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Form **99** Department of the

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

, Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) 2011

Open to Public

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

For the 2011 calendar year, or tax year beginning and ending C Name of organization Check if applicable D Employer identification number CAROLINAS ELECTRICAL CONTRACTORS Address ASSOCIATION, INC. Name change 56-0521364 Doing Business As Initial Number and street (or P 0 box if mail is not delivered to street address) Room/suite E Telephone number Termin-9715 NORTHEAST PARKWAY 1300 (704)365-4016Amende City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-MATTHEWS, NC H(a) Is this a group return pendina F Name and address of principal officer: KENDALL PARKER for affiliates? Yes X No SAME AS C ABOVE H(b) Are all affiliates included? Yes Tax-exempt status: 501(c)(3) X 501(c) (4947(a)(1) or [)◀ (insert no) If "No," attach a list. (see instructions) J Website: ► WWW.CAROLINASECA.ORG H(c) Group exemption number ▶ K Form of organization X Corporation L Year of formation 1946 M State of legal domicile NC Association Other > Part I Summarv Briefly describe the organization's mission or most significant activities: TO ASSIST AND PROMOTE THE Governance COLLECTIVE INTERESTS OF THE ELECTRICAL CONTRACTOR Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. 19 Number of voting members of the governing body (Part VI, line 1a) $\overline{19}$ Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 SCANNED DEC 2 6 2012 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 29,141. 7a 7,639. b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 0 8 Contributions and grants (Part VIII, line 1h) 203,351. 9 Program service revenue (Part VIII, line 2g) 178,815. Investment income (Part VIII, count (A), Thes 374 rand 7d) 39,305. -241.39,982. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 43,560. 10c, and 11e) 282,638. Total revenue - add lines 8-through 11 (must equal Part VIII), column (A), line 12) 222,134. 12 Grants and similar amounts paid (Ran IX column 18), lines 1-3) 13 6,000. 6,000. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee Genefits (Part IX, column (A), lines 5·10)
16a Professional fundraising fees (Part IX, column (A), line 11e) 91,708. 79,025. 0. b Total fundraising expenses (Part IX, column (D), line 25) 194,227 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 161,570. 291,935. 246,595. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -9,297.Revenue less expenses. Subtract line 18 from line 12 -24,461.**Beginning of Current Year** End of Year 717,971. 668,746. 20 Total assets (Part X, line 16) -3,604 $\overline{733}$. 21 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 721,575. 668,013. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer fother than officer) is based on all information of which preparer has any knowledge Signature of officer Sign RON HINSON, TREASURER Here Type or print name and title PTIN Print/Type preparer's name P00445891 Paid AMY BIBBY Firm's name DIXON HUGHES GOODMAN Preparer 56-0747981 Firm's EIN Firm's address ▶ 500 RIDGEFIELD COURT Use Only

ASHEVILLE, NC 28806

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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

132001 01-23-12

Phone no (828) 254-2254

X Yes

Form 990 (2011)

No

CAROLINAS ELECTRICAL CONTRACTORS Form 990 (2011) ASSOCIATION, INC. 56-0521364 Page **2** Part III Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: OUR MISSION, AS AN ASSOCIATION, IS TO ASSIST AND PROMOTE THE COLLECTIVE INTERESTS OF THE ELECTRICAL CONTRACTOR, BY FACILITATING AND COORDINATING ACTIVITIES THAT ENHANCE THE ELECTRICAL INDUSTRY IN THE CAROLINAS. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.) (Expenses \$ including grants of \$) (Revenue \$ THE CAROLINAS ELECTRICAL CONTRACTORS ASSOCIATION PROVIDES EDUCATION AND TRAINING TO INCREASE THE TECHNICAL SKILLS, SAFETY, PRODUCTIVITY, QUALITY OF THE INDUSTRY, AND PROMOTE A HIGH ETHICAL STANDARD FOR THE BETTERMENT OF THE ELECTRICAL CONTRACTOR.) (Expenses \$ (Code including grants of \$ (Code) (Expenses \$ including grants of \$

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 <u> </u>			
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 	<u> </u>	 	
 _,		 ·	

(Expenses \$
4e Total program service expenses ▶

Other program services (Describe in Schedule O.)

including grants of \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			х
_	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	1		X
2	-	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		х
	public office? If "Yes," complete Schedule C, Part I	3	-	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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		<u> X</u>
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	X	
đ	,			v
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1 11		
	Schedule D, Parts XI, XII, and XIII	12a		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	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u>_X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		ŀ	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	ا ا		v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.	\mathbf{x}	
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	^	
19	complete Schedule G, Part III	19	İ	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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Form 990 (2011) ASSOCIATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			i
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21_	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,		ļ	
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	ļ	X
23	Did the organization answer "Yes" to Part VII, Section A, line 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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		
	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		X
ь	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		X
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 entity or family member	1		
	of any of these persons? If "Yes," complete Schedule L, Part III	27	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X
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		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_X
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>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?		ŀ	
	If "Yes," complete Schedule N, Part I	31		<u> </u>
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		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		İ	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
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	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		ļ	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		.	
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form 9	990 <i>(</i> 2	2011

Form 990 (2011) ASSOCIATION, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	"		
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	Ĺ.
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			ĺ
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	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.			ĺ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		.	ĺ
	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		
d	——————————————————————————————————————			
e	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	$-\!\!\!-\!\!\!\!+$	
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	.7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		1	
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	_8	-	
	Did the organization make any taxable distributions under section 4966?	0-	1	
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	90		
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		- 1	
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders		1	
	Gross income from other sources (Do not net amounts due or paid to other sources against		- 1	
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the	-	1	
	organization is licensed to issue qualified health plans	Ì		
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		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form 9	990 (2	2011)

Form 990 (2011) ASSOCIATION, INC. 56-0521364 Page

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					[A]			
1a	ion A. Governing Body and Management		<u></u>		T.,	T			
ıa	Enter the number of vetice members of the governing back at the and of the tay year	مه ا	19		Yes	No			
	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	1a	<u> </u>	Ĥ					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O								
	Enter the number of voting members included in line 1a, above, who are independent	1ь	19						
	Did any officer, director, trustee, or key employee have a family relationship or a business relationsl			1					
	officer, director, trustee, or key employee?	inp with	arry outer	2	•	х			
	Did the organization delegate control over management duties customarily performed by or under t	the dire	et eupenvision		-				
	of officers, directors, or trustees, or key employees to a management company or other person?		ot supervision	3		х			
	Did the organization make any significant changes to its governing documents since the prior Form	990 w	es filed?	4		X			
	Did the organization become aware during the year of a significant diversion of the organization's a			5		X			
	Did the organization have members or stockholders?			6	X				
	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint	one or						
	more members of the governing body?	• •		7a	Х				
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?			7b		Х			
8									
	The governing body?			8a	Х				
b	Each committee with authority to act on behalf of the governing body?			8b	Х				
9	ls there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	eached	at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X			
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal	Revenu	e Code.)						
					Yes	No			
	Did the organization have local chapters, branches, or affiliates?			10a		X			
	If "Yes," did the organization have written policies and procedures governing the activities of such	chapter	s, affiliates,	10b					
	and branches to ensure their operations are consistent with the organization's exempt purposes?								
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х				
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	se to con	flicts?	12b	X				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			120					
	in Schedule O how this was done	.00, 0		12c	Х				
	Did the organization have a written whistleblower policy?			13		X			
	Did the organization have a written document retention and destruction policy?	••	• •	14	Х				
15	Did the process for determining compensation of the following persons include a review and appro-	val by ır	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	-	-						
а	The organization's CEO, Executive Director, or top management official			15a	X				
b	Other officers or key employees of the organization			15b		X			
	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 arrange	ement v	rith a						
	taxable entity during the year?			16a		_X			
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	anızatıo	n's						
	exempt status with respect to such arrangements?			16b					
	ion C. Disclosure	_							
Sect									
Sect 17	List the states with which a copy of this Form 990 is required to be filed NONE	T (C			1.				
Sect 17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (Sect	on 501(c)(3)s only) a	vallab	le				
Sect 17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 for public inspection. Indicate how you made these available. Check all that apply.	T (Sect	on 501(c)(3)s only) a	availab	le				
Sect 17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request								
Sect 17 18 19	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, or								
Sect 17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, or statements available to the public during the tax year.	onflict o	of interest policy, an	d finan	cıal				
Sect 17 18 19	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	onflict o	of interest policy, an	d finan	cıal				

ASSOCIATION, INC.

Form 990 (2011)

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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. 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.

 $oldsymbol{ol}}}}}}}}}}}}}}}}}$

- 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.

(A)	(B)	J. g.	411120		C)	про	nout	(D)	(E)	(F)
Name and Title	Average hours per				more	than		Reportable compensation	Reportable	Estimated amount of
	week					or/trus		from	compensation from related	other
	(describe	director						the	organizations	compensation
	hours for related	ip o	黟			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	trustee or	la tu		蠡	omper		(172) 1000 111100)		and related
	ın Schedule O)	Individual	Institutional trustee	Officer	Кеу етріоуве	Highest compensated employee	Former			organizations
(1) SAM VAUGHAN		=	=	0	ž	Ξb	ı.E			
PRESIDENT	2.00	X		Х				0.	0.	0.
(2) DONALD BELK, JR.										
IMMEDIATE PAST PRESIDENT	2.00	X		X		L		0.	0.	0.
(3) RON HINSON								_		
TREASURER	2.00	X		X				0.	0.	0.
(4) DAVID LATOUR									_	
SECRETARY	2.00	X		X				0.	0.	0.
(5) JACK HARGETT	1 00									
2ND VICE PRESIDENT	1.00	X	<u> </u>	Х	_	<u> </u>	_	0.	0.	0.
(6) CRAIG MYERS	2 00	,,							•	•
DIRECTOR AT LARGE	2.00	X	-					0.	0.	0.
(7) JODY BRANNOCK	1 00	, .							•	0
ASSOCIATE MEMBER PRESIDENT	1.00	X	<u> </u>	_		├		0.	0.	0.
(8) KEITH BROKKE	1.00	X						0.	0.	^
ASSOCIATE MEMBER VICE PRESIDENT	1.00	^		<u> </u>				0.	0.	0.
(9) DAVID BLACKWOOD	1.00	X						0.	0.	0.
ASSOCIATE MEMBER PAST PRESIDENT (10) LARRY BEAVER	1.00	^	-			 		0.	0.	
DIRECTOR	1.00	Х			ŀ			0.	0.	0.
(11) STEVE BROWN	1.00				-	-				
DIRECTOR	1.00	х			ŀ			0.	0.	0.
(12) JOHN SANDERS					_	-	-			
DIRECTOR	1.00	Х		ŀ				0.	0.	0.
(13) ROB BLACKMON										
DIRECTOR	1.00	Х						0.	0.	0.
(14) TOM JACKSON										
DIRECTOR	1.00	Х						0.	0.	0.
(15) STEVE PENDERGRAPH										*
DIRECTOR	1.00	X						0.	0.	0.
(16) MILTON VIA, JR.										
DIRECTOR	1.00	Х						0.	0.	0.
(17) JOHN STARR										
DIRECTOR AT LARGE	1.00	X			L			0.	0.	0.
										Form 000 (2011)

Page 8

Part VII Section A. Officers, Directors,	Γrustees, Key Ε	mpl	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)				
(A)	(B)		(C)					(D)	(E)			(F)	
Name and title	Average		Position (do not check more than one					Reportable	Reportable		1	stimate	
	hours per week		c, unle icer ar					compensation	compensate from related		ar	mount other	
	(describe	cţo						the	organization		con	npensa	
	hours for	or director				pg.		organization	(W-2/1099-MI			rom th	
	related	8	Tasta		_	Sensa		(W-2/1099-MISC)			_	ganızat	
	organizations in Schedule		onal		l ak						1	d relat	
	0)	Individual	Institutional frustee	Officer	Key employee	Highest compensated employee	Former				orga	anızatı	ons
(18) SCOTT COLTER	1 00			<u> </u>	_						_		
DIRECTOR (19) ROBERT PENDERGRAPH	1.00	X	╁	\vdash	\vdash	-	\vdash	0.		0.	 -		0.
LIFETIME MEMBER REPRESENTATIVE	1.00	x						0.		0.			0.
(20) MICHAEL PRESLEY										•			
1ST VICE PRESIDENT	1.00	X		X				0.		0.			0.
(21) KENDALL PARKER			İ										
EXECUTIVE DIRECTOR	40.00			X				63,293.		0.	<u> </u>	5,0	63.
							i						
		\vdash	-	_		ļ	-						
							L		 -				
1b Sub-total			<u> </u>		<u> </u>	 	_	63,293.		0.		5,0	63.
c Total from continuation sheets to Part	VII, Section A					\blacktriangleright		0.		0.			0.
d Total (add lines 1b and 1c)								63,293.		0.		5,0	63.
2 Total number of individuals (including bu	t not limited to th	nose	liste	ed al	bove	e) wl	no r	eceived more than \$100	,000 of reportab	le			_
compensation from the organization						_	-					Yes	0 No
3 Did the organization list any former office	er, director, or tr	uste	e, ke	y er	npic	yee	, or	highest compensated ei	mployee on				
line 1a? If "Yes," complete Schedule J fo	r such individual										3		Х
4 For any individual listed on line 1a, is the									the organization				
and related organizations greater than \$											4		X
5 Did any person listed on line 1a receive of rendered to the organization? If "Yes," comparison of the property of the pro	-				-		elat	ed organization or indivi	dual for services		5		Х
Section B. Independent Contractors	nnpiete_ocnedal	C 	OI S	JCIT	Ders	3011		· · · · · · · · · · · · · · · · · · ·					
1 Complete this table for your five highest										pens	ation f	rom	
the organization. Report compensation for (A)	or the calendar y	ear (endi	ng v	vith	or w	ithir		ear.				
Name and busine	ss address	NO	INC	3			İ	(B) Description of s	ervices	С	Omper	<i>r)</i> nsatior	n n
										_	_		
-													·-·
	u.										-		
												-	
2. Total number of rade-section and the	(includes a bard				<u> </u>			Johanna) with a margin of					
2 Total number of independent contractors \$100,000 of compensation from the organ		IOT III	nite	u to	_	se lis	sted	above) who received m	ore tnan			_	
											Form 9	aan /a	2011)

56-0521364 Page **9**

Forn	n 990	(2	2011) ASSOC	CIATION,	INC.			56-0521	364 Page 9
	rt V			nue	,				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 6	а	Federated campaigns .	. 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ı	b	Membership dues	. 1b					
A,	•	C	Fundraising events	1c					
를 를	•	d	Related organizations	1d					
ins,	•	е	Government grants (contribut	ions) 1e					
er S	1	f	All other contributions, gifts, gran	l l					
듗욑			similar amounts not included abo	ve 1f					
ag d	•		Noncash contributions included in lines	1a-1f \$					
O g	1	h	Total. Add lines 1a-1f		D				
_			CONTRAINTON / MEET	TNC DEE	Business Code	70 020	70 020		
Program Service Revenue	2 6	a	CONVENTION/MEET	ING FEE	900099	79,020. 59,545.	79,020.		
le S		b	CODE COURSE MEMBERSHIP DUES	,	900099	40,250.	59,545. 40,250.		
m S	•	С	MEMBERSHIP DUES	<u> </u>	900099	40,250.	40,250.		
gra	•	d				-			
Pro	9	e	All other program control rous						
	'	ا ~	All other program service revertoral. Add lines 2a-2f	inue .		178,815.			
	3	9	Investment income (including	dividends inter		170,0101			
			other similar amounts)	dividends, inter	est, and	4,018.			4,018.
	4		Income from investment of ta	x-exempt bond r	proceeds				-70-200
	5		Royalties	r ortornipt borid i	>	10,205.		10,205.	
				(ı) Real	(II) Personal	•		•	
	6 6	а	Gross rents	(y : 133	(1)				
		b	Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)		•			İ	
			Gross amount from sales of	(i) Securities	(II) Other				
			assets other than inventory		1				
	ı	b	Less: cost or other basis						
			and sales expenses	4,259.					
		C	Gain or (loss)	-4,259.					
	•	d	Net gain or (loss)		>	-4,259.			-4,259.
<u> </u>	8 (а	Gross income from fundraisin	g events (not					
eun			ıncluding \$	of					
ev.			contributions reported on line	1c). See					
er			Part IV, line 18	а					
Other Revenue			Less: direct expenses	. b	'	1.4 000			
•			Net income or (loss) from fund		•	14,399.			14,399.
	9	а	Gross income from gaming ac	ctivities. See					
			Part IV, line 19	а					
			Less: direct expenses	. b					
			Net income or (loss) from gam		•				
	10	а	Gross sales of inventory, less						
		_	and allowances	a					
	l .		Less: cost of goods sold	b	·				
	-	C	Net income or (loss) from sale		Duan				
		_	Miscellaneous Revenu ADVERTISING	ie	Business Code 541800	18,936.		18,936.	
	ı		MISCELLANEOUS		900099	20.		10,330.	20.
		D	HISCEPTHMEOOS		300033	20.	-		20.
	'	ت	All other reverse						
			All other revenue Total. Add lines 11a-11d	•		18,956.			
	12	e	Total revenue. See instructions	• ••		222.134	178,815.	29.141	14,178

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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 response to any question in this Part IX									
	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	6,000.							
2	Grants and other assistance to individuals in				-				
	the United States. See Part IV, line 22								
3	Grants and other assistance to governments,			<u>", ", "</u>					
	organizations, and individuals outside the								
	United States. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,				, Manua				
	trustees, and key employees	68,356.							
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	Pension plan accruals and contributions (include				-				
	section 401(k) and section 403(b) employer contributions)	2,210.							
9	Other employee benefits	3,545.							
10	Payroll taxes	4,914.							
11	Fees for services (non-employees):	,							
а	Management								
b	Legal								
С	Accounting	5,712.							
d	Lobbying	5,712. 7,181.							
е	Professional fundraising services See Part IV, line 17								
f	Investment management fees	1,554.	, , , , , , , , , , , , , , , , , , , ,						
g	Other								
12	Advertising and promotion	5,704.			,				
13	Office expenses	36,584.							
14	Information technology								
15	Royalties								
16	Occupancy	3,929.							
17	Travel	327.							
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	89,961.							
20	Interest .								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	7,891.							
23	Insurance	2,727.							
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line								
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)								
a		<u> </u>							
b									
C			<u> </u>						
ď	All address and a second								
e 05	All other expenses	246,595.							
25	Total functional expenses. Add lines 1 through 24e	240,333.							
26	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 If following SOP 98-2 (ASC 958-720)			<u> </u>					

Part X Balance Sheet (A) (B) Beginning of year End of year 17,540. 16,300. 1 Cash - non-interest-bearing 69,533. 70,358. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 274. Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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) Assets Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 326,214 basis. Complete Part VI of Schedule D 10a 71,253 262,850. 10b 254,961. b Less: accumulated depreciation 317,148. 282,353. 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 50,900. 44,500. 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 717,971. 668,746. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 -3,604.733. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 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 25 -3,604733. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here X and complete lines 30 through 34. 0. 30 Capital stock or trust principal, or current funds 0. 31 31 Paid in or capital surplus, or land, building, or equipment fund 721,575. 668,013. 32 Retained earnings, endowment, accumulated income, or other funds 721,575. 668,013. 33 Total net assets or fund balances 717,971. 668,746. Total liabilities and net assets/fund balances

Form 990 (2011)

orm	990 (2011) ASSOCIATION, INC.	56	-0521364	Pa	ige 12
Par	rt XI 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) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6				34.
2	Total expenses (must equal Part IX, column (A), line 25)	2			95.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2	4,4	61.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				75.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2	9,1	01.
6	6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))				
Pai	t XII 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: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X]
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audr	t, 🗀		
	review, or compilation of its financial statements and selection of an independent accountant?		. 2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule (o. —		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ıgle Aı	udit		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red au	ıdıt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3ь		

Form **990** (2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• (Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
		AS ELECTRICAL CO	NTRACTORS	E	mployer identification number
	ASSOCIA	TION, INC.			56-0521364
Pa	rt I-A Complete if the org	ganization is exempt und	ler section 501(c) or is a section 52	7 organization.
2 3	Provide a description of the organize Political expenditures Volunteer hours)	*
		<u>ganization is exempt unc</u>		· · · · · · · · · · · · · · · · · · ·	
	Enter the amount of any excise tax	• •			> \$
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	. • • • • • • • • • • • • • • • • • • •	> \$
	If the organization incurred a section	on 4955 tax, did it file Form 4720	for this year?		☐ Yes ☐ No
	Was a correction made?				Yes No
	If "Yes," describe in Part IV.			\	244 1/01
1 2 3 4 5	Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and er made payments. For each organization tributions received that were problitical action committee (PAC). If	s. Add lines 1 and 2. Enter here at 1120-POL for this year? Imployer identification number (Elation listed, enter the amount par omptly and directly delivered to	ction 527 exempt fundher organizations for stand on Form 1120-PO N) of all section 527 pd from the filing organia separate political organia.	ction activities section 527 L, bolitical organizations to wization's funds. Also enterganization, such as a sep	S Yes No Which the filing organization or the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid froi filing organization's funds. If none, enter	contributions received and

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011					56-	0521364 Page 2				
Part II-A Complete if the org	ganization	is exe	mpt under sectio	on 501(c)(3) and fil	ed Form 5768					
(election under sec	ction 501(h)).								
A Check 🕨 🔲 if the filing organiza	ation belongs t	to an affi	liated group (and list ii	n Part IV each affiliated	group member's nar	me, address, EIN,				
expenses, and sha	are of excess k	obbying	expenditures).							
B Check 🕨 🔲 if the filing organiza	ation checked	box A a	nd "limited control" pre	ovisions apply.						
	its on Lobbyii ditures" mea		nditures ınts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals				
1 a Total lobbying expenditures to infl	luence public	opinion (arass roots lobbying)							
b Total lobbying expenditures to infl				•		<u> </u>				
, ,	T . 11 . 1									
d Other exempt purpose expenditur		-, .	• • •							
e Total exempt purpose expenditure		c and 1d	 1)							
f Lobbying nontaxable amount. Ent	· ·		•	th columns						
If the amount on line 1e, column (a)			bying nontaxable am			*				
Not over \$500,000	-		the amount on line 1e							
Over \$500,000 but not over \$1,00	0.000		0 plus 15% of the exc							
Over \$1,000,000 but not over \$1,5			00 plus 10% of the exc							
Over \$1,500,000 but not over \$17	ess over \$1,500,000.									
Over \$17,000,000	,,,,,,,,,,,	<u></u>								
	L	\$1,000,								
g Grassroots nontaxable amount (er	nter 25% of lin	ne 1f)			<u> </u>					
h Subtract line 1g from line 1a. If zer		•		•						
i Subtract line 1f from line 1c. If zero	•									
j If there is an amount other than ze	· ·		 line 1i, did the organiz	ation file Form 4720		<u> </u>				
reporting section 4911 tax for this			,			Yes No				
<u> </u>		Year Ave	eraging Period Under	Section 501(h)		105				
	zations that n	nade a s	ection 501(h) election e instructions for line	n do not have to comp es 2a through 2f on pa						
	Lobbyin	g Exper	nditures During 4-Yea	ar Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 200	8	(b) 2009	(c) 2010	(d) 2011	(e) Total				
2a Lobbying nontaxable amount										
b Lobbying ceiling amount	·									
(150% of line 2a, column(e))		.,								
c Total lobbying expenditures										
d Grassroots nontaxable amount						ļ				
e Grassroots celling amount										
(150% of line 2d, column (e))					······································					
	!					1				

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

56-0521364 Page 3

Schedule C (Form 990 or 990-EZ) 2011 ASSOCIATION, INC. 56-052136

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

of the lobbyin	s" response to lines 1a through 1ı below, provide in Part IV a detailed description	(a)		(b)		
	g activity.	Yes	No	Amo	ount	
1 During	the year, did the filing organization attempt to influence foreign, national, state or	11-0				
	gislation, including any attempt to influence public opinion on a legislative matter					
	endum, through the use of:					
a Volunte						
b Paid sta	aff or management (include compensation in expenses reported on lines 1c through 1)?			1		
c Media a	advertisements?					
d Mailing:	s to members, legislators, or the public?			-		
e Publica	tions, or published or broadcast statements?				_	
f Grants	to other organizations for lobbying purposes?				-	
g Direct o	contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies,	demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	ctivities?			-		
j Total. A	add lines 1c through 1i					
2a Did the	activities in line 1 cause the organization to be not described in section 501(c)(3)?				~^ 	
	enter the amount of any tax incurred under section 4912			, ,,		
	enter the amount of any tax incurred by organization managers under section 4912					
	ing organization incurred a section 4912 tax, did it file Form 4720 for this year?			, ,,,,,,		
Part III-A		n 501(c)	(5), or se	ction		
	501(c)(6).					
· · · · · ·					No	
				Yes	No	
	ubstantially all (90% or more) dues received nondeductible by members?		1	Yes	X	
1 Were s			1 2	Yes		
1 Were si2 Did the3 Did the	ubstantially all (90% or more) dues received nondeductible by members?		2 3 (5), or se	ction	X X X	
1 Were so 2 Did the 3 Did the Part III-B	ubstantially all (90% or more) dues received nondeductible by members? organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		2 3 (5), or se (b) Part	ction III-A, lin	X X X e 3, is	
1 Were si 2 Did the 3 Did the Part III-B	ubstantially all (90% or more) dues received nondeductible by members? organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." assessments and similar amounts from members	"No" OF	2 3 (5), or se	ction III-A, lin	X X X e 3, is	
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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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

2011
Open to Public Inspection

Name of the organization

CAROLINAS ELECTRICAL CONTRACTORS ASSOCIATION, INC.

Employer identification number 56-0521364

Pai	Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
	· · · · · · · · · · · · · · · · · · ·	(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 donor advised ful	nds
_	are the organization's property, subject to the organization's	_	☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor		only
•	for charitable purposes and not for the benefit of the donor		-
	Impermissible private benefit?		Yes No
Pa		ganization answered "Yes" to Form 990, Part IV	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or	, , , , , , , , , , , , , , , , , , , ,	lly important land area
	Protection of natural habitat	Preservation of a certified h	istoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form of a c	onservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	nization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements during t	the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the year	ear ▶ \$
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4)(l	B)(i)
	and section 170(h)(4)(B)(ii)?		L Yes No
9	In Part XIV, describe how the organization reports conservation	tion easements in its revenue and expense state	ment, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes the or	ganization's accounting for
	conservation easements.		
Pa	Organizations Maintaining Collections of		Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statement a	nd balance sheet works of art,
	historical treasures, or other similar assets held for public ex		public service, provide, in Part XIV,
	the text of the footnote to its financial statements that described		
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of public se	rvice, provide the following amounts
	relating to these items:		
	(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 art, historical tre		provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		▶ \$

56-0521364 Page 2 ASSOCIATION, INC. Schedule D (Form 990) 2011 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs а Scholarly research ь ☐ Preservation for future generations c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes **b** If "Yes," explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 1c Additions during the year . 1d Distributions during the year 1e Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses f End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment ▶ The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (b) Cost or other (a) Cost or other (c) Accumulated (d) Book value basis (investment) basis (other) depreciation 1a Land 277,902. 60,701 217,201. **b** Buildings Leasehold improvements 7,620. 1,664. d Equipment . 8,888. 40,692. e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2011

254,961.

ASSOCIATION, INC. 56-0521364 Page **3**

Part VII	Investments - Other Securities. Se	e Form 990, Part X, line 12			
(6	a) Description of security or category (including name of security)	(b) Book value	C	(c) Method of value ost or end-of-year man	
(1) Financia	al derivatives				
(2) Closely	-held equity interests				
(3) Other		_			
(A)					
(B)					
(C)					
(D)					
(E)			_		
(F)					
(G)				<u>.</u>	
(H)					
(l)					
	o) must equal Form 990, Part X, col (B) line 12)				
Part VIII	Investments - Program Related. Se	ee Form 990, Part X, line 1	3		····
	(a) Description of investment type	(b) Book value	Co	(c) Method of valua ost or end-of-year man	
(1) PR	ROGRAM INVESTMENT ABC	44,500.	COST		
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)		!			·
(10)					
	o) must equal Form 990, Part X, col (B) line 13)	44,500.			·····
Part IX	Other Assets. See Form 990, Part X, line			<u></u>	
	(a)	Description			(b) Book value
(1)					
(2)					
(3)					
(4)			= =		
(5)					
(6)					
(7)					
(8)			· · · · · · · · · · · · · · · · · · ·		
(9)					
(10)					
	mm (b) must equal Form 990, Part X, col (B) line		· · · · · · · · · · · · · · · · · · ·	>	
Part X	Other Liabilities. See Form 990, Part X,		D l l		
1.	(a) Description of liability		(b) Book value	-	
	deral income taxes				
(2)				-	
(3)				-	
(4)				-	
(5)				-	
(6)					
(7)					
(8)				-	
(9)					
(10)					
(11)					
Total. (Colu	Imn (b) must equal Form 990, Part X, col (B) line SC 740) Footnote In Part XIV, provide the text of the footnote to SC 740)	the omanization's financial statem	ents that reports the owner	ization's liability for uncode	n tay positions under
2. FIN 48 (AS	SC 740)	organization a manual statem	and reports the organ	s nability for uncertai	and positions under

Schedule D (Form 990) 2011

CAROLINAS ELECTRICAL CONTRACTORS 56-0521364 Page 4 ASSOCIATION, INC. Schedule D (Form 990) 2011 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 222,134. Total revenue (Form 990, Part VIII, column (A), line 12) 246,595. 2 Total expenses (Form 990, Part IX, column (A), line 25) 2 -24,461.3 Excess or (deficit) for the year. Subtract line 2 from line 1 Net unrealized gains (losses) on investments 4 5 Donated services and use of facilities 6 Investment expenses 6 -29,101.7 Prior period adjustments 7 8 Other (Describe in Part XIV.) 8 -29,101.9 Total adjustments (net). Add lines 4 through 8 -53,562. Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 235,615. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments Donated services and use of facilities 2b Recoveries of prior year grants 2c Other (Describe in Part XIV.) 2d Add lines 2a through 2d 2e 235,615. 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b -13,481Other (Describe in Part XIV.) c Add lines 4a and 4b -13,481.222,134. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 260,076. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c 13,481 d Other (Describe in Part XIV.) e Add lines 2a through 2d 13,481. 2e Subtract line 2e from line 1 246,595. 3 3 Amounts 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 **b** Other (Describe in Part XIV.) 4b c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 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, line 2; 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.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENTS -13,481.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS 13,481.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Inspection

Name of the organization CAROLINAS ELECTRICAL CONTRACTORS **Employer identification number** ASSOCIATION, INC. 56-0521364 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants c Phone solicitations Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col. (i) Yes No

Tot	al >
3	List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

56-0521364 Page 2 Schedule G (Form 990 or 990-EZ) 2011 ASSOCIATION, INC. Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (b) Event #2 (c) Other events (a) Event #1 (d) Total events FALL AND NONE (add col. (a) through SPRING GOLF col. (c)) (event type) (event type) (total number) Revenue 27,880. 27,880. Gross receipts 2 Less: Charitable contributions 27,880. 27,880. 3 Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses 6 Rent/facility costs Food and beverages 8 Entertainment 13,481. Other direct expenses 13,481. 13,481 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Combine line 3, column (d), and line 10 14,399 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? Yes **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _ Yes b If "Yes," explain: _

CAROLINAS ELECTRICAL CONTRACTORS Schedule G (Form 990 or 990 EZ) 2011 ASSOCIATION, INC. 56-0521364 Page 3 Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed Yes 13 Indicate the percentage of gaming activity operated in: a The organization's facility 13a **b** An outside facility 13b 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Yes No 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party > \$ c if "Yes," enter name and address of the third party: Gaming manager information: Gaming manager compensation ▶ \$ Description of services provided Director/officer Employee Independent contractor 17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Schedule I (Form 990) (2011) **%** ⊠ **Employer identification number** 56-0521364 OMB No 1545-0047 Open to Public Inspection (h) Purpose of grant or assistance _____ ✓ GENERAL SUPPORT Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ame and address of organization (b) EIN (c) IRC section or government (c) IRC section if applicable cash grant assistance or government (c) IRC section if applicable cash grant assistance other) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, °. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. 000 9 Enter total number of section 501 (c)(3) and government organizations listed in the line 1 table CAROLINAS ELECTRICAL CONTRACTORS For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) Enter total number of other organizations listed in the line 1 table INC. 56-2115921 General Information on Grants and Assistance criteria used to award the grants or assistance? ASSOCIATION, 1 (a) Name and address of organization OF THE CAROLINAS - 9715 NORTHEAST CONSTRUCTION EDUCATION FOUNDATION PARKWAY - MATTHEWS, NC 28105 Name of the organization Department of the Treasury Internal Revenue Service SCHEDULEI (Form 990) Part 1 Part #

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ASSOCIATION, INC.

Schedule I (Form 990) (2011) ASSOCIATION, INC.

Part iii Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part iii Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

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Page 2

56-0521364

SCHEDULE O (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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

Name of the organization

CAROLINAS ELECTRICAL CONTRACTORS ASSOCIATION, INC.

Employer identification number 56-0521364

FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERSHIP OF THE ASSOCIATION

SHALL CONSIST OF FIVE CLASSES: CONTRACTOR, ASSOCIATE, INDUSTRY

PROFESSIONAL, LIFE, AND HONOR ROLL.

FORM 990, PART VI, SECTION A, LINE 7A: DIRECTORS AT LARGE: NOT LATER THAN OCTOBER FIRST OF THE APPROPRIATE YEAR, THE EXECUTIVE DIRECTOR SHALL MAIL A LIST OF MEMBERS IN GOOD STANDING ALONG WITH PROPERLY PREPARED BALLOTS FOR NOMINATIONS TO THE BOARD OF DIRECTORS BY THE MEMBERS. THE MEMBERS SHALL NOMIATE SIX MEMBERS FROM A LIST OF THOSE IN GOOD STANDING TO SERVE AS DIRECTORS AT LARGE. NOMINATION BALLOTS SHALL BE RETURNED TO THE EXECUTIVE DIRECTOR BEARING A POSTMARK OF NOT LATER THAN OCTOBER 15TH. THE BALLOTS SHALL BE OPENED AND COUNTED ONLY IN THE PRESENCE OF THE TELLERS COMMITTEE. THE PERSONS RECEIVING THE MAJORITY SHALL BE DECLARED THE NOMINEES. OF A TIE VOTE, THE TELLERS COMMITTEE SHALL VOTE TO BREAK THE TIE. WHEN CANDIDATES OF DIRECTORS AT LARGE ARE DECLARED NOMINATED, A PROPERLY PREPARED BALLOT SHALL BE SENT OUT BY THE EXECUTIVE DIRECTOR. EACH MEMBER SHALL VOTE FOR THREE OF THE NOMINEES FOR THE DIRECTORS AT LARGE. THE BALLOTS SHALLED BE MAILED BACK TO THE ASSOCIATION OFFICE BEARING A POSTMARK OF NOT LATER THAN NOVEMBER 15TH. THE TELLERS COMMITTEE SHALL MEET AND CANVASS THE BALLOTS BY DECEMBER 1ST ACCOUNCING THE RESULTS TO THE MEMBERS NOT LATER THAN DECEMBER 15TH. THE BALLOTS SHALL BE OPENED AND COUNTED ONLY IN THE PRESENCE OF THE TELLERS COMMITTEE. THE PERSONS RECEIVING THE MAJORITY SHALL BE DECLARED THE DIRECTORS AT LARGE. IN CASE OF A TIE VOTE, THE TELLERS COMMITTEE SHALL VOTE TO BREAK THE TIE. DIRECTORS AT LARGE SERVE FOR A TERM OF THREE YEARS. THE TERM OF OFFICE OF THE NEW BOARD MEMBERS

SHALL BEGIN THE FOLLOWING JANUARY 1ST.

OMB No 1545-0047 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. Related Organizations and Unrelated Partnerships CAROLINAS ELECTRICAL CONTRACTORS ASSOCIATION, INC. Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

2011 Open to Public Inspection

Employer identification number 56-0521364

> Identification of Disregarded Entities (Complete If the organization answered "Yes" to Form 990, Part IV, line 33.) Part

	(a) Name, address, and EIN of discorded entity	(b) Primary activity	(c) Legal domicile (state or	(d) Total income	(e) End-of-year assets	(f) Direct controlling
	(100 ppp pp pp pp pp pp pp pp pp pp pp pp		Toreign country)			duny.
					-	
Part II	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	ons (Complete if the organization ans	wered "Yes" to Form 990, Par	IV, line 34 because	It had one or more re	elated tax-exempt

(a)	(q)	(2)	9	(e)	9	(6)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direct controlling entity	Section 512(b)(13) controlled entity?	2(b)(13) led <i> </i> 7
				501(c)(3))		Yes	2
CONSTRUCTION EDUCATION FOUNDATION OF THE					CAROLINA		
CAROLINAS, INC 56-2115921, 9715 NORTHEAST PROVIDE EDUCATIONAL AND	PROVIDE EDUCATIONAL AND				ELECTRICAL		
PARKWAY, MATTHEWS, NC 28105	TRAINING OPPORTUNITIES	NORTH CAROLINA	501(C)(3)		CONTRACTORS	×	
	1						
	1	-					
						_	

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

Schedule R (Form 990) 2011

132161 01-23-12 LHA

SEE PART VII FOR CONTINUATIONS

ASSOCIATION, INC.

Schedule R (Form 990) 2011

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

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U) (K) General or Percentage managing ownership partner? Yes No			re related	(h) Percentage ownership			Schedule R (Form 990) 2011
General or managing partner?			е ог до	1			R (Forn
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			ecause it had on	(g) Share of end-of-year assets			Schedule
(n) Disproportionate allocations?			1V, line 34 be	(f) Share of total Income			
Share of end-of-year assets			to Form 990, Parl	(e) Type of entity (C corp, S corp, or trust)			
Share of total income			on answered "Yes"	(d) Direct controlling entity			
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)			lete if the organization	(c) Legal domicile (state or foreign country)			
(a) Direct controlling entity ex			oration or Trust (Comp	(b) Primary activity			
(C) Legal domicile (state or foreign country)			is a Corpo				
(b) Primary activity			lanizations Taxable a	Z a			
(a) Name, address, and EIN of related organization			Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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			2 01-23-12

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CAROLINAS ELECTRICAL CONTRACTORS Schedule R (Form 990) 2011 ASSOCIATION, INC.

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	8 N
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ctions with one or more r	elated organizations listed	In Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	tity			1a		×
b Gift, grant, or capital contribution to related organization(s)				16	×	
c Gift, grant, or capital contribution from related organization(s)				-	•	×
d Loans or loan guarantees to or for related organization(s)				19		×
e Loans or loan guarantees by related organization(s)				-		×
						;
† Sale of assets to related organization(s)				=	ŀ	ĸ
g Purchase of assets from related organization(s)				19		×
h Exchange of assets with related organization(s)				£		×
i Lease of facilities, equipment, or other assets to related organization(s)				=		×
i lease of facilities, equipment, or other assets from related organization(s)				Ŧ		×
k Performance of services or membership or fundraising solicitations for related	related organization(s)			7	×	
Performance of services or membership or fundraising solicitations by	related organization(s)			=	:	×
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	nization(s)			Ę	×	
n Sharing of paid employees with related organization(s)				-L	×	
						>
				၉		< :
p Keimbursement paid by related organization(s) for expenses				1		×
 q Other transfer of cash or property to related organization(s) 				5		×
r Other transfer of cash or property from related organization(s)				11.		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	on who must complete t	his line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
CONSTRUCTION EDUCATION FOUNDATION OF THE (1) CAROLINAS, INC.	В	6,000.CASH	CASH			
(2)						
(3)						
(4)						
(5)				:		
(9)						
132163 01-23-12			Schedule R (Form 990) 2011	R (Form	666	2011

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CAROLINAS ELECTRICAL CONTRACTORS

ASSOCIATION, INC. Schedule R (Form 990) 2011 Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

Disproporation | Code V-UBI | General or Percentage bonate amount in box 20 managing ownership of Schedule K-1 partner/ ownership Yes No (Form 1065) Yes No 孚 \equiv end-of-year Share of assets (f) Share of total income Predominant income parties sec (related, unrelated, ons?) excluded from tax under section 512-514) Yes No (e)
Are all
partners sec
501(c)(3)
orgs? (state or foreign Legal domicile country) Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2011

CAROLINAS ELECTRICAL CONTRACT	
Schedule R (Form 990) 2011 ASSOCIATION, INC.	56-0521364 Page 5
Part VII Supplemental Information Complete this part to provide additional information for responses to questions on S	obodulo D (occupatorations)
Complete this part to provide additional mormation for responses to questions of S	chedule in (see instructions).
PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORC	GANIZATIONS:
NAME OF RELATED ORGANIZATION:	
CONSTRUCTION EDUCATION FOUNDATION OF THE CAROLINA	AS, INC.
DIRECT CONTROLLING ENTITY: CAROLINA ELECTRICAL CO	ONTRACTORS ASSOCIATION,
INC.	
	5500
	1.00
The state of the s	