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Return of Organization Exempt From Income Tax

OMB No 1545-0047 201**0**

Open to Public

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

Department of the Treasury Internal Revenue Service Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2010 calendar year, or tax year beginning 2010, and ending C Name of organization Southeastern Electric Cooperative, Inc. D Employer identification number Check if applicable Doing Business As Address change 46-0454373 Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change [] Initial return 605-648-3619 City or town, state or country, and ZIP + 4 Terminated Marion, South Dakota 57043-0388 G Gross receipts \$ 40,088,675 Amended return F Name and address of principal officer H(a) Is this a group return for affiliates? Yes No Application pending Brad Schardin, same as C above H(b) Are all affiliates included? Yes No If "No." attach a list (see instructions) 501(c)(3) 501(c) (12) ◀ (insert no) ☐ 4947(a)(1) or Tax-exempt status Website: ▶ www.southeasternelectric.com H(c) Group exemption number ▶ 2000 M State of legal domicile Year of formation Part I Summary Briefly describe the organization's mission or most significant activities: Providing electric service to approximately 15,000 consumers. Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 10 Number of independent voting members of the governing body (Part VI, line 1b) 4 10 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 57 Total number of volunteers (estimate if necessary) 6 0 Total unrelated business revenue from Part. VIII, column (C),:line_12() 0 7a Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** Contributions and grants (Part VIII, line 1h). 8 O Program service revenue (Part VIII, line 2g)-34,009,860 9 39,338,926 Investment income (Part VIII, column (A), lines 3, 4; and 7d) 17. 10 105,013 387,022 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 2,133,271 21,526 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 36,248,144 39,747,474 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3.118,006 3.650.434 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 28.461.470 32,633,977 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 31,579,476 36,284,411 19 Revenue less expenses. Subtract line 18 from line 12 4,668,668 3,463,063 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 96,241,238 100,039,675 21 Total liabilities (Part X, line 26) . 63,015,468 64,172,156 Net assets or fund balances. Subtract line 21 from line 20 33,225,770 35,867,519 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Mun Sign McDONALD, CFO/ASSISTANT MANAGER Here Type or print name and title Print/Type preparer's name Preparer's signature Date Paid Check | if self-employed Preparer Firm's name Firm's EIN ▶ **Use Only**

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.



🛚 Yes 🔲 No

Form **990** (2010)

Phone no

Cat No. 11282Y

Form 99	0 (2010)	P	age 2
Part l	Statement of Program Sen	vice Accomplishments as a response to any question in this Part III	
			_ [✓]
1		rission: ving our changing and diverse membership with quality electric service through sound education and progressive leadership, today and in the future.	
2		significant program services during the year which were not listed on the] No
3	If "Yes," describe these new service Did the organization cease condiservices?	es on Schedule O. ucting, or make significant changes in how it conducts, any program] No
4	501(c)(3) and 501(c)(4) organization	n Schedule O. every eve	
4a	Providing electric service to approxi	including grants of \$) (Revenue \$) mately 15,000 consumers. Added/upgraded 96 miles of line and retired 82 miles of line.	
			-
4b		including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)	
		·	
4d	Other program services. (Describe (Expenses \$ include)	ın Schedule O.) dıng grants of \$) (Revenue \$)	
	Total program service expenses		

Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		1
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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		 ✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		/
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			<u> </u>
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	/	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	1	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	111	/	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	√	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		1
14 a		14a		1
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? If "Yes," complete Schedule F, Parts I and IV	14b		1
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 United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
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 United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
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		1
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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Part	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	Yes	No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
23	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	√	✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 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		1
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		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		∀
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		1
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			
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34 35		1
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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? <i>If</i> "Yes," <i>complete Schedule R</i> , <i>Part VI</i>			1
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	37	\ \	\ <u> </u>

Form **990** (2010)

P _a rt	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 93			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
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 2a 57			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			√
b	If "Yes," enter the name of the foreign country:	4a		V
b	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		,
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			,
7	gifts were not tax deductible?	6b		
	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		1
ь	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		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		✓
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	Į !		
11	Section 501(c)(12) organizations. Enter:			
a	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.)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		†
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		l '

Part	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change O. See instructions. Check if Schedule O contains a response to any question in this Part VI	es ın	Sche	
Secti	on A. Governing Body and Management			
1a b 2	Enter the number of voting members of the governing body at the end of the tax year Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		Yes	No
3	any other officer, director, trustee, or key employee?	2		✓_
	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		√
4 5 6	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Does the organization have members or stockholders?	5	✓	√
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	√	
ь 8	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b	√	
a b	The governing body?	8a 8b	√	
9 Sasti	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	1	✓
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	oae.) Yes	Na.
100	Does the organization have local chapters, branches, or affiliates?	400	105	No ✓
10a 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?	10a		<u> </u>
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.	12c		
13	Does the organization have a written whistleblower policy?	13	√	
14 15	Does the organization have a written document retention and destruction policy?	14	√	
a b	The organization's CEO, Executive Director, or top management official	15a 15b	✓	✓
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
b	with a taxable entity during the year?	16a		✓
	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	:	
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 for public inspection. Indicate how you make these available. Check all that apply.)s only	y) ava	ulable
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict cand financial statements available to the public.		·	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: > John McDonald, 501 South Broadway Avenue, Marion, South Dakota 57043	of the)	

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

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 neither the organization n	1	d org	aniz			ompe	nsa			
(A)	(B)			•	C)			(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual tr or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) John Ostraat	6							7,460	o	0
President		1		✓				1,400	0	
(2) Don Heeren	6						l	7,185	o	0
Vice President		✓	<u>L</u>	✓			<u>L</u> _	7,103	Ů	<u> </u>
(3) Pat Scheier	5					1		7,485	اه	o
Secretary		✓	<u> </u>	✓				7,403	Ů	•
(4) Daryl Terveen Treasurer	4	1		/				6,860	o	0
(5) Harley Bruns Director	4	1						6,760	0	0
(6) Chris Hofer Director	4	1						6,610	o	0
(7) Lynell Hofer Director	2	/						5,310	0	0
(8) Steve Holmberg Director	4	1						6,910	0	0
(9) Leslie Mehlhaff Director	4	1						5,860	О	O
(10) Richard Olsen Director	6	1						8,610	o	Q
(11) Brad Schardin CEO/General Manager	50			1	1	1		150,774	0	118,639
(12) John McDonald CFO/Assistant Manager	45			1		1		92,672	0	84,458
(13) Todd Nelson Consumer Relations and IT Manager	45					1		84,906	0	50,143
(14) Mark Neu Member Services and Marketing Manager	45					1		84,557	0	50,665
(15) Tim Chance Operations Manager	45					/		89,641	0	31,472
(16)										

	(A)	(B)	Dank	/-)) 			-4.3	(D)	(E)	1		(F)	
	Name and title	Average hours per week (describe hours for related organizations in Schedule O)	Individual tri	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportab compensation related organizatio (W-2/1099-M	n from amour other compens compens from (organization)		om the anizatio d related	on n i
(17)														
(18)														
(19)									<u> </u>					
(20)														
(21)						<u> </u>				-		-		
(22)				ļ 	-									
(23)				-										
(24)		<u> </u>						-			+			
(25)												-		
(26)					-			_						
(27)								_	<u> </u>					
(28)				-				-						
1b c	Sub-total	VII, Sectio			•			>	571,600		0		33	35,377
d 2	Total number of individuals (including but		to th					<u>▶</u>	571,600 who received me	ore than \$1	00,000	in	33	35,377
	reportable compensation from the organi	zation ► 1								·			Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete to							emp	ployee, or high	est compe	nsated	3		1
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	portal	ble (con	npei	nsatio							
5	Individual											4	/	
	for services rendered to the organization										···	5	<u></u>	✓
Section 1	on B. Independent Contractors Complete this table for your five highest	compensat	ed inc	dep	end	ent	contr	act	tors that receive	ed more tha	n \$100	,000 c	of	
	compensation from the organization. (A)							Γ	(B)			(C		
Dave's	Name and business add s Construction, Inc., 5104 North Harvestore F		ils. Si	D 57	107			Liti	Description of s			Compen		57,773
	rock Digging Services, Inc., 221 West 4th St							_	ility construction					31,674
							,							
2	Total number of independent contractor received more than \$100,000 in compens								hose listed abo	ove) who				
	received infore than \$100,000 in compens	audi II dill	uie O	yaı	ıızd	uUil	- 2	:						

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

Part	VIII	Statement 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
ts st	1a	Federated campaigns 1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b					
S, g	С	Fundraising events 1c					
ar a	d	Related organizations 1d					
S E	е	Government grants (contributions) 1e					
ar s	f	All other contributions, gifts, grants,		-			
년 등		and similar amounts not included above 11			i		
a a	g	Noncash contributions included in lines 1a-1f \$					
$\overline{}$	h	Total. Add lines 1a-1f					
an l	_	O. L. CELL . C. D.	Business Code				
eve	2a	Sale of Electricity	221000	38,065,231	38,065,231	0	0
Program Service Revenue	b	Other Electric Revenue	221000	77,384	77,384	0	0
ا ڲٙ	c d	Cooperative Capital Credits	221000	1,196,311	1,196,311	0	0
Š	u e						
gra	f	All other program service revenue.					
g	g g	Total. Add lines 2a–2f	•	39,338,926			
	3	Investment income (including divid	lends, interest.	33,335,320			
			•	159,026	ol	o	159,026
	4	Income from investment of tax-exempt b	ond proceeds ►	,			100,020
	5	Royalties					
		(i) Real	(II) Personal				
	6a	Gross Rents					
	b	Less: rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	▶				
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory	475,055				
	b	Less cost or other basis and sales expenses .					
	_	·	247,059				
	d	Gain or (loss)	227,996	227.996	ا		207.000
	u	Net gain or (loss)		227,996	0	0	227,996
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
₹	b	Less: direct expenses b					
}	C	Net income or (loss) from fundraising	events . ►				
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
l		Less: direct expenses b. Net income or (loss) from gaming act			-		
	C 10a	Gross sales of inventory, less	ivilies				
	iva	returns and allowances a	115,668		ŀ		
	b	Less: cost of goods sold b					
	c	Net income or (loss) from sales of inv		21,526	21,526	o	0
Ì		Miscellaneous Revenue	Business Code	21,320	21,320		
ŀ	11a				İ		
	b						
	c						· · · · · · · · · · · · · · · · · · ·
	d	All other revenue					
	е	Total. Add lines 11a-11d	•	1			
	12	Total revenue. See instructions	🕨	39,747,474	39,360,452	0	387,022

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).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to 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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	312,496			
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 8	Other salaries and wages	1,840,660			
9	Other employee benefits	1,497,278			
10	Payroll taxes		,		
11	Fees for services (non-employees):				
a	Management	20.000			
b	Legal	36,003 15,748	-		
d	Lobbying	13,740		<u> </u>	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	30,304	·		
12	Advertising and promotion	157,988			
13	Office expenses	450,836			
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel				:
19	Conferences, conventions, and meetings .	42,191			
20	Interest	2,007,838			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,499,659			
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
^	Purchased nower	25 745 046			
a b	Gross receipts tay	25,745,816 690,241			
C	Other deductions	55,727			
ď		33,727			
е					
f	All other expenses	901,626			
25	Total functional expenses. Add lines 1 through 24f	36,284,411			
26	Joint costs. Check here ▶☐ if following SOP 98-2 (ASC 958-720). 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	652,005	1	655,251
	2	Savings and temporary cash investments	2,000,000	2	1,600,000
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	3,972,559	4	4,348,845
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
S.	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	2,795,217	8	2,415,336
	9	Prepaid expenses and deferred charges	93,480	9	109,854
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 93,656,699			· · ·
	b	Less: accumulated depreciation 10b 20,359,470	→	10c	73,297,229
	11	Investments—publicly traded securities	0	11	0
	12	Investments – other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	14,923,484	13	15,891,279
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	3,063,896	15	1,721,881
	16	Total assets. Add lines 1 through 15 (must equal line 34)	96,241,238	16	100,039,675
\neg	17	Accounts payable and accrued expenses	4,214,931	17	4,390,164
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	400,000
1	20	Tax-exempt bond liabilities	0	20	0
တ္ထ	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.			_
=		Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	56,180,867	23	55,851,077
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities. Complete Part X of Schedule D	2,619,670	25	3,530,915
$ \bot $	26	Total liabilities. Add lines 17 through 25	63,015,468	26	64,172,156
ces		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ョ	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
7		complete lines 30 through 34.			
S S	30	Capital stock or trust principal, or current funds	0	30	0
set	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
As	32	Retained earnings, endowment, accumulated income, or other funds .	33,225,770		35,867,519
اید	33	Total net assets or fund balances	33,225,770		35,867,519
뿌ᅵ					

Form	agn	(201	n

Page **12**

Par					
	Check if Schedule O contains a response to any question in this Part XI	<u></u>			<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		39,74	7,474
2	Total expenses (must equal Part IX, column (A), line 25)	2		36,28	4,411
3	Revenue less expenses. Subtract line 2 from line 1	3		3,46	3,063
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1		33,22	5,770
5	Other changes in net assets or fund balances (explain in Schedule O)	<u>;</u>		(82	1,314)
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
Part				35,86	7,519
Fart	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain	ın ın			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		✓
b	Were the organization's financial statements audited by an independent accountant?		2b	/	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs of the audit, review, or compilation of its financial statements and selection of an independent accounta	_	2c	/	
	If the organization changed either its oversight process or selection process during the tax year, expla Schedule O.	un in			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year vissued on a separate basis, consolidated basis, or both:	were			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in			
	the Single Audit Act and OMB Circular A-133?		За		/
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 audit		3b		
			For	n 99 0	(2010)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047 201

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Name of the organization Employer identification number Southeastern Electric Cooperative, Inc. 46-0454373 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . 4 Aggregate value at end of year . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

\$__

Part	III Organizations Maintaining C	ollections of	Art, His	toric	al Treasures	, or Other S	imilar As	sets (continued)
3	Using the organization's acquisition, accollection items (check all that apply):	cession, and o	ther reco	rds, c	check any of th	e following the	nat are a s	significant use of its
а	☐ Public exhibition		d		Loan or excha	nge program:	S	
b	☐ Scholarly research		е		Other			
С	☐ Preservation for future generations	3						
4	Provide a description of the organization	n's collections	and expl	ain ho	w they further	the organiza	tion's exer	npt purpose in Part
	XIV.							
5	During the year, did the organization se							ar
	assets to be sold to raise funds rather the							☐ Yes ☐ No
Part	line 9, or reported an amount	on Form 990,	Part X, I	ine 2	1.			
1a	Is the organization an agent, trustee, of included on Form 990, Part X?							ot Yes No
b	If "Yes," explain the arrangement in Par	t XIV and comp	lete the f	ollowi	ng table:			
							A	mount
C	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount	•	Part X, line	e 21?				☐ Yes ☐ No
	If "Yes," explain the arrangement in Par							
Par	V Endowment Funds. Complet							
4-	Parisana aforasa balanca	(a) Current year	(b) Pr	or year	(c) Two year	rs back (d) I hr	ee years bac	k (e) Four years back
1a	Beginning of year balance							
b	<u> </u>		 					
С	Net investment earnings, gains, and losses							
d	Grants or scholarships		ļ					
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance				<u>i</u>		,	<u></u>
2	Provide the estimated percentage of the			as.				
a	Board designated or quasi-endowment		%					
b	Permanent endowment	%						
C	Term endowment ▶ %							
3a	Are there endowment funds not in the porganization by:	possession of t	ne organ	izatioi	n that are held	and administ	ered for th	
	•							Yes No
	(i) unrelated organizations (ii) related organizations			• •				3a(i)
								3a(ii)
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of							3b
Part								
	Description of investment	(a) Cost or o	ther basis	1	Cost or other basis (other)	(c) Accumu		(d) Book value
	Land	· · · · · ·		+	462,988			462.000
b	Buildings			+	3,727,589		755,744	462,988 2,971,845
C	Leasehold improvements			+-	3,727,303		, 33, / 44	2,311,043
d	Equipment				5,604,010	2	,803,590	2,800,420
e	Other			†	83,862,112		,800,136	67,061,976
	Add lines 1a through 1e. (Column (d) mu	st equal Form 9	990, Part	X, col				73,297,229

Part VII	Investments - Other Securities	. See Form 990, Part X, I	ine 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year	
(1) Financia	derivatives			
(2) Closely-	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E) (F)				
(G)				
(H)				
(1)	•••••			
Total. (Column	(b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII	Investments - Program Related	J. See Form 990, Part X.	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of v. Cost or end-of-year	
(1) Patrona	age capital in associated orgs	14,160,776	Cost	
	term certificates - NRUCFC	732,853		
(3) Membe	r capital securities - NRUCFC	285,000	Cost	
(4) Investn	nents in economic development	101,600	Cost	
(5) Membe	rships in associated orgs	10,500	Cost	
(6) Other i	nvestments	600,550	Cost	
(7)				
(8)				
(9)				
(10)	(b) must equal Form 990, Part X, col (B) line 13.)	15 901 270		 _
Part IX	Other Assets. See Form 990, Pa	15,891,279 art X line 15		_
. Girt ix		a) Description		(b) Book value
(1)		·		,,
(2)				
(3)				
_(4)				
(5)				
(6)			·	
_(7)				
(8)				
<u>(9)</u>				
(10)	umn (b) must equal Form 990, Part X, c	ol /R) line 15)		
Part X	Other Liabilities. See Form 990,		<u></u> <u>.</u> ▶	<u> </u>
1.	(a) Description of liability	(b) Amount		
(1) Federa	I income taxes	0		
	d operating provisions	380,911		
	mer deposits	707,293		
(4) Curren	t maturities on long term debt	2,224,000	4	
(5) Deferre	ed credits	218,711		
(6)				
(7)				
(8)				
(9)				
(10) (11)		 ·		
	(b) must equal Form 990, Part X, col (B) line 25) ▶	0.505.515		
	ASC 740) Ecotpote In Bart XIV provide	3,530,915	<u> </u>	

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Schedu	e D (Form 990) 2010			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Stater	nents	3
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	39,747,474
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	36,284,411
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	3,463,063
4	Net unrealized gains (losses) on investments		4	0
5	Donated services and use of facilities		5	0
6	Investment expenses		6	0
7	Prior penod adjustments		7	0
8	Other (Describe in Part XIV.)		8	(821,314)
9	Total adjustments (net). Add lines 4 through 8		9	(821,314)
10	Excess or (deficit) for the year per audited financial statements. Combine		10	2,641,749
Part				
1	Total revenue, gains, and other support per audited financial statements		1	39,747,474
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a	}	
b	Donated services and use of facilities	2b	_	
c	Recoveries of prior year grants	2c	_	
ď	Other (Describe in Part XIV.)	2d	\dashv	
e	Add lines 2a through 2d		1 2€	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	<u> </u>	_⊢	33,747,474
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a b	Other (Describe in Part XIV.)		\dashv	
			⊢ ,,	
с 5	Add lines 4a and 4b			
Part				
1	Total expenses and losses per audited financial statements		- T - 2	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		` ⊢ '	30,204,411
	• • •	1001		
a	Donated services and use of facilities	2a		
b	Prior year adjustments		-	
C	Other losses	2c 2d	\dashv	
d	Other (Describe in Part XIV.)		\dashv \Box	
e	Add lines 2a through 2d		20	
3	Subtract line 2e from line 1	· · · · · · · · · · · ·	<u> </u>	30,204,411
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4.		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	\dashv	
b	Other (Describe in Part XIV.)	4b	\dashv .	
c	Add lines 4a and 4b		_	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ie 18.)	5	36,284,411
Part				
	elete this part to provide the descriptions required for Part II, lines 3, 5, and			
	/, line 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII	, lines 2d and 4b. Also co	mplet	e this part to provide
-	dditional information.			
Part)	(, line 2 - The cooperative adopted the provisions of Financial Accounting Stan	idards Board Accounting S	tanda	rds Codification
Topic	ASC 740-10 (previously Financial Interpretation No. 48 Accounting for Uncerta	ainty in Income Taxes), on	Janua	ry 1, 2009. The
imple	mentation of this standard had no impact on the financial statements. As of bo	oth the date of adoption, ar	nd as o	of December 31, 2010,
_				
there	was no recognized tax accrual The cooperative would recognize future accru	ed interest and penalties re	elated	to unrecognized
		–		
tax b	enefits in income tax expense if incurred. Generally, the cooperative is no long	ger subject to Federal tax e	xamin	ations by tax
_				
autho	rities for years before 2006.			
_				
Part 2	(I, line 8 - Net decrease in assets due to the retirement of patronage capital cre	dits: -\$859,580 and change	s in o	ther equities: +\$38,266.

Schedule D'(For		Page 5
Part XIV	Supplemental Information (continued)	

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Southeastern Electric Cooperative, Inc.

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection Employer identification number

46-0454373

Questions Regarding Compensation No 1a Check the appropriate 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 indemnification 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 on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 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 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 Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization: a Receive a severance payment or change-of-control payment from the organization or a related organization? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations 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: a The organization? . 5a 5b If "Yes" to line 5a or 5b, describe in Part III. 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: The organization? 6a 6b If "Yes" to line 6a or 6b, describe in Part III.

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe

7

8

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

For each individual whose compensation must be reported 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.

		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation				
(A) Name		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation reported in prior Form 990 or Form 990-F7
				compensation				
Brad Schardin	Ξ	146,159	0	4,615	97,565	21,072	269,411	252,696
1	(ii)	0		0		0	0	0
John McDonald	(0)	85,572		7,100	65,145	19,313	177,310	159,227
2	Ξ	0	0	0	0	0	0	0
	8							
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	8							
4	Ξ			***************************************				
	(3)							
LO.	€							
	(9)							
9	€	• • • • • • • • • • • • • • • • • • •						
	(5)							
7	≘		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(3)							
8	(ii)							
	3							
Ø	(ii)			5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5				
	()							
10	(ii)							
	(3)							
11	(ii)							
	()							
12	(ii)							
	()							
13	(E)							
	(3)							
41	€							
	(2)							
15	(ii)							
	8							
16	€							

Schedule J (Form 990) 2010

Schedule J (Form 990) 2010	Supplemental Information
Schedule J (Part III

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 fo any additional information.	Part I, line 1a - The cooperative occasionally provides charter travel for directors, officers and key employees to attend meetings of other organizations when it is more cost	effective and expedient than ground transportation or commercial travel.									
Complete this part to provide the information, e any additional information.	Part I, line 1a - The cooperative occasionally provides c	effective and expedient than ground transportation or c									

Schedule J (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

• Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization **Employer identification number** Southeastern Electric Cooperative, Inc 46-0454373 Form 990, Part VI, Section A, line 6 - Any consumer becomes a member of the cooperative upon receipt of electric service. Form 990, Part VI, Section A, line 7a - Each member has one vote. Form 990, Part VI, Section A, line 7b - Members must approve any bylaw amendments, the substantial disposition of cooperative property, any mergers or consolidations, and the removal of any directors. Form 990, Part VI, Section B, line 11 - The Form 990 will be provided to, and reviewed with, all members of the board of directors by the management staff at a meeting of the board held prior to filing. Form 990, Part VI, Section B, line 12c - To monitor and enforce compliance of the conflict of interest policy, board members complete a disclosure form upon election or appointment to the board and then annually during their tenure on the board. Any conflicts of interest are disclosed to the board at the next board meeting. Form 990, Part VI, Section B, line 15 - The compensation of the CEO/General Manager is determined by the board of directors taking into consideration the results of a state, regional and national compensation survey. The board also applies the cooperative's policy on wage and salary administration in their decision making process. The most recent adjustment to the compensation of the CEO/General Manager was effective November 2010. Form 990, Part VI, Section B, line 15b - The CEO/General Manager is responsible for proposing an aggregate wage and salary package to the board of directors for their approval. Individual compensation levels are determined by the CEO/General Manager in compliance with the cooperative's wage and salary administration policy which utilizes a state, regional and national compensation survey. Form 990, Part VI, Section C, line 19 - The cooperative's governing documents, conflict of interest policy and financial statements are available to the cooperative's members but not the general public. Bylaws and financial statements are routinely provided to the members. The conflict of interest policy would be provided to a member upon request. Form 990, Part XI, line 5 - Net decrease in assets due to the retirement of patronage capital credits: -\$859,580 and changes in other equities: +\$38,266.

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization	Employer identification number
	
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