

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493312021161

Form **990**

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)

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

2010

OMB No 1545-0047

Open to Public Inspection

Address change Name change Initial return Terminated Amended return Application pending F Name and address of principal officer BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD F Name and address of principal officer BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD F Name and address of principal officer BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD JACKSONVILLE, AR 720765264 H(a) Is this a group return for affiliates included If "No," attach a list I Tax-exempt status F Sol(c)(3) 501(c) (12) (insert no) 4947(a)(1) or 527 Website: ▶ WWW FIRSTELECTRIC COOP	number 2-4545 ots \$ 176,341,930 ote \$ 176,341,930 Tyes No Tyes No t (see instructions) umber Image: M State of legal domicile AF DPERATIVE
Name change Name change Name change Name change Dong Business As	number 2-4545 ats \$ 176,341,930 ates? Yes No Yes No t (see instructions) umber Material State of legal domicile AF DPERATIVE assets 33,817 32,817 Current Year
Infiail return Name change Infiail return Infiai	2-4545 ots \$ 176,341,930 ots \$ 176,341,930 Pates? Yes No t (see instructions) umber ► M State of legal domicile AF DPERATIVE assets 32,817 Current Year
Terminated Amended return Application pending F Name and address of principal officer BRUCE A NDREWS 1000 S JP WRIGHT LOOP ROAD JACKSONVILLE, AR 720765264 F Name and address of principal officer BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD JACKSONVILLE, AR 720765264 H(b) Are all affiliates included: If "No," attach a list H(c) Group exemption int Website: > WWW FIRSTELECTRIC COOP Website: > WWW FIRSTELECTRIC COOP Website: > WWW FIRSTELECTRIC COOP I Briefly describe the organization or most significant activities TO PROVIDE QUALITY, RELIABLE AND AFFORDABLE ELECTRIC SERVICE TO MEMBERS OF THE COC 3 Number of voting members of the governing body (Part VI, line 1a)	ots \$ 176,341,930 Pates Yes No Yes No Yes No t (see instructions) umber Important Period OPERATIVE Assets 272 272 33,817 32,817 Current Year
Terminated Amended return Application pending Amended return Application pending F Name and address of principal officer BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD JACKSONVILLE, AR 720765264 H(a) Is this a group return for affilial test included: If "No," attach a list H(c) Group exemption in the properties of the governing body (Part VI, line 1a) Tax-exempt status Tax-exempt status Solic)(3) Solic)(12) (Insert no) Apart I Summary 1 Briefly describe the organization or most significant activities TO PROVIDE QUALITY, RELIABLE AND AFFORDABLE ELECTRIC SERVICE TO MEMBERS OF THE COC A Number of independent voting members of the governing body (Part VI, line 1a) A Number of independent voting members of the governing body (Part VI, line 1a) Total number of individuals employed in calendar year 2010 (Part V, line 2a) Briefly describe the organization discontinued its operations or disposed of more than 25% of its net at a solution of individuals employed in calendar year 2010 (Part VI, line 1a) A Number of independent voting members of the governing body (Part VI, line 1a) Total number of individuals employed in calendar year 2010 (Part VI, line 1a) Briefly describe the organization discontinued its operations or disposed of more than 25% of its net at a solution of individuals employed in calendar year 2010 (Part VI, line 1a) Total number of individuals employed in calendar year 2010 (Part VI, line 1a) Briefly describe the organization discontinued its operations or disposed of more than 25% of its net at a solution of individuals employed in calendar year 2010 (Part VI, line 1a) Briefly describe the organization discontinued its operations or disposed of more than 25% of its net at a solution of individuals employed in calendary year 2010 (Part VI, line 1a) Briefly describe the organization discontinued its operations or disposed of more than 25% of its net at a solution of individuals employed in calendary year 2010 (Part VI, line 1a) Briefly	ots \$ 176,341,930 Pates Yes No Yes No Yes No t (see instructions) umber Important Period OPERATIVE Assets 32,817 32,817 Current Year
Application pending F Name and address of principal officer	PERATIVE DESTRUCTIONS ASSETS ASSET
F Name and address of principal officer BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD JACKSONVILLE, AR 720765264 IT Tax-exempt status	Yes No t (see instructions) umber M State of legal domicile AF DPERATIVE assets 272 272 33,817 32,817 Current Year
BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD JACKSONVILLE, AR 720765264 If "No," attach a list If "No," attach a list H(c) Website: WWW FIRSTELECTRIC COOP K Form of organization Corporation Trust Association Other W I Briefly describe the organization's mission or most significant activities TO PROVIDE QUALITY, RELIABLE AND AFFORDABLE ELECTRIC SERVICE TO MEMBERS OF THE COC Check this box If the organization discontinued its operations or disposed of more than 25% of its net a Number of voting members of the governing body (Part VI, line 1a)	Yes No t (see instructions) umber M State of legal domicile AF DPERATIVE assets 272 272 33,817 32,817 Current Year
BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD JACKSONVILLE, AR 720765264 H(b) Are all affiliates included: If "No," attach a list If "No," attach a list H(c) Group exemption in H(c) H(c) H(c) Group exemption in H(c) H(c) H(c) Group exemption in H(c) Group exemption in H(c) H(c) H(c) Group exemption in H(c) Group exemption in H(c) H(c) H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: If "No," attach a list H(c) Group exemption in H(d) Are all affiliates included: In Year of formation 1937 In Year of formation 193	Yes No t (see instructions) umber M State of legal domicile AF DPERATIVE assets 272 272 33,817 32,817 Current Year
#(b) Are all attributes included: If "No," attach a list H(c) Group exemption in H(c) Exemption in H(c) Group exemption in H(M State of legal domicile AF DPERATIVE assets 33,817 32,817 Current Year
Tax-exempt status	M State of legal domicile AF DPERATIVE assets 272 33,817 32,817 Current Year
Tax-exempt status 501(c)(3) 501(c)(12) (Insert no	M State of legal domicile AF DPERATIVE assets 272 33,817 32,817 Current Year
Part I Summary 1 Briefly describe the organization of most significant activities TO PROVIDE QUALITY, RELIABLE AND AFFORDABLE ELECTRIC SERVICE TO MEMBERS OF THE COC 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net at an	DPERATIVE assets 272 33,817 32,817 Current Year
Part I Summary 1 Briefly describe the organization's mission or most significant activities TO PROVIDE QUALITY, RELIABLE AND AFFORDABLE ELECTRIC SERVICE TO MEMBERS OF THE COCCURRENCE	DPERATIVE assets 272 33,817 32,817 Current Year
To PROVIDE QUALITY, RELIABLE AND AFFORDABLE ELECTRIC SERVICE TO MEMBERS OF THE COORDINATION OF THE COORDIN	33,817 32,817 Current Year
TO PROVIDE QUALITY, RELIABLE AND AFFORDABLE ELECTRIC SERVICE TO MEMBERS OF THE COOK Check this box In the organization discontinued its operations or disposed of more than 25% of its net at a summer of voting members of the governing body (Part VI, line 1a)	33,817 32,817 Current Year
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net at 3 Number of voting members of the governing body (Part VI, line 1a)	33,817 32,817 Current Year
B Contributions and grants (Part VIII, line 1h)	272 272 33,817 32,817 Current Year
B Contributions and grants (Part VIII, line 1h)	272 272 33,817 32,817 Current Year
B Contributions and grants (Part VIII, line 1h)	272 272 33,817 32,817 Current Year
B Contributions and grants (Part VIII, line 1h)	272 272 33,817 32,817 Current Year
B Contributions and grants (Part VIII, line 1h)	272 33,817 32,817 Current Year
B Contributions and grants (Part VIII, line 1h)	33,817 32,817 Current Year
B Contributions and grants (Part VIII, line 1h)	33,817 32,817 Current Year
B Contributions and grants (Part VIII, line 1h)	32,817 Current Year
Result of the second state	Current Year
8 Contributions and grants (Part VIII, line 1h)	
Program service revenue (Part VIII, line 2g)	
9 Program service revenue (Part VIII, line 2g)	
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	172,823,997
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,910,927
12)	1,245,974
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0	175,980,898
	175,980,898
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5- 10) 18,114,675	15,956,512
10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	С
b Total fundraising expenses (Part IX, column (D), line 25) 🛌	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	138,454,687
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 136,507,062	154,411,199
19 Revenue less expenses Subtract line 18 from line 12	21,569,699
Beginning of Current	End of Year
Beginning of Current Year	407,164,574
20 Total labilities (Part X, line 26)	224,649,657
22 Net assets or fund balances Subtract line 21 from line 20	182,514,917
Part II Signature Block	, ,
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and t knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of knowledge.	
****** 2011-11-07	
Sign Signature of officer Date	
Here BRUCE ANDREWS CFO Type or print name and title	
	T
preparer's name WILLIAM M MILLER WILLIAM M MILLER 2011-11-07 employed	PTIN
Paid Firm's name BOLINGER SEGARS GILBERT AND MOSS LLP	
Preparer Firm's address * 8215 NASHVILLE AVENUE	Firm's EIN
Use Only LUBBOCK, TX 79423	Firm's EIN

01111	990 (2010)				Page 4
Par		nt of Program Service	Accomplishments to any question in this Part III		୮
1		ne organization's mission	to any question in this Part III		• • • • • • • • • • • • • • • • • • • •
_		_	E AND AFFORDABLE ELECTRIC	SERVICE TO THE MEMBERS	
PIEN	OVING QUALITI	OT LITE THROUGH RELIABL	L AND ATTORDADEL ELECTRIC	SERVICE TO THE MEMBERS	
2			rogram services during the year w		es ✓ No
	If "Yes," describe	these new services on Schedu	ile O	,	•
3		on cease conducting, or make	significant changes in how it cond	ucts, any program	es 🗸 No
	If "Yes," describe	these changes on Schedule O			
4	Section 501(c)(3)	and 501(c)(4) organizations	each of the organization's three la and section 4947(a)(1) trusts are venue, if any, for each program se	required to report the amount o	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		C ENERGY TO OUR MEMBERS - 86,00 PATRONAGE CAPITAL	05 ACTIVE SERVICES AT YEAR END WERE	PROVIDED ELECTRICITY ON A COOPER	ATIVE BASIS THROUGH
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
4d	Other program se	ervices (Describe in Schedule	· O)		
	(Expenses \$	•	grants of \$) (Revenue \$)
4e	Total program se	rvice expenses►\$			

			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		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		Νο
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "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		
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? If "Yes," complete Schedule D, Part II	7		Νο
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 quasiendowments? If "Yes," complete Schedule D, Part V	10		Νο
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
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		No
c	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	Yes	
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes,"</i> complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
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, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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)?	35	Yes	
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 Yes V No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements	Regarding	Other TRS	Filings a	and Tax	Compliance
	ota to illoilto	itegai ailig	Othio: 2110	95 4		Compilation

Form	990 (2010)			Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	•	୮_	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 238	3		
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
	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 (see instructions)	2b	Yes	
_				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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)?	4a		No
Ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
E-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
5a h	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		
·	The storme 3a of 3b, and the organization meronin 3000-1	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
b	organization solicit any contributions that were not tax deductible?			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		
b	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			
d	file Form 8282?	7c		
<u>.</u>	The state of the manufaction of the manufaction of the state of the manufaction of the state of the manufaction of the state of the sta	-		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
n	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.			
	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	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	-		
11	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders	3		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
		=		
	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			
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			
h	Enter the amount of reserves the organization is required to maintain by the states			
U	in which the organization is licensed to issue qualified health plans]		
c	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		

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.

<u>Se</u>	ection A. Governing Body and Management			
			Yes	No
1-	Enter the number of voting members of the governing hody at the end of the tay			
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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 governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
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	
ь	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		100	
	year by the following			
a	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	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
Ь	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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
Ь	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	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	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 15a or 15b, 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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you make these available. Check all that apply			
	Own website Another's website Vpon request			

- 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 the organization 🕨 BRUCE ANDREWS 1000 S JP WRIGHT LOOP ROAD

JACKSONVILLE, AR 720765264 (501) 982-4545

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

Check if Schedule O contains a response to any question in this Part VII

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

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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, 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, 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 nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours	- '		:) ched	:kal			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	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
(1) ROBERT HILL CHAIRMAN	7 30	х		х				27,660	0	0
(2) LARRY WOOD VICE CHAIR	4 30	х		х				35,972	0	0
(3) ROBERT MAERTENS SEC/TREAS	8 10	х		х				38,312	0	0
(4) BJ SWAFFAR DIRECTOR	4 00	х						27,998	0	0
(5) JIMMIE CROCKETT DIRECTOR	4 80	х						35,849	0	0
(6) PEGGY CUSICK DIRECTOR	5 80	х						27,110	0	0
(7) TOM HASTY JR DIRECTOR	5 70	х						30,047	0	0
(8) RICK LOVE DIRECTOR	5 20	х						36,102	0	0
(9) DAVID LUEBKE DIRECTOR	4 40	х						32,797	0	0
(10) DON CRABBE PRESIDENT/CEO	47 50			х				331,051	0	320,507
(11) BRAD FORD COO	45 00			х				170,798	0	96,299
(12) BRUCE ANDREWS CFO	45 00			х				174,270	0	81,977
(13) CHARLES N FRIZZELL VP - MARKETING & COMM	45 00					х		117,462	0	72,433
(14) LARRY L HARP VP - OPERATIONS	45 00					Х		140,024	0	117,013
(15) JONATHAN R JOYCE VP - ENGINEERING	45 00					х		138,577	0	92,766
(16) THEODORE DEWEESE JR SERVICEMAN	58 00					х		107,455	0	22,187

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

	(A) Name and Title	(B) Average hours		(C) Position (check that apply)					(D) Reportable compensation	(E) Reportable compensation		(F) Estima	ated fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	or	frompens from ganizat relat organiza	the ion and ed
											-		
											+		
				-							-		
1b	Sub-Total							Þ					
c	Total from continuation sheets						-	>	1 471 404	0			002.102
d	Total (add lines 1b and 1c)								1,471,484				803,182
2	Total number of individuals (inc \$100,000 in reportable compe					ted	above) who	received more tha	п			
												Yes	No
3	Did the organization list any fo on line 1a? <i>If</i> "Yes," complete So										3		N o

			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,"</i> complete <i>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	_			
	majviduai	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
UNDERGROUND UTILITY CONTRACTORS INC PO BOX 5095 CABOT, AR 72023	DISTRIBUTION PLANT CONSTRUCTION	4,969,125
ARKANSAS ELECTRIC COOPERATIVESINC 1 COOPERATIVE WAY LITTLE ROCK, AR 722194208	RIGHT OF WAY CLEARING	4,004,210
APPLE TREE SERVICE INC 316 N CEDAR STREET NORTH LITTLE ROCK, AR 72114	RIGHT OF WAY CLEARING	2,466,834
OSMOSE UTILITIES SERVICE INC PO BOX 8000 BUFFALO, NY 14267	POLE INSPECTION,TREATMENT, & MAPPING	605,030
MULTI STATES INC 15223 IRONTON RD LITTLE ROCK, AR 72219	TRANSFORMER REPAIR	382,101
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►12) who received more than	

	•	2010) Statement of Revenue				Pag	e 9
Fall	V	Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	excluded from tax under sections 512, 513, or
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f					514
Program Service Revenue		SALE OF ELECTRICITY PATRONAGE DIVIDENDS SERVICE FEES All other program service revenue Total. Add lines 2a-2f	221000 221000 221000	165,793,222 5,930,706 1,100,069 172,823,997	1,100,069		
	4 5 6a b	Investment income (including dividends, interest and other similar amounts)	(II) Personal 1,221,903 4,268 1,217,635	1,895,042 14,722 1,217,635		33,817	1,895,042 14,722
	7a b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) (i) Securities (i) Securities	(II) O ther 91,686 75,801 15,885	15,885		33,017	15,88:
Other Revenue	b c 9a b c 10a b c	All other revenue	294,580 280,963 Business Code	13,617	13,617		
	12	Total revenue. See Instructions		175,980,898	173,059,412	33,817 m 990 (20:	2,887,669

	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).							
	ot include amounts reported on lines 6b, b, 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	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	1,466,749						
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	8,935,664						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,566,449						
9	Other employee benefits	3,258,173						
10	Payroll taxes	729,477						
	Fees for services (non-employees) Management	125,711						
b	Legal							
c	Accounting							
d	Lobbying							
-	Professional fundraising services See Part IV, line 17							
f	Investment management fees							
	Other							
g 12	Advertising and promotion							
13	Office expenses							
14	Information technology							
15	Royalties							
16	Occupancy							
17	Travel							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings							
20	Interest	12,169,108						
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	12,691,804						
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)							
а	PURCHASED POWER	92,622,416						
b	DISTRIBUTION EXPENSE	14,990,792						
c	CUSTOMER SERVICE	3,105,567						
d	ADMIN & GENERAL EXP	2,333,287						
е	UNRELATED BUS INC TAX	5,000						
f	All other expenses	536,713						
25	Total functional expenses. Add lines 1 through 24f	154,411,199						
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	i		954,727	1	3,172,389
	2	Savings and temporary cash investments		9,662,510	2	12,217,228	
	3	Pledges and grants receivable, net		3	_		
	4	Accounts receivable, net			12,509,166	4	11,585,455
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of					
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$, and contributing e sponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions)	mploy	ers, and			
ste		Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			162,100	8	176,682
	9	Prepaid expenses and deferred charges			1,110,403	9	1,140,423
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	407,218,883			
	ь	Less accumulated depreciation	10b	116,956,483	280,082,194	10c	290,262,400
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV , line 11 \cdot . \cdot				12	
	13	Investments—program-related See Part IV, line 11			74,735,604	13	79,725,941
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11	•		10,212,669	15	8,884,056
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			389,429,373	16	407,164,574
	17	Accounts payable and accrued expenses .			4,129,951	17	4,068,976
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
ès	21	Escrow or custodial account liability Complete Part IV of Schedu	le D .	•		21	
abilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	′				
Lia		persons Complete Part II of Schedule L \ldots				22	
	23	Secured mortgages and notes payable to unrelated third parties	. ·		196,084,669	23	193,763,682
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			24,109,293	25	26,816,999
	26	Total liabilities. Add lines 17 through 25			224,323,913	26	224,649,657
Fund Balances		Organizations that follow SFAS 117, check here ► and complet through 29, and lines 33 and 34.	plete l	ines 27			
an	27	Unrestricted net assets				27	
Ba	28	Temporarily restricted net assets		28			
댇	29	Permanently restricted net assets				29	
Ful		Organizations that do not follow SFAS 117, check here ▶ 🔽 as	nd con	ıplet e			
or		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			679,235	30	687,745
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			0	31	0
	32	Retained earnings, endowment, accumulated income, or other for	unds		164,426,225	\vdash	181,827,172
Net	33	Total net assets or fund balances			165,105,460	33	182,514,917
-	34	Total liabilities and net assets/fund balances			389,429,373	34	407,164,574

Ра	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		175,9	980,89
2	Total expenses (must equal Part IX, column (A), line 25)	2			111,19
3	Revenue less expenses Subtract line 2 from line 1	3		21,5	569,69
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		165,1	105,46
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-4,1	160,24
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		182,5	514,91
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			৮	•
				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 in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
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 is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	sued			
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?	2	3a		No
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	_	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493312021161

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Employer identification number Name of the organization FIRST ELECTRIC COOPERATIVE CORPORATION 71-0056715 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 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit 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 pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-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 Year Total number of conservation easements 2a 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 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? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 \$ ____

the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, 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

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

Does each conservation easement reported on line 2(d) above satisfy the requirements of section

- If the organization elected, as permitted under SFAS 116, 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

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

(ii) Assets included in Form 990, Part X

170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

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 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2010

Part	Organizations Maintaining Co	llections of Ar	t, His	stori	<u>cal Tı</u>	reas	ures, or C)the	<u>er Similar Ass</u>	ets (c	ontınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	he fol	lowing	that a	are a signific	ant u	use of its collection	n	
а	Public exhibition		d	Γ	Loan	orex	change prog	rams	•		
ь	Scholarly research		e	Γ	O the	r					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and expla	ain ho	w the	y furthe	er the	organization	n's e	xempt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,						Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organ	ızatıd			es" to Form 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	edıary	for c	ontribu	utions	or other ass	ets	not 「	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able		г				
_							-		A mo	unt	
q C	Beginning balance						}	1c			
d e	Additions during the year						}	1d 1e			
f	Distributions during the year						-	1f			
	Ending balance	000 D V I		,			L	TI.		Yes	
2a	Did the organization include an amount on Fo		ie ZI?	•					1	res	No
	If "Yes," explain the arrangement in Part XIV rt V Endowment Funds. Complete		n 200	wor	ad "Vo	c" to	Form 000	Da	rt IV line 10		
Гa	Endowment Funds. Complete	(a)Current Year)Prior			wo Years Back			e) Four Y	ears Back
1a	Beginning of year balance			•				 `			
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as						•		
а	Board designated or quasi-endowment 🕨										
Ь	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that a	are hel	d and	admınıstere	d for	the	Yes	No
	(i) unrelated organizations								3a(i)	,	
	(ii) related organizations								3a(ii)	<u> </u>
	If "Yes" to 3a(II), are the related organizatio	•				•		•	3b		<u> </u>
4	Describe in Part XIV the intended uses of th						D- 1 1/ 1	4.0			
Par	t VI Investments—Land, Buildings	s, and Equipme	ent. S								
	Description of investment				Cost or o		(b) Cost or ot basis (othe		(c) Accumulated depreciation	(d) Bo	ok value
1 a l	_and						3,028	,537			3,028,537
b E	Buildings						13,916	,110	3,945,568		9,970,542
c l	_easehold improvements		•								
d E	Equipment						380,201	,337	113,010,915	26	57,190,422
	Other						10,072	,899		1	0,072,899
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B,), line	10(c).,) .			►	29	0,262,400
									Schedule D	Form 9	90) 2010

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
1)Financial derivatives		
2)Closely-held equity interests		
ther		
otal. (Column (b) should equal Form 990, Part X, col (B) line 12)	•	
art VIII Investments—Program Related. Se		3.
(a) Description of investment type	(b) Book value	(c) Method of valuation
	(D) Dook value	Cost or end-of-year market value
ee Additional Data Table		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	▶ 79,725,941	
Part IX Other Assets. See Form 990, Part X, I		
(a) Descri		(b) Book value
Tabel (Caluman (b) abouted agreed Forms 2000, Book V, and (B) line	15 \	
Part X Other Liabilities. See Form 990, Part X, col.(B) line		
(-) D	(b) A mount	
	(b) Amount	
ederal Income Taxes	F 070 444	
ONSUMER DEPOSITS AND PREPAYMENTS	5,978,646	
NTEREST PAYABLE	914,875	
CCUMULATED PROVISION FOR PENSIONS AND THER POST-RETIREMENT BENEFITS	12,960,892	
DEFERRED CREDITS	2,085,797	
THER CURRENT AND ACCRUED LIABILITIES	1,161,404	
ACCRUED PROPERTY TAXES	2,700,000	
ACCRUED COMPENSATED ABSENCES	1,015,385	
otal. (Column (b) should equal Form 990, Part X, col (B) line 25)	26,816,999	
Column (b) Should equal Form 330, Fait A. corr braine 2.3 F		

2:11 XI Reconclination of Change in Net Assets from Form 990 to Financial Statement	ents	
Total revenue (Form 990, Part VIII, column (A), line 12)	1	175,980,898
Total expenses (Form 990, Part IX, column (A), line 25)	2	154,411,199
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	21,569,699
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	-4,160,242
9 Total adjustments (net) Add lines 4 - 8	9	-4,160,242
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	17,409,457
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	leturn
1 Total revenue, gains, and other support per audited financial statements	1	175,974,242
A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a 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 4,268	<u> </u>	
e Add lines 2a through 2d	2e	4,268
3 Subtract line 2e from line 1	3	175,969,974
4 A mounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a	4	
b Other (Describe in Part XIV) 4b 10,924	-	
c Add lines 4a and 4b	4c	10,924
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	175,980,898
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	
1 Total expenses and losses per audited financial statements	1	154,404,543
A mounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments 2b		
c Other losses		
d Other (Describe in Part XIV) 2d 4,26	3	
e Add lines 2a through 2d	2e	4,268
3 Subtract line 2e from line 1	3	154,400,275
4 A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIV)	1	
c Add lines 4a and 4b	4c	10,924
Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	154,411,199

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 additional information.

Ident if ier	Return Reference	Explanation
Description of Uncertain Tax Positions Under FIN 48	Part X	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 - O ther Adjustments		NET INCREASE IN MEMBERSHIPS 8,510 OTHER COMPREHENSIVE INCOME PROVISION FOR POSTRETIREMENT BENFITS 863,428 UNCLAMINED CAPITAL CREDIT RETIREMENTS RETAINED PER STATE LAW 976,777 PATRONAGE CAPITAL RETIREMENTS - 6,008,960 TRANSFER TO OTHER EQUITIES 3
Part XII, Line 2d - Other Adjustments		TOWER RENTAL EXPENSES ALLOCATED TO TOWER RENTAL INCOME 4,268
Part XII, Line 4b - Other Adjustments		GENERAL EXPENSES RECLASSED TO NON-OPERATING MARGINS 10,924
Part XIII, Line 2d - Other Adjustments		TOWER RENTAL EXPENSES ALLOCATED TO TOWER RENTAL INCOME 4,268
Part XIII, Line 4b - Other Adjustments		GENERAL EXPENSES RECLASSED TO NON-OPERATING MARGINS 10,924
		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
——————————————————————————————————————	(B) Book value	Cost or end-of-year market value
PATRONAGE CAPITAL - CFC	4,372,110	С
PATRONAGE CAPITAL - AECC	55,443,853	С
PATRONAGE CAPITAL - AECI	4,875,785	С
PATRONAGE CAPITAL - NISC	255,190	С
PATRONAGE CAPITAL - FEDERATED RURAL ELECTRIC INSURANCE EXCHANGE	466,725	С
PATRONAGE CAPITAL - NRTC	39,879	С
PATRONAGE CAPITAL - ARESIT	310,498	С
CAPITAL TERM CERTIFICATES - CFC	12,724,776	С
MEMBER CAPITAL SECURITIES	1,000,000	С
INVESTMENT IN CRC	20,778	С
OTHER INVESTMENTS	3,200	С
ENERGY EFFICIENCY LOANS	213,147	C

DLN: 93493312021161

OMB No 1545-0047

Employer identification number

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

	ST ELECTRIC COOPERATIVE CORPORATION			Employer identificati	on nan	iibCi	
1 211	ST ELECTRIC GOOT ENTITY E GOIN GIVINGIN			71-0056715			
Pa	rt I Questions Regarding Compensation						
						Yes	Νο
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III to						
	First-class or charter travel	Γ	Housing allowance or residence for	personal use			
	Travel for companions	\sqcap	Payments for business use of perso	nal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiati	on fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauf	feur, chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement orprovision of all the expenses describ			•	1b		
2	Did the organization require substantiation prior to rei officers, directors, trustees, and the CEO/Executive D				2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that Compensation committee Independent compensation consultant Form 990 of other organizations						
4	During the year, did any person listed in Form 990, Pa or a related organization	rt V I	I, Section A, line 1a with respect to tl	ne filing organization			
а	Receive a severance payment or change-of-control pa	ymer	nt from the organization or a related o	rganızatıon?	4a		Νo
b	Participate in, or receive payment from, a supplement	al nor	nqualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-bas	ed co	mpensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde tl	ne applicable amounts for each item ii	n Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must For persons listed in form 990, Part VII, Section A, lin	-		ny			
_	compensation contingent on the revenues of				5a		
a h	The organization? 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, lir compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue ai	пу			
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, li payments not described in lines 5 and 6? If "Yes," des			n-fixed	7		
8	Were any amounts reported in Form 990, Part VII, pai subject to the initial contract exception described in R in Part III				8		
9	If "Yes" to line 8, did the organization also follow the r	ebutt	able presumption procedure describe	d in Regulations			

section 53 4958-6(c)?

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation			other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) DON CRABBE	(I) (II)	294,177 0	6,376 0	30,498 0	300,977 0	19,530 0	651,558 0	
(2) BRAD FORD	(I) (II)	156,134 0	3,624 0	11,040 0	81,683 0	14,616 0	267,097 0	
(3) BRUCE ANDREWS	(ı) (ıı)	168,651 0	3,869 0	1,750 0	67,481 0	14,496 0	256,247 0	
(4) CHARLES N FRIZZELL	(ı) (ıı)	110,184 0	2,753 0	4,525 0	54,745 0	17,688 0	189,895 0	
(5) LARRY L HARP	(ı) (ıı)	133,059	3,238 0	3,727 0	102,397 0	14,616 0	257,037 0	
(6) JONATHAN R JOYCE	(1) (11)	132,883	3,165 0	2,529 0	78,150 0	14,616 0	231,343	
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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

Identifier 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 NECA 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, HO WEVER, 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 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 \$296,077 401(K) EMPLOYER MATCH 4,900 TOTAL COLUMN C 300,977 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (296,077) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 81,529 TOTAL COOPERATIVE CASH CONTRIBUTION \$86,429 BRAD FORD ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$78,447 401(K) EMPLOYER MATCH 3,236 TOTAL COLUMN C 81,683 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (78,447) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN 43,222 TOTAL COOPERATIVE CASH CONTRIBUTION \$46,458 BRUCE ANDREWS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN 43,222 TOTAL COOPERATIVE CASH CONTRIBUTION \$46,458 BRUCE ANDREWS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$63,997 401(K) EMPLOYER MATCH 3,484 TOTAL COLUMN C 67,481 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$63,997 401(K) EMPLOYER MATCH 2,336 TOTAL COLUMN C 54,745 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$52,409 401(K) EMPLOYER MATCH 2,336 TOTAL COLUMN C 54,745 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$622) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN \$63,409 401(K) EMPLOYER MATCH 2,336 TOTAL COLUMN C 54,745 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN \$69,622 401(K) EMPLOYER MATCH 2,775 TOTAL COLUMN C 102,397 LESS ACTUARIAL INCREASE IN DEFINED BENEFIT PLAN (99,622) ADD CASH CONTRIBUTION TO DEFINED BENEFIT PLAN \$78,379 ADD CASH CONTRIBUTION TO DEFINED BENEF

Schedule J (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493312021161

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

► 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.

Transactions with Interested Persons

FIRST ELECTRIC COOPERATIVE CORPORATION Part I 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 (c) Corrected? (a) Name of disqualified person (b) Description of transaction 1 Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. 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 (g)Written (e) In Approved or from the (a) Name of interested person and (c)O riginal default? by board or agreement? (d)Balance due organization? purpose principal amount committee? Τо From Yes Yes Yes No No Total Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b)Relationship between interested person (c)A mount of grant or type of assistance (a) Name of interested person and the organization

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

Complete if the organization	on answered "Yes" on I	Form 990, Part IV, Iir	ie 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
(1) ARKANSAS ELECTRIC COOPERATIVES INC	THE PRESIDENT/CEO AND A DIRECTOR OF THE COOPERATIVE SERVE ON AECI'S BOARD		THE COOPERATIVE PURCHASES ELECTRIC UTILITY SUPPLIES FROM ARKANSAS ELECTRIC COOPERATIVES, INC	Yes	No No
(2) ARKANSAS ELECTRIC COOPERATIVE CORP	THE PRESIDENT/CEO AND A DIRECTOR OF THE COOPERATIVE SERVE ON AECC'S BOARD		THE COOPERATIVE PURCHASES WHOLESALE ELECTRICITY FROM ARKANSAS ELECTRIC COOPERATIVE CORP		No
(3) ARKANSAS RURAL ELECTRIC SELF INSURANCE TRUST	THE PRESIDENT/CEO SERVES ON THE TRUST'S BOARD	l '	THE COOPERATIVE PURCHASES WORKER'S COMPENSATION INSURANCE FROM ARKANSAS RURAL ELECTRIC SELF INSURANCE TRUST		No

Part V **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493312021161

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

ldentifier	Return Reference	Explanation
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

ldentifier	Return Reference	Explanation
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

ldentifier	Return Reference	Explanation
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

ldentifier	Return Reference	Explanation
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

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 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

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, Inne 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 COOPERATIVE'S 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

ldentifier	Return Reference	Explanation
INDEPENDENT DIRECTORS	Form 990, Part VI, Line 1b	BJ SWAFFAR PER IRS FORM 990 INSTRUCTIONS IS NOT AN INDEPENDENT DIRECTOR BECAUSE HE IS ON THE BOARD OF ARKANSAS ELECTRIC COOPERATIVE, INC. (AECI) THE COOPERATIVE PURCHASES ELECTRIC UTILITY SUPPLIES FROM AECI. THE COOPERATIVE IS ALSO A MEMBER OF AECI. AS SUCH, MR. SWAFFAR IS THE COOPERATIVE'S REPRESENTATIVE ON AECI'S BOARD. MR. SWAFFAR HAS NO OWNERSHIP INTEREST IN AECI. AND RECEIVES NO DIRECT OR INDIRECT BENEFIT FROM THE COOPERATIVE DOING BUSINESS WITH ARKANSAS ELECTRIC COOPERATIVE, INC. ROBERT HILL, SR. PER IRS FORM 990 INSTRUCTIONS IS NOT AN INDEPENDENT DIRECTOR BECAUSE HE IS ON THE BOARD OF ARKANSAS ELECTRIC COOPERATIVE CORP. (AECC.) THE COOPERATIVE PURCHASES ITS ELECTRIC ENERGY FROM ARKANSAS ELECTRIC COOPERATIVE CORP. THE COOPERATIVE IS ALSO A MEMBER OF ARKANSAS ELECTRIC COOPERATIVE CORP. AS SUCH, MR. HILL IS THE COOPERATIVE'S REPRESENTATIVE ON AECC'S BOARD. MR. HILL HAS NO OWNERSHIP INTEREST. IN AECC. AND RECEIVES NO DIRECT OR INDIRECT BENEFIT FROM THE COOPERATIVE DOING BUSINESS WITH AECC.

ldentifier	Return Reference	Explanation
TO PROVIDE DETAIL REGARDING OFFICER'S OTHER COMPENSATION	Form 990, Part VII, Column F	IN ORDER TO PROVIDE RETIREMENT BENEFITS TO ITS EMPLOYEES, THE COOPERATIVE HAS ESTABLISHED A DEFINED CONTRIBUTION PLAN UNDER SECTION 401(K) OF THE INTERNAL REVENUE CODE AS PART OF THE PLAN DOCUMENT, THE COOPERATIVE PROVIDES A MATCHING CONTRIBUTION UP TO 8% OF A PARTICIPATING EMPLOYEE'S BASE SALARY BASE FOR ALL EMPLOYEES HIRED IN 2006 OR LATER YEARS FOR ALL EMPLOYEES HIRED PRIOR TO 2006 THE COOPERATIVE PROVIDES A MATCHING CONTRIBUTION OF UP TO 2% FOR ALL PARTICIPATING EMPLOYEES ADDITIONALLY, THE COOPERATIVE PARTICIPATES IN A MULTI-EMPLOYER DEFINED BENEFIT PLAN CONTRIBUTIONS TO THIS PLAN ARE BASED ON THE FULL FUNDING LIMITATION OF SUCH PLAN EMPLOYER CONTRIBUTIONS FOR BOTH PLANS ARE AVAILABLE TO PARTICIPATING EMPLOYEES, INCLUDING OFFICERS AND KEY EMPLOYEES, MEETING THE ELIGIBILITY REQUIREMENTS OF SUCH PLANS ONLY EMPLOYEES HIRED PRIOR TO 2006 ARE ELIGIBLE TO PARTICIPATE IN THE MULTI-EMPLOYER DEFINED BENEFIT PLAN THE COOPERATIVE ALSO PROVIDES HEALTH, DENTAL, VISION AND LIFE INSURANCE TO ALL EMPLOYEES, INCLUDING OFFICERS AND KEY EMPLOYEES, THROUGH A QUALIFIED PLAN THE AMOUNTS REPORTED ON PART VII, COLUMN (F) FOR THE OFFICER OR KEY EMPLOYEE IS COMPRISED OF THE ACTUARIAL INCREASE IN THE DEFINED BENEFIT PLAN FOR THE OFFICER, THE TOTAL AMOUNT CONTRIBUTED TO THE 401(K) PENSION PLAN AND THE INSURANCE PREMIUMS PAID FOR THE BENEFIT OF THE OFFICER OR KEY EMPLOYEE IN ADDITION TO THE ABOVE PENSION PLANS, THE COOPERATIVE ALSO PROVIDES POST-RETIREMENT HEALTH INSURANCE BENEFITS THROUGH AN UNFUNDED WELFARE BENEFIT PLAN THE PER PERSON VALUE OF THESE BENEFITS HAS NOT BEEN ESTIMATED

ldentifier	Return Reference	Explanation
PATRONAGE DIV IDENDS	Form 990, Part VIII, Line 2	PATRONAGE DIVIDENDS RESULT FROM THE PURCHASE OF WHOLESALE POWER FROM A GENERATION & TRANSMISSION COOPERATIVE PATRONAGE DIVIDENDS ALSO RESULT FROM THE PAYMENT OF INTEREST FROM COOPERATIVE BANKS AND THE PURCHASE OF SUPPLIES AND SERVICES FROM OTHER COOPERATIVE ORGANIZATIONS THE EXPENSES ASSOCIATED WITH PURCHASES FROM AND PAYMENTS TO SUCH COOPERATIVE ORGANIZATIONS ARE A DIRECT COMPONENT OF COST OF THE ELECTRIC SERVICE PROVIDED BY THE COOPERATIVE TO ITS MEMBERS

ldentifier	Return Reference	Explanation
ACCOUNTING SYSTEM	Form 990, Part IX	THE ACCOUNTING RECORDS OF THE COOPERATIVE ARE MAINTAINED IN ACCORDANCE WITH THE UNIFORM SYSTEM OF ACCOUNTS AS PRESCRIBED BY THE FEDERAL ENERGY REGULATORY COMMISSION FOR CLASS A AND B ELECTRIC UTILITIES MODIFIED FOR ELECTRIC BORROWERS OF THE NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORPORATION (CFC) THE UNIFORM SYSTEM OF ACCOUNTS DOES NOT RECORD EXPENSES IN THE GENERAL EXPENSE CATEGORIES PROVIDED ON PART IX LINES 1 - 23 THE COOPERATIVE WILL BREAK OUT SALARIES AND WAGES, EMPLOYEE BENEFITS AND PAYROLL TAXES THAT ARE ALLOCATED IN ACCORDANCE WITH THEIR ACCOUNTING SYSTEM, BUT OTHER EXPENSES THAT ARE DESCRIBED IN LINES 1 - 23 WILL BE REPORTED ON LINE 24 UNDER THE EXPENSE CATEGORIES REQUIRED BY THE UNIFORM SYSTEM OF ACCOUNTS

ldentifier	Return Reference	Explanation
RECONCILIATION OF WAGES PER RETURN TO FORM W-3	Form 990, Part IX, Lines 5-7	SALARIES AND WAGES ARE ALLOCATED TO ASSET, LIABILITY, AND EXPENSE ACCOUNTS BASED ON THE ACCOUNTING SYSTEM DESCRIBED ABOVE. IN AN EFFORT TO EXPLAIN WHY THE AMOUNTS REPORTED ON LINES 5-7 DO NOT AGREE TO THE W-3 THE FOLLOWING RECONCILIATION IS PROVIDED. TOTAL PER LINES 5-7 \$10,402,413 LESS DIRECTORS FEES REPORTED ON 1099-MISC (291,848) LESS EMPLOYEE OFFICER BENEFITS INCLUDED IN LINE 5 (498,783) PLUS WAGES ALLOCATED TO RENTAL ACTIVITIES 397 PLUS SALARIES AND WAGES ALLOCATED TO ASSET ACCOUNTS 4,188,130 RECONCILIATION TO W-3 \$13,800,309

ldentifier	Return Reference	Explanation
BREAKDOWN OF EXPENSES INCLUDED IN ADMINISTRATIVE AND GENERAL	Form 990, Part IX, Line 24	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS ADMINISTRATIVE AND GENERAL EXPENSE ON FORM 990, PART IX, LINE 24 OFFICE SUPPLIES AND EXPENSE \$416,041 OUTSIDE SERVICES EMPLOYED 213,761 OTHER INSURANCE 140,129 ANNUAL MEETING EXPENSE 49,251 CAPITAL CREDITS EXPENSE 91,755 DIRECTOR EXPENSES 392,607 MAINTENANCE OF GENERAL PLANT 537,586 REGULATORY COMMISSION EXPENSE 341,090 MISCELLANEOUS GENERAL EXPENSE 151,067 TOTAL ADMINISTRATIVE AND GENERAL EXPENSE PER 990 \$2,333,287

ldentifier	Return Reference	Explanation
	Form 990, Part IX, Line 24f	THE FOLLOWING IS A BREAKDOWN OF THE EXPENSES REPORTED AS OTHER EXPENSES ON FORM 990, PART IX, LINE 24F TRANSMISSION EXPENSE \$382,886 MISCELLANEOUS GENERAL EXPENSE 147,821 TAXES 6,006 TOTAL OTHER EXPENSES PER FORM 990, LINE 24F \$536,713

ldentifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	NET INCREASE IN MEMBERSHIPS 8,510 OTHER COMPREHENSIVE INCOME PROVISION FOR POSTRETIREMENT BENFITS 863,428 UNCLAMINED CAPITAL CREDIT RETIREMENTS RETAINED PER STATE LAW 976,777 PATRONAGE CAPITAL RETIREMENTS -6,008,960 TRANSFER TO OTHER EQUITIES 3 Total to Form 990, Part XI, Line 5 -4,160,242

ldentifier	Return Reference	Explanation
AUDIT COMMITTEE	Form 990, Part XII, Line 2c	THE BOARD OF DIRECTORS HAVE ASSIGNED MEMBERS TO AN AUDIT COMMITTEE TO OVERSEE THE FINANCIAL STATEMENT AUDIT AND SELECT THE INDEPENDENT FINANCIAL STATEMENT AUDITOR

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

DLN: 93493312021161

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.

OMB No 1545-0047 2010

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

FIRST ELECTRIC COOPERATIVE CORPORATION

				71-0056715			
Part I Identification of Disregarded Entities (Com	plete if the organizatio	n answered "Yes"	on Form 990, Par	t IV, line 33.)			
(a) 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 Orga or more related tax-exempt organizations during		f the organization	answered "Yes" o	n Form 990, Part	IV, line 34 becau	se it had	l one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity		(g) 512(b)(13 trolled nization
(1) 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)	Line 7	N/A	Yes	No No
For Privacy Act and Panerwork Reduction Act Notice, see the Instruc	tions for Form 990	Cat No 50:	1 3 5 Y	1	Schedule R (Form 990) 2010

art III			d Organizations Taxa		• ` '	_	answered "	Yes" on Form 990,	Part IV, lır	ne 34
	because it had one or more related organizations treated as a partnership during the tax year.)									
			(c)				(h)	(i)	(i)	

(a) Name, address, and EIN of 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 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(g) Disproprtionate Code V—UBI General or managing		Disproprtionate allocations? Code V—UBI Gramount in box 20 of Schedule K-1		al or ging	(k) Percentage ownership
							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		
(1) FIRST ENERGY SERVICES OF ARKANSAS INC PO BOX 5018 JACKSONVILLE, AR72078 62-1695757	INACTIVE	AR	N/A	С			100 000 %		
Cabadula D (Farm 000) 2010									

chedul	e R (Form 990) 2010			Pa	ge 3
Part '	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990,	Part IV, line 34, 35, 3	5A, or 36.)		
No	ote. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 Durir	ng the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in P	Parts II-IV?			
a Re	eceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No
b G	ıft, grant, or capıtal contribution to other organization(s)		1b		No
c Gı	ıft, grant, or capıtal contribution from other organization(s)		1c		No
d Lo	oans or loan guarantees to or for other organization(s)		1d		No
e Lo	oans or loan guarantees by other organization(s)		1e		No
f Sa	ale of assets to other organization(s)		1f		No
g Pi	urchase of assets from other organization(s)		1 g		No
h E	xchange of assets		1h		No
i Le	ease of facilities, equipment, or other assets to other organization(s)		1i		No
j Le	ease of facilities, equipment, or other assets from other organization(s)		1j		No
k Pe	erformance of services or membership or fundraising solicitations for other organization(s)		1k		No
I Pe	erformance of services or membership or fundraising solicitations by other organization(s)		11		No
m Sh	haring of facilities, equipment, mailing lists, or other assets		1m		No
n SI	haring of paid employees		1n		No
o Re	eimbursement paid to other organization for expenses		10		No
p Re	eimbursement paid by other organization for expenses		1 p	Yes	
a 0	ther transfer of cash or property to other organization(s)		1 q		No
-	ther transfer of cash or property from other organization(s)		1r		No
2 If	the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered re		ion thresholds		
	(a) (b) Transaction	(c)	Method of determine	nna ama	ount

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) FIRST ELECTRIC TRUST - NA LESS THAN 50000	Р	0	
(2)			
(3)			
(4)			
(5)			
(6) 			

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?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	h) eral or naging tner?
			Yes	No		Yes	Yes No		Yes	N
										+
										-
										t
										+
										\dagger
										╀
										+
										L
										+
										t
										ı

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2010