MULTI-EMPLOYER DEFINED BENEFIT PLAN CONTRIBUTIONS FOR BOTH PLANS ARE AVAILABLE TO MEETING THE ELIGIBILITY REQUIREMENTS OF SUCH PLANS ONLY MULTI-EMPLOYER DEFINED BENEFIT PLAN THE COOPERATIVE ALS EMPLOYEES, INCLUDING OFFICERS AND KEY EMPLOYEES, THROUGH OF THE ACTUPANCY OF TH	IT FINANCIAL STATEMENT AUDITOR IN ORDER TO PROVIDE RETIREMENT BEN N UNDER SECTION 401(K) OF THE INTER G CONTRIBUTION UP TO 8% OF A PARTIC LL EMPLOYEES HIRED PRIOR TO 2006 TH G EMPLOYEES ADDITIONALLY, THE COOF HIS PLAN ARE BASED ON THE FULL FUND! PARTICIPATING EMPLOYEES, INCLUDIN EMPLOYEES HIRED PRIOR TO 2006 ARE SO PROVIDES HEALTH, DENTAL, VISION. GH A QUALIFIED PLAN THE AMOUNTS REI ARIAL INCREASE IN THE DEFINED BENEF D THE INSURANCE PREMIUMS PAID FOR T OPERATIVE ALSO PROVIDES POST-RETI /ALUE OF THESE BENEFITS HAS NOT BEE ROM THE PURCHASE OF WHOLESALE POW SULT FROM THE PAYMENT OF INTEREST F IVE ORGANIZATIONS THE EXPENSES ASS DIRECT COMPONENT OF COST OF THE EL G SYSTEM THE ACCOUNTING RECORDS OF ICOUNTS AS PRESCRIBED BY THE FEDERA FOR ELECTRIC BORROWERS OF THE NAT TEM OF ACCOUNTING DOES NOT RECORD OPERATIVE WILL BREAK OUT SALARIES THE THEIR ACCOUNTING SYSTEM, BUT OTH SE CATEGORIES REQUIRED BY THE UNIFO OF ORM W-3 SALARIES AND WAGES ARE A DESCRIBED ABOVE IN AN EFFORT TO EXP CILIATION IS PROVIDED TOTAL PER LIN OF ORM W-3 SALARIES AND WAGES ARE A DESCRIBED ABOVE IN AN EFFORT TO EXP CILIATION IS PROVIDED TOTAL PER LIN OF ORM W-3 SALARIES AND WAGES ARE A DESCRIBED ABOVE IN AN EFFORT TO EXP CILIATION IS PROVIDED TOTAL PER LIN OF ORM W-3 \$14,273,367 FORM 990, Pa LOWING IS A BREAKDOWN OF THE EXPEN LINE 24 OFFICE SUPPLIES AND EXPENSI OF EXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE 322,871 MISCEL OF SEXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE 322,871 MISCEL OF SEXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE 322,871 MISCEL OF SEXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE 322,871 MISCEL OF SEXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE 322,871 MISCEL OF SEXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE 322,871 MISCEL OF SEXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE 322,871 MISCEL OF SEXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE 322,871 MISCEL OF SEXPENSE 61,554 CAPITAL CREDITS EXP OF OMMISSION EXPENSE OF SEXPENSE 61,554 CAPITAL CREDITS OF OMMI	FORM 990, Part VII, Column F TO EFITS TO ITS EMPLOYEES, THE NAL REVENUE CODE AS PART OF CIPATING EMPLOYEE'S BASE SALARY E COOPERATIVE PROVIDES A PERATIVE PARTICIPATES IN A ING LIMITATION OF SUCH PLAN G OFFICERS AND KEY EMPLOYEES, ELIGIBLE TO PARTICIPATE IN THE AND LIFE INSURANCE TO ALL PORTED ON PART VII, COLUMN (F) IT PLAN FOR THE OFFICER, THE 'HE BENEFIT OF THE OFFICER OR KEY REMENT HEALTH INSURANCE N ESTIMATED FORM 990, Part VIII, VER FROM A GENERATION & FROM COOPERATIVE BANKS AND THE GOCIATED WITH PURCHASES FROM LECTRIC SERVICE PROVIDED BY THE F THE COOPERATIVE ARE AL ENERGY REGULATORY IONAL RURAL UTILITIES DEXPENSES IN THE GENERAL GAND WAGES, EMPLOYEE BENEFITS HER EXPENSES THAT ARE DESCRIBED ORM SYSTEM OF ACCOUNTS FORM ALLOCATED TO ASSET, LIABILITY, LAIN WHY THE AMOUNTS REPORTED INCLOCATED TO ASSET, LIABILITY, LAIN WHY THE AMOUNTS REPORTED INES 5-7 \$12,805,408 LESS NE 5 (491,360) PLUS SALARIES AND BITLIX, LINE 24 BREAKDOWN OF ISSES REPORTED AS E \$430,727 OUTSIDE SERVICES 'ENSE 73,672 DIRECTOR EXPENSES LLANEOUS GENERAL EXPENSE BINDEPENDENT DIRECTORS BJ BOARD OF ARKANSAS ELECTRIC COOPERATIVE IS A MEMBER OF IAS NO OWNERSHIP INTEREST IN ARKANSAS ELECTRIC COOPERATIVE, EIS ON THE BOARD OF ARKANSAS ANSAS ELECTRIC COOPERATIVE
CORP THE COOPERATIVE IS A MEMBER OF ARKANSAS ELECTRIC O		
REPRESENTATIVE ON AECC'S BOARD MR HILL HAS NO OWNERSHI		
THE COOPERATIVE DOING BUSINESS WITH AECC		
For Paperwork Reduction Act Notice, see the Instructions for Form 990	Cat No 51056K	Schedule O (Form 990) 2009

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DLN: 93493319065570

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
FIRST ELECTRIC COOPERATIVE CORPORATION

Employer

Employer identification number

71-0056715

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

Name, address, and EIN of disregarded entity

(b) Primary activity (c)
Legal domicile (state
or foreign country)

(d) Total income (e) End-of-year assets **(f)** Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity

(c) Legal domicile (state or foreign country) (d) Exempt Code section

Public charity status (if section 501(c)(3))

Direct controlling entity

FIRST ELECTRIC TRUST

1000 S JP WRIGHT LOOP ROAD

JACKSONVILLE, AR 72076 31-1586917 DISBURSEMENT OF FUNDS FOR CHARITABLE PURPOSES IN THIS COOP 'S SERVICE AREA

AR

501(c)(3)

9 N/A

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, III	ne 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a)
Name, address, and EIN of Primar related organization

(b) Primary activity (c)
Legal
domicile
(state or
foreign
country)

(d)
Direct controlling
entity

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income

(g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Forn 1065) (j) General or managing partner?

Yes No

Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
FIRST ENERGY SERVICES OF ARKANSAS INC PO BOX 5018 JACKSONVILLE, AR72078 62-1695757	INACTIVE	AR	N/A	С			100 000 %

(3)

(4)

(5)

(6)

Part V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36	j.)		
Note	. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 During	the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Rec	eipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b Gıft,	grant, or capital contribution to other organization(s)	1b		No
c Gıft,	grant, or capital contribution from other organization(s)	1c		No
d Loar	ns or loan guarantees to or for other organization(s)	1d		No
e Loar	ns or loan guarantees by other organization(s)	1e		No
f Sale	of assets to other organization(s)	1f		No
g Puro	chase of assets from other organization(s)	1 g		No
h Exc	hange of assets	1h		No
i Leas	e of facilities, equipment, or other assets to other organization(s)	1i		No
j Leas	e of facilities, equipment, or other assets from other organization(s)	1 j		No
k Perf	ormance of services or membership or fundraising solicitations for other organization(s)	1k		No
I Perfo	ormance of services or membership or fundraising solicitations by other organization(s)	11		No
m Shar	ring of facilities, equipment, mailing lists, or other assets	1m		No
n Sha	ring of paid employees	1n		No
o Rein	nbursement paid to other organization for expenses	10		No
p Rein	nbursement paid by other organization for expenses	1p	Yes	\vdash
q Oth	er transfer of cash or property to other organization(s)	1 q		No
r Othe	er transfer of cash or property from other organization(s)	1 r		No
2 If the	e answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction t	:hresholds		
	(a) (b) Transaction Name of other organization type(a-r)	(Amount	(c) t involve	ed
L) FIRST EI	LECTRIC TRUST - NA LESS THAN 50000			
L) See Addi 2)	itional Data Table			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No