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Förm 990

Return of Organization Exempt From Income Tax

2011

OMB No 1545-0047

		of the Treasury	benefit trust or private fou	indation)		Open to Public
		nue Service	► The organization may have to use a copy of this return		reporting requirements	Inspection
<u> </u>	or th			l, and ending	D Employer identific	, 20
В	Check if ap		of organization		, ,	
_	Addre		RKE ELECTRIC COOPERATIVE, INC.	420243366		
\vdash	chang	Numb	Business As er and street (or P O box if mail is not delivered to street address)	E Telephone number		
\vdash	-		•	Room/suite		
\vdash	Initial	Cutura	. BOX 161 town, state or country, and ZIP + 4		(641) 342-2	1/3
\vdash	Termi Amen				G Gross receipts \$	12 161 600
\vdash	return Applic	030	EOLA, IA 50213-0161 te and address of pnncipal officer WILLIAM FREEMAN		H(a) is this a group retui	12,161,609.
L.	pendu	ng			affiliates?	
	~	'''	. BOX 161 OSCEOLA, IA 50213-0161	1505	H(b) Are all affiliates ind If "No," attach a list	
<u>!</u>		empt status	501(c)(3) X 501(c) (12) ((Insert no) 4947(a)(1)	or 527		
<u>. </u>		 	ECNET.NET	1	H(c) Group exemption no	
K			X Corporation Trust Association Other	L Year of for	mation 1939 M State	or regai domicile IA
Ρá	art I	Summary				
	1	•	e the organization's mission or most significant activities			
8		TO DISTRI	BUTE ELECTRICITY TO MEMBERS			
Тар						
& Governance	١.					
ගී	2	Check this box			1 1	9
රේ ග	3		ing members of the governing body (Part VI, line 1a)			9
Activities	4		ependent voting members of the governing body (Part VI, line 1b)		· · · · · · · · · · · · · · · · · · ·	30.
÷	5		of individuals employed in calendar year 2011 (Part V, line 2a)		······	30
ĕ	1		of volunteers (estimate if necessary)			409,592.
			business revenue from Part VIII, column (C), line 12		1 1	409,392.
	b	Net unrelated	business taxable income from Form 990-T, line 34			Current Year
	1 _				Prior Year	Current rear
ë	8		and grants (Part VIII, line 1h)		11,439,020.	11,111,516.
Revenue	9		ce revenue (Part VIII, line 2g)			
æ			come (Part VIII, column (A), lines 3, 4, and 7d)		259,809.	145,830. 904,263.
			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		294,580.	12,161,609.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12).		11,993,409.	12,101,609.
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 133)	• • • • • •	0	239,059.
	1	Benefits paid t	o or for members (Part IX, column (A)) line 4)	• • • • • • -	2,623,124.	2,699,023.
ses	15	Salaries, other	compensation, employee benefits (Part IX) solumn (A), lines 5-10)	• • • • • • • • • • • • • • • • • • • •	2,623,124.	2,099,023.
Expenses	16a		undraising fees (Part IX, column (A) line 108)	·	<u> </u>	
Ë	b	Total fundraisi	ng expenses (Part IX, column) (D) line 26	 	0 675 112	8,634,862.
	17	Other expense	s (Part IX, column (A), lines 11a-1/d, 1719249	• • • • • •	8,675,112.	11,572,944.
			Add lines 13-17 (must equal Part IX column (A), fine 25)	· · · · · -	11,298,236.	
L Ø	19	Revenue less	expenses Subtract line 1/8 from line 12	· · · · · · ·	695,173.	588,665. End of Year
Net Assets or Fund Balances			art X, line 16)	B	eginning of Current Year	
Sala	20		art X, line 16)	· · · · · -	31,604,191.	33,503,990.
절	21		(1 art X, line 20)	· · · · · -		22,779,471.
			und balances Subtract line 21 from line 20	<u></u>	9,906,714.	10,724,319.
	rt II	Signature			and to the heat of my knowle	doe and halief it is tore
cor	der pen: rect, an	alties of perjury, I d complete Decl	declare that I have examined this retum, including accompanying schedules aration of preparer (other than officer) is based on all information of which p	reparer has any kno	owledge	oge and belief, it is tide,
		111.	Man SZin		8-23-	10
Sig	n	Signature	of officer		Date	<u> </u>
He		10).11	of officer Ign S. Freeman General	Marga		
		Type or p	not name and title	- Jarrey E		
	,					

Check Paid POD644184 39-0906430 Firm's EIN ▶ 515-223-0159 Firm's address ▶ 7780 OFFICE PLAZA DR May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2011)

	ribe the organization's mission	sponse to any question in this Part III		
	IBUTE ELECTRICITY TO	MEMBERS		
			 	
		· · ·		
prior Form 9 If "Yes," des	990 or 990-EZ?			Yes X
services?		or make significant changes in h		
Describe th expenses S	Section 501(c)(3) and 501(c)	ule O vice accomplishments for each of i (4) organizations and section 4947 xpenses, and revenue, if any, for each	(a)(1) trusts are required to	vices, as measure report the amoui
a (Code DISTRIBU')(Expenses \$ 11,5 TE ELECTRICITY TO MEM	72,944 including grants of \$BERS) (Revenue \$	11,111,516
			·····	
b (Code) (Expenses \$	including grants of \$) (Revenue \$)
			······································	
	·			
			-	
				<u>.</u>
c (Code) (Expenses \$	including grants of \$) (Revenue \$)
	·			
				
		······································	······································	
d Other progra	im services (Describe in Sched	ule O)		

CLARKE ELECTRIC COOPERATIVE, INC.

420243366

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A. Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2	Par	t IV Checklist of Required Schedules			. ago
complete Schedule A 2 is the organization required to complete Schedule B, Schedule C Contributors (see instructions)? 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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(d), 4 organization and section 501(c)(4), 501(c)(5), organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part II. 5 Is the organization amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III. 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the inghit to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 7 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the inghit to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 8 Did the organization instead areas, or historic structures? If "Yes," complete Schedule D, Part II. 9 Did the organization instead in amount in Part X, line 21, serve as a custodian for amounts not itsed in Part X, or provide credit counseling, debit management, irredit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V. 10 Did the organization is never to any of the following questions is "Yes," complete Schedule D, Part V. 11 If the organization is answer to any of the following questions is "Yes," complete Schedule D, Part V. 12 Did the organization is answer to any of the following questions is "Yes," complete Schedule D, Part V. 13 Did the organization report an amount for investments—organization and part A, line 13 that is 5% or more of its total assets rep				Yes	No
2 is the organization required to complete Schedule B, Schedule C Contributors (see instructions)? 2	1				
3 Dit the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offices? If "Yes," complete Schedule C, Part I i. 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 i. 5 Is the organization assertion 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 II i. 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II i. 7 Did the organization advised of unconstructures? If "Yes," complete Schedule D, Part II i. 8 Did the organization than accounts of works of art instoncal treasures, or other similar assets? If "Yes," complete Schedule D, Part II i. 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 i. 10 Did the organization is answer to any of the following questions is "Yes," complete Schedule D, Part VI vi. VII, VIII, X, or X as applicable 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI vi. VII, VIII, X, or X as applicable 11 Did the organization report an amount for other assets 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 vi. VIII vi. X organization report an amount for other assets in Part X, line 12 that is 5% or more of the total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X vi. Did t	_				
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4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the lax yea? If Yes," complete Schedulo (P. art II). 5 Is the organization a section 501(c)(4), 501(c)(6), 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 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 7 Did the organization device or the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 8 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 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. 10 Did the organization report an amount for allowing questions is "Yes," complete Schedule D, Part V. 2 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI, VII, VII, K, or X as applicable 10 Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part XI, If the Organization report an amount for other tassets 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 XI, If Did the organization report an amount for other tassets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Y	3		1.		.,
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endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, XII, X, or Xa spiciable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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. 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 VII. 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 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 X, III to X 11c	40		9		_X
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e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	d				
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12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	T	·			**
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	42-		111		Х
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	12 a		122	v	
the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	h		124		
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	-	•	12h		х
14a Did the organization maintain an office, employees, or agents outside of the United States?	13				
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14 a				
foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV					
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		fundraising, business, investment, and program service activities outside the United States, or aggregate		- 1	
organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X
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	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV			15		X
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)	16	· ·			
on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	4-7		16		Х
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	17		, ,		v
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	19		1/	\rightarrow	٨
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	10		10	- 1	У
If "Yes," complete Schedule G, Part III	19		10	-+	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			19		Х
	20 a	Did the organization operate one or more hospital facilities? If "Yes." complete Schedule H		-+	
			_		

 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21 . 22 . 23 . 24a . 24b	Yes	XXX
 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21 . 22 . 23 . 24a . 24b		х
 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 . 23 . 24a		х
 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 . 23 . 24a		
on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 23 . 24a . 24b		
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	. 23 . 24a . 24b		х
organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	. 23 . 24a . 24b		Х
employees? If "Yes," complete Schedule J	. 23 . 24a . 24b		Х
 24 a 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 . 24b		
\$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 . 24b		1
through 24d and complete Schedule K If "No," go to line 25	. 24a . 24b	1	
 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 	. 24b	i	x
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year		1	
to defease any tax-exempt bonds?	1		İ
		1	
	· —	 	<u> </u>
25 a 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	· —	1	
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-EZ7			
If "Yes," complete Schedule L, Part I	*	┼	
Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, o			Ų.
disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			Х
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee			
substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			١
entity or family member of any of these persons? If "Yes," complete Schedule L, Part III			X
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 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<u> </u>	X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	1		
Schedule L, Part IV	. 28b		Х
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	<u> </u>	Х
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
conservation contributions? If "Yes," complete Schedule M			Х
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
Part I	مما		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	,		
complete Schedule N, Part II			X .
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			Х
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			Х
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?			Х
b 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			Х
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			
		 -	
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R	27		Х
Part VI			$\stackrel{\frown}{}$
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		x	
19? Note. All Form 990 filers are required to complete Schedule O	. 38 Form	_ ^	

Pai	tV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	· • •	Yes	<u>- </u>
1.	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		168	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
Ŭ	reportable gaming (gambling) winnings to prize winners?	1 c		
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 30		,	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	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	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3 b	X	
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			v
	account)?	4a		X
D	If "Yes," enter the name of the foreign country ▶			
5.2	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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			
	organization solicit any contributions that were not tax deductible?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts 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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year	70		/
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of qualified intellectual property, and 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		
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	İ		
	Initiation fees and capital contributions included on Part VIII, line 12		ŀ	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter	,	,- ,	į.
	Gross income from members or shareholders	ľ	1	. ~
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
122		12a		
	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.			
		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	-	l	
	the organization is licensed to issue qualified health plans]	ŀ	
C	Enter the amount of reserves on hand			
	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	14a		Χ
b sa	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
Jr1		Earm	aan /	2011

420243366 Form 990 (2011) CLARKE ELECTRIC COOPERATIVE, INC Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI.............. Х Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b 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 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? . . . 4 4 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?.... Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a 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. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes Νo 10a b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy?.......... 13 Х 14 14 Did the organization have a written document retention and destruction policy?....... 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? 15a 15b 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 16a with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year

State the name, physical address, and telephone number of the person who possesses the books and records of the

organization > WILLIAM FREEMAN P O BOX 161 OSCEOLA, IA 50213-0161

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Form 990 (2011)

Name and Title

(F)

Estimated

Reportable

Reportable

	OLIMAL BEBOINTO OCCIBIATION INC.	1202 200 2
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest	Compensated Employees, and
	ndependent Contractors	
	Check if Schedule O contains a response to any guestion in this Part VII	

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"

Average

- 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

(C)

Position

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

Name and this	hours per week (describe hours for	box,	unle	ss pe	erson	e than o is both tor/trust	an	compensation from the organization	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the
	related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) THOMAS CARSON										
DIRECTOR	1.11	x						4,200.	_ 0	0
(2) RALPH EVANS										
DIRECTOR	2.30	Х					L_	6,125.	0	0
(3) RANDY GAUMER										
TREASURER	3.14	Х	<u> </u>					6,475.	0	0
(4) LARRY JACKSON										
DIRECTOR	2.64	X	<u> </u>				ļ	5,775.	0	0
(5) PAUL KELLER VICE PRESIDENT	.69	Х				<u> </u>		6,300.	0	0
(6) KYLE KELSO										
SECRETARY	1.31	X					<u> </u>	3,150.	0	0
(7) MARILYN MARSH	_				ł					
ASSISTANT SECRETARY/TREASURER	2.13	X						6,300.	0	0
(8) FRANK RILEY		١								0
PRESIDENT	1.51	X	<u> </u>					5,250.	0	0
(9) WILLIAM WILLIS II	1 10	,						2 050	0	0
DIRECTOR	1.19	X			<u> </u>		H	2,850.		
(10) WILLIAM FREEMAN	40.00			х				108,610.	0	34,939.
GENERAL MANAGER	40.00		$\vdash \vdash$	^	-		<u> </u>	100,010.	- 0	34,939.
7 1 1 1			. 1					7		

_ (12)

(13)

(14)

Part VII Section A. Officers, Directors, Tru	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A) Name and title	(B) Average hours per week (describe hours for	(do not check more than of box, unless person is both officer and a director/trus				ıs both or/trust	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		other compensation	
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(10 23 100 1	,	organization and related organizations	
				-								
	~-			-		-					- <u>-</u> .	
	-								· · · ·			
									<u>-</u>			
1b Sub-total	ection A .						* * *	155,035. 0 155,035.		0	34,93	(
Total number of individuals (including but not I reportable compensation from the organization	imited to the		iste						\$100,000			
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu.	er, directo	r, or	tru	ste	e, I	κey ε	mp	loyee, or highest	compens	sated	Yes 3	No X
4 For any individual listed on line 1a, is the sorganization and related organizations green individual	sum of rep eater than	ortab \$15	le c	om 00?	pen <i>If</i>	satior <i>"Yes</i>	n ar	nd other compens complete Schedul	ation from	the	4	X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye											5	Х
Complete this table for your five highest components from the organization Report of year.												
(A) Name and business add	ress							(B) Description of se	vices	C	(C) ompensation	
				_								_
							_					
Total number of independent contractors (in more than \$100,000 in compensation from the				ited		thos	e li	sted above) who	received			

Pa	rt VII	Statement of Revenue				,	
1		,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
at st	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь						
ts, C	C			[<u> </u>	
ia i	d						
Sim's	e	Government grants (contributions) 1e					
e të	f	All other contributions, gifts, grants,		,			
ē t		and similar amounts not included above . 1f					1
io p	g	Noncash contributions included in lines 1a-1f \$,, -		
	h	Total. Add lines 1a-1f		0			
Program Service Revenue			Business Code				
eve	2a	DISTRIBUTE ELECTRICITY TO MEMBERS	221000	11,111,516	11,111,516		
e E	b						
Ξ	С						
Se	d						
ram	е						
ō	f	All other program service revenue					
<u> </u>	9	Total. Add lines 2a-2f	<u> ▶</u>	11,111,516			
	3	Investment income (including dividends, inter					
		other similar amounts) ATTACHMENT	1 ▶	145,830			145,830
	4	Income from investment of tax-exempt bond		0			
	5	Royalties · · · · · · · · · · · · · · · · · · ·	(II) Personal	0			
		(i) Real	(II) Personal	,			
	6a	Gross rents	 				1
	b	Less rental expenses		·			
	С	Rental income or (loss) L		-		-	
	d	Net rental income or (loss)	(II) Other	0			
	7a		(ii) Other		,		
		assets other than inventory	<u> </u>				
	b	Less cost or other basis		, -			
		and sales expenses	<u> </u>	-			
	C	Gain or (loss) L					
	d	Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·	0			-,
ie	8 a	Gross income from fundraising		, ,			
venue		events (not including \$					
		of contributions reported on line 1c)					
<u>_</u>		See Part IV, line 18 a					
Other Re	b	Less direct expenses b Net income or (loss) from fundraising events				* **	
0	C		· · · · · · · · · · · · · · · · · · ·				
	9a	Gross income from gaming activities See Part IV, line 19					
	١.						
	D C	Less direct expenses b Net income or (loss) from gaming activities .		ا أ			
	l		· · · · · · · · · · · · · · · · · · ·				
	10a	Gross sales of inventory, less returns and allowances					
		Less cost of goods sold b					
	b	Net income or (loss) from sales of inventory.		ا ا			
	Ť	Miscellaneous Revenue	Business Code		······································		1
	11a	HVAC/RESALE/SECURITY/OTHER NON-UTILITY	811000	904,263	494,671_	409,592	
	b	NAME AND ADDRESS OF THE PARTY O					
	C						
	ď	All other revenue					
	e	Total Add lines 11a-11d · · · · · · · · ·		904,263			
	12	Total revenue See instructions		12,161,609	11,606,187	409,592	145,830

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)

	Check if Schedule O contains a resp		this Part IX	<u> </u>	
	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 United States See Part IV, line 21.	0			
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	0			
3	Grants and other assistance to governments,		ļ		
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members . ATCH. 2	239,059.	239,059.		
5	Compensation of current officers, directors,				
	trustees, and key employees	155,036:	155,036.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	1 400 066		-
7	Other salaries and wages	1,492,966.	1,492,966.		
8	Pension plan accruals and contributions (include section	224 142	224 142		
_	401(k) and 403(b) employer contributions)	324,143.	324,143.		
9	Other employee benefits	597,280. 129,598.	597,280. 129,598.		
10	Payroll taxes	129,390.	129, 390.		*
11	Fees for services (non-employees)	0	!		
	Management	19,220.	19,220.		
	Legal	17,925.	17,925.		
	Accounting	0	17,323.	١	
	Professional fundraising services See Part IV, line 17	0			
	Investment management fees	0			
	Other	0			
12	1	24,108.	24,108.		
13	Office expenses	58,030.	58,030.		
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	689,834.	689,834.		
21	Payments to affiliates	0	056.015		
	Depreciation, depletion, and amortization	856,015.	856,015.		
23	Insurance ATCH. 6	0			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	(A) amount, list line 24e expenses on Schedule O)				
	· · · · · · · · · · · · · · · · · · ·	6,062,985.	6,062,985.		
	PURCHASED POWER REPAIRS AND MAINTENANCE	598,282.	598,282.		
_	OPERATING EXPENSE	444,213.	444,213.	 	
	CAPITALIZED LABOR & BENEFITS	-961,695.	-961,695.	-	
	All other expenses	825,945.	825,945.		-
	Total functional expenses Add lines 1 through 24e	11,572,944.	11,572,944.		
	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	0			<u></u>
~					

Pa	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	32,669.	1_	35,187.
	2	Savings and temporary cash investments	360,492.	2	590,872.
	3	Pledges and grants receivable, net	0	3	
	4	Accounts receivable, net	1,186,775.	4	2,492,230.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of			
s	6	Schedule L 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		(
ets	7	Notes and loans receivable, net	817,987.	7	769,388.
Assets	8	Inventories for sale or use	240,385.	8	227,572.
٩	9	Prepaid expenses and deferred charges	163,225.	9	87,977.
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 31,678,565.			
	b	Less accumulated depreciation	19,012,590.	10c	20,039,190.
	11	Investments - publicly traded securities	0	11	(
	12	Investments - other securities See Part IV, line 11	543,153.	12	541,660.
	13	Investments - program-related See Part IV, line 11	0	13	(
	14	Intangible assets	99.	14	99.
	15	Other assets See Part IV, line 11	9,246,816.	15	8,719,815.
	16	Total assets. Add lines 1-through-15-(must equal line 34)	31,604,191.	16	33,503,990.
	17	Accounts payable and accrued expenses	3,688,699.	17	1,234,987.
	18	Grants payable	0	18	(
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	(
ç	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	(
Liabilities	22	Payables to current and former officers, directors, trustees, key			
펿		employees, highest compensated employees, and disqualified persons			
Ï		Complete Part II of Schedule L	o	22	(
	23	Secured mortgages and notes payable to unrelated third parties ATCH 4	12,932,702.	23	12,110,504.
	24	Unsecured notes and loans payable to unrelated third parties	0	24	(
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	5,076,076.	25	9,433,980.
	26	Total liabilities. Add lines 17 through 25	21,697,477.	26	22,779,471.
ses		Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
Bag	28	Temporarily restricted net assets		28	
ğ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds	d	30	C
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund	d	31	0
ĕ	32	Retained earnings, endowment, accumulated income, or other funds ATCH 5	9,906,714.	32	10,724,519.
Ķ		Total net assets or fund balances	9,906,714.	33	10,724,519.
_	34	Total liabilities and net assets/fund balances	31,604,191.	34	33,503,990.

Form **990** (2011)

For	m 990 (2011)		Pa	ge 1 Z
P	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI		X	
1	Total revenue (must equal Part VIII, column (A), line 12)	12,1	61,	509.
2	Total expenses (must equal Part IX, column (A), line 25)	11,5	72,9	944.
3	Revenue less expenses Subtract line 2 from line 1	5	88,	665.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	9,9	06,	714.
5	Other changes in net assets or fund balances (explain in Schedule O)	2	229,	140.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))	10,7	24,5	519.
P	Financial Statements and Reporting 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			
	Schedule O	l		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	İ	X
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in	-		
	Schedule O	-		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	-		
	issued on a separate basis, consolidated basis, or both			
	X Separate basis	ľ		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		l	
	the Single Audit Act and OMB Circular A-133?	3a_	X	<u> </u>
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	26	,,	
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b	Х	<u> </u>
		Form	990	(2011)

SCHEDULE D (Form 990)

Supplemental Financial Statements

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number 420243366 CLARKE ELECTRIC COOPERATIVE, INC.

Pa	organizations Maintaining Donor Adviorganization answered "Yes" to Form 9	ised Funds or Other Similar Funds o 190. Part IV. line 6.	or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets held in	n donor advised
•	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, ar		
•	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		
Pa	rt II Conservation Easements. Complete if	the organization answered "Yes" to f	Form 990, Part IV, line 7
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recre		of an historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space	1 10001 441011	or a contined motorio of cotale
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution i	in the form of a conservation
-	easement on the last day of the tax year		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified		
d	Number of conservation easements included in (c)		
	historic structure listed in the National Register, .		
3	Number of conservation easements modified, trans	sferred, released, extinguished, or termi	nated by the organization during the
	tax year ▶	•	, ,
4	Number of states where property subject to conse	rvation easement is located >	
5	Does the organization have a written policy regard	ing the periodic monitoring, inspection, h	andling of
	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, in	ispecting, and enforcing conservation ea	sements during the year
	>		
7	Amount of expenses incurred in monitoring, inspec	ting, and enforcing conservation easeme	ents during the year
	▶ \$		
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements of s	section 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports		
	balance sheet, and include, if applicable, the text of	The state of the s	cial statements that describes the
	organization's accounting for conservation easeme		
Pa	Organizations Maintaining Collections Complete if the organization answered	"Ves" to Form 000 Part IV June 8	er Similar Assets.
1 a	If the organization elected, as permitted under SF works of art, historical treasures, or other simila public service, provide, in Part XIV, the text of the fo	FAS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	public service, provide, in Part XIV, the text of the fo	ootnote to its financial statements that de	escribes these items
b	If the organization elected, as permitted under S	SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other similar	ir assets held for public exhibition, edi	ucation, or research in furtherance of
	public service, provide the following amounts relating		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of ar		
	following amounts required to be reported under Si		
a	Revenues included in Form 990, Part VIII, line 1		••••••••••••••••••••••••••••••••••••••
b	Assets included in Form 990, Part X	<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · • • • • • • • • • • • • •

Р	aa	e	2

Şche	dule D (Form 990) 2011	=-										Page 2
Pa	rt III Organizations Maintain	ing Coll	ections of	Art, H	istorica	Treasu	ires, o	r Other	Similar Ass	ets (continued)	
3	Using the organization's acquisition collection items (check all that app		ssion, and	other r	ecords, o	check an	y of th	e follow	ring that are	a sigr	nificant use	of its
а	Public exhibition			d		Loan or	excha	nge prog	ırams			
b	Scholarly research			е		Other						
С	Preservation for future ge	enerations	5			-	-					
4	Provide a description of the orga	nization's	collection	s and o	explain h	ow they	further	r the or	ganization's e	exemp	t purpose ii	n Part
	XIV											
5	During the year, did the organization	on solicit	or receive	donatio	ns of art,	historica	al treas	ures, or	other similar			
	assets to be sold to raise funds rati										Yes	No
Ра	rt IV Escrow and Custodial A line 9, or reported an ar	rrangen nount or	nents. Co n Form 99	mplete 0, Parl	e if the o	rganızat 21.	tion an	swered	"Yes" to Fo	rm 99	00, Part IV,	
1 2	Is the organization an agent, truste	e custod	lian or othe	r intern	nediary f	or contrit	nutions	or other	r assets not			
ıa	included on Form 990, Part X?									۲	Yes [No
ь.	If "Yes," explain the arrangement in									٠. ٢		
U	ii res, explain the arrangement ii	ri ditaiv	and comp	icic iii	. 1011011111	g tubic			Amo	ount	-	
С	Beginning balance						16					
	Additions during the year								<u> </u>			
-	Distributions during the year											
f	Ending balance											
2a	-										Yes	No
	If "Yes," explain the arrangement in			,						· - L		
	tV Endowment Funds. Con			nizatio	n answe	red "Yes	s" to F	orm 99	D. Part IV. Iir	ne 10		
			rrent year) Pnor year) Two yea		(d) Three years		(e) Four year	rs back
1a	Beginning of year balance											
b	Contributions		-									
С	Net investment earnings, gains,			1								
	and losses											
d	Grants or scholarships						-					
е	Other expenditures for facilities .											
	and programs								!			
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage	of the cur	rent year e	nd bala	ance (line	1g, colu	ımn (a)	held as			L	
а	Board designated or quasi-endown		•	%	,	J .						
b	Permanent endowment ▶	~		_								
С	Temporarily restricted endowment	>	%									
	The percentages in lines 2a, 2b, ar		uld equal 1	00%								
3 a	Are there endowment funds not in				nızatıon	that are	held an	id admir	istered for the	•		
	organization by	·		_							Yes	No
	(i) unrelated organizations										3a(i)	
	(ii) related organizations										3a(ıi)	
b	If "Yes" to 3a(II), are the related org	anization	s listed as	require	d on Scho	edule R?					3 b	
4	Describe in Part XIV the intended u	ises of the	e organizat	ion's e	ndowmer	nt funds						
Par	t VI Land, Buildings, and Equ	ipment.	See For	n 990	Part X,	line 10						
	Description of property		(a) Cost or (inves	other ba	sıs (b)	Cost or other)	er basis		umulated eciation	(d	1) Book value	
1a	Land					206,	836.				206,	836.
b	Buildings				2	8,284,	715.	8,5	93,326.		19,691,	389.
С	Leasehold improvements	.										
d	Equipment					3,187,	014.	3,0	46,049.		140,	965.
	Other											
Tota	I. Add lines 1a through 1e (Column	(d) must	equal Form	n 990, I	Part X, co	lumn (B),	line 10)(c))	▶		20,039,	190.
										Sched	ule D (Form 99	90) 2011

Part VII	Investments - Other Securities. Sec	Form 990, Part X, line	12	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1) Financi	al derivatives			
	-held equity interests			
(3) Other_				
/ A \		1		<u> </u>
(B)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
	n (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>		
Part VIII	Investments - Program Related. Se	e Form 990, Part X, line	13	
	(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				
_(9)				
(10)				
	n (b) must equal Form 990, Part X, col (B) line 13)	>		
Part IX	Other Assets. See Form 990, Part			
		(a) Description		(b) Book value
	TRUCTION WORK IN PROGRESS			5,425,114
	STMENT- PROPERTY	<u> </u>		55,468
_ , ,	ONAGE CAPITAL ALLOCATIONS			1,806,203
'	RICTED CASH			47,525
	REMENT WORK IN PROCESS			1,385,505
(6)				
(7)				
(8)				·
(9)				
(10)				8,719,815
Part X	Other Liabilities. See Form 990, Part X, col (B) line 15)			8,719,813
1.	(a) Description of liability	(b) Book value		
	al income taxes			
	STORM LINE OF CREDIT	9,100,00	•	
	RRED CREDITS	9,77		,
	OMER DEPOSITS	81,54	-	
	ADVANCES	107,21	 1	•
	JED VACATION & PAYROLL	119,99		,
	R LIABILITIES	15,44	<u>6.</u>	
(8)			_	•
(9)				
(10)				
(11)				ł
	n (b) must equal Form 990, Part X, col (B) line			
	ASC 740) Footnote In Part XIV, provide t		e organization's financial statement	s that reports the
organizatioi	n's liability for uncertain tax positions unde	r FIN 48 (ASC 740)		

Schedu	le D (Form 990) 2011			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Staten	nents	;	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		12,161,609.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		11,572,944.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		588,665.
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		239,059.
9		9		239,059.
10		10		827,724.
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re			<u> </u>
1	Total revenue, gains, and other support per audited financial statements		1	12,161,609.
2	Amounts 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 2b	\dashv		
	Pacayarias of procupates			
C	Recoveries of prior year grants 2c Other (Describe in Part XIV) 2d			
d		┥,	,	
e	Add lines 2a through 2d	· •	2e 3	12,161,609.
3	Subtract line 2e from line 1	⋰⊢	3	12,161,009.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	-		
þ	Other (Describe in Part XIV)	┨.	.	
	Add lines 4a and 4b	· ·	lc -	12 161 600
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	12,161,609.
	Reconciliation of Expenses per Audited Financial Statements With Expenses per R	-		11 222 005
1	Total expenses and losses per audited financial statements	⊢	1	11,333,885.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		İ	
а	Donated services and use of facilities 2a			
þ	Prior year adjustments 2b			
C	Other losses Zc Zc Zc Zc Zc Zc Zc Zc Zc Zc Zc Zc Zc			
d	Other (Describe in Part XIV)	.		
е	Add lines za through zu	—	?e	11 000 005
3	Subtract line 2e from line 1	· ·	3	11,333,885.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		- 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	_	Į	
þ	Other (Describe in Part XIV)	9.	1	
С	Add lines 4a and 4b	. 4	lc	239,059.
_ 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	11,572,944.
Part	XIV Supplemental Information			
Part V,	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp ditional information	irt IV, lete th	lines nis p	1b and 2b, art to provide
PATR	ONAGE ALLOCATION			
SCHE	DULE D PART XI LINE 8 AND PART XIII LINE 4B			
2011	PATRONAGE ALLOCATION TO MEMBERS OF \$239,059 INCLUDED ONLY ON RETURN			

Part XIV Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

CLARKE ELECTRIC COOPERATIVE, INC.

Employer identification number

420243366

MEMBERS

PART VI, SECTION A LINE 6

CLARKE ELECTRIC COOPERATIVE, INC. SELLS ELECTRIC POWER TO CUSTOMERS
WITHIN ITS SERVICE AREA THAT HAVE PURCHASED MEMBERSHIP TO THE

COOPERATIVE.

ELECTION OF DIRECTORS

PART VI, SECTION A LINE 7A

MEMBERS ELECT ONE DIRECTOR FROM 3 DISTRICTS ANNUALLY FOR A TERM OF THREE YEARS. THE SERVICE AREA INCLUDES NINE DISTRICTS AND 3 DIRECTORS ARE UP FOR ELECTION ON A ROTATING SCHEDULE. ELECTIONS MUST BE CONTESTED. A DIRECTOR CAN SERVE 5 - 3 YEAR TERMS OR 15 YEARS AND THEN THEY ARE NO LONGER ELIGIBLE FOR RE-ELECTION.

REVIEW OF 990

PART VI, SECTION A LINE 11B

MANAGEMENT REVIEWS THE 990 PRIOR TO ITS SUBMISSION. THE FORM IS PREPARED

BY AN INDEPENDENT AUDITOR.

CEO COMPENSATION

PART VI, SECTION B LINE 15A

THE NRECA DATA FOR THE GM'S WAGES ARE COMPARED TO THE NATIONAL, REGIONAL AND STATE WAGE RANGES ON AN ANNUALLY BASIS BY THE BOARD OF DIRECTORS IN RELATIONSHIP WITH THE MANAGERS EVALUATION.

Name of the organization CLARKE ELECTRIC COOPERATIVE, INC. Employer identification number 420243366

STATEMENT AVAILABILITY

PART VI, SECTION C LINE 19

THE COMPANY MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

APPROVAL OF BOARD DECISIONS

SECTION VI, PART A LINE 7B

THE COOPERATIVE CANNOT SELL OR LIQUIDATE MAJOR PORTIONS OF BUSINESS

ASSETS OR COMPLETE PLANS OF MERGER WITHOUT AN AFFIRMATIVE VOTE BY THE

MEMBERS.

RECONCILLIATION OF NET ASSETS

PART XI LINE 5

CAPITAL CREDITS RETIRED (16,069)

MISCELLANEOUS 5,995

MEMBERSHIP 155

2011 PATRONAGE ALLOCATION 239,059

TOTAL OTHER CHANGES IN NET ASSETS 229,140

FORM 990, PART VIII - INVESTMENT INCOME

TOTALS

(A) (B) (C) (D) TOTAL RELATED OR UNRELATED **EXCLUDED** REVENUE EXEMPT REVENUE BUSINESS REV. REVENUE DESCRIPTION 24,263. INTEREST 24,263. 121,567. CAPITAL CREDITS ALLOCATIONS 121,567.

145,830.

Schedule O (Form 990 or 990-EZ) 2011

145,830.

ATTACHMENT 1

Page 2 Schedule O (Form 990 or 990-EZ) 2011 Name of the organization Employer identification number 420243366 CLARKE ELECTRIC COOPERATIVE, INC. ATTACHMENT 2 FORM 990, PART IX - BENEFITS PAID TO OR FOR MEMBERS 239,059. PATRONAGE ALLOCATION 239,059. TOTALS ATTACHMENT 3 FORM 990, PART X - NOTES AND LOANS RECEIVABLE WAYNE COUNTY HOSPITAL BORROWER:

200,000.

08/01/2007

07/01/2016 1,852 PER MONTH

BORROWER: SOUTHWESTERN COMM COLLEGE ORIGINAL AMOUNT: 740,000.

DATE OF NOTE: 08/01/2007
MATURITY DATE: 07/01/2016
REPAYMENT TERMS: 6,852 PER MONTH

ORIGINAL AMOUNT:

REPAYMENT TERMS:

DATE OF NOTE: MATURITY DATE:

Schedule O (Form 990 or 990-EZ) 2011

Page 2

Name of the organization

CLARKE ELECTRIC COOPERATIVE, INC.

Employer identification number

420243366 ATTACHMENT 3 (CONT'D)

BORROWER:

CITY OF SEYMOUR

ORIGINAL AMOUNT:

85,000.

DATE OF NOTE:

MATURITY DATE:

07/01/2000 06/01/2009

REPAYMENT TERMS:

708 PER MONTH & 1% FEE ON UNPAID BAL. EACH 3/1

BEGINNING BALANCE DUE

44,625.

ENDING BALANCE DUE

36,125.

BORROWER:

CITY OF SEYMOUR

ORIGINAL AMOUNT:

100,000.

DATE OF NOTE: MATURITY DATE:

09/22/2008 10/01/2018

REPAYMENT TERMS:

833 PER MONTH & 1% FEE ON UNPAID BAL EACH 10/1

BEGINNING BALANCE DUE

78,333.

ENDING BALANCE DUE

100,791.

Schedule O (Form 990 or 990-EZ) 2011

Page 2

Name of the organization

CLARKE ELECTRIC COOPERATIVE, INC.

Employer identification number

420243366 ATTACHMENT 3 (CONT'D)

BORROWER:

SOUTHWESTERN COMM COLLEGE

ORIGINAL AMOUNT:

200,000.

DATE OF NOTE:

MATURITY DATE:

08/01/2007 08/01/2016

REPAYMENT TERMS:

20,000 PER YEAR & 1% FEE ON UNPAID BAL EACH 8/1

BEGINNING BALANCE DUE

120,000.

ENDING BALANCE DUE

100,000.

BORROWER:

STEVE & THELMA JEAN SAXTON

ORIGINAL AMOUNT:

30,000.

INTEREST RATE:

3.000000

DATE OF NOTE: MATURITY DATE: 10/10/2007 09/10/2012

REPAYMENT TERMS:

539 EACH MONTH

BEGINNING BALANCE DUE

11,015.

ENDING BALANCE DUE

4,792.

Page 2 Schedule O (Form 990 or 990-EZ) 2011 Employer identification number Name of the organization 420243366 CLARKE ELECTRIC COOPERATIVE, INC. ATTACHMENT 3 (CONT'D) BORROWER: STEVE & THELMA JEAN SAXTON 29,600. ORIGINAL AMOUNT: 3.000000 INTEREST RATE: 02/07/2009 DATE OF NOTE: MATURITY DATE: 02/10/2014 REPAYMENT TERMS: 532 PER MONTH 19,251. BEGINNING BALANCE DUE 13,360. ENDING BALANCE DUE NICK & CALLISAT WILKEY BORROWER: 20,000. ORIGINAL AMOUNT: 3.000000 INTEREST RATE: DATE OF NOTE: 08/19/2010 09/10/2015 MATURITY DATE:

\$325 PER MONTH

BEGINNING BALANCE DUÉ

ENDING BALANCE DUE

19,023. 15,039.

REPAYMENT TERMS:

Schedule O (Form 990 or 990-EZ) 2011	Page Z
Name of the organization	Employer identification number
CLARKE ELECTRIC COOPERATIVE, INC.	420243366
	ATTACHMENT 4 (CONT'D)
LENDER: WAYNE CO. HOSPITAL	
ORIGINAL AMOUNT: 200,000.	
BEGINNING BALANCE DUE	200,000.
ENDING BALANCE DUE	200,000.
LENDER: SWCC- NEW DORM- CRESTON	
ORIGINAL AMOUNT: 740,000.	
BEGINNING BALANCE DUE	459,074.
ENDING BALANCE DUE	376,851.

Schedule O (Form 990 or 990-EZ) 2011	Page 2
Name of the organization	Employer identification number
CLARKE ELECTRIC COOPERATIVE, INC.	420243366
	ATTACHMENT 4 (CONT'D)
LENDER: COOPERATIVE FINANCE CORPORATION	
ORIGINAL AMOUNT: 4,103,637.	
BEGINNING BALANCE DUE	11,453,462.
ENDING BALANCE DUE	10,720,162.
TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	12,932,702.
	10 110 501
TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	12,110,504.
	ATTACHMENT 5
FORM 990, PART X - OTHER FUNDS	
	ENDING
DESCRIPTION	BOOK VALUE
DESCRIPTION	BOOK VALOE
MEMBERSHIPS	22,080.
TOTALS	22,080.