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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2011Department of the Treasury
Internal Revenue Service

- Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)**
- Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
- The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection**A For the 2011 calendar year, or tax year beginning****, 2011, and ending****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C
 PEE DEE ELECTRIC TRUST
 P. O. BOX 491
 DARLINGTON, SC 29532

D Employer identification number

57-0966373

E Telephone number

843-665-4070

F Group Exemption Number**G** Accounting Method ☐ Cash ☒ Accrual Other (specify) ►**I** Website: ► N/A**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**J** Tax-exempt status (ck only one) — ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ► \$ 121,525.**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I.)Check if the organization used Schedule O to respond to any question in this Part I ☒

REVENUE	1	Contributions, gifts, grants, and similar amounts received	1	121,519.
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	6.
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	6b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
6c	Less direct expenses from gaming and fundraising events	6c		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	121,525.	
EXPENSES	10	Grants and similar amounts paid (list in Schedule O)	10	121,771.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe in Schedule O)	16	284.
	17	Total expenses. Add lines 10 through 16	17	122,055.
ASSETS	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-530.
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	116,412.
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	115,882.

BAA For Paperwork Reduction Act Notice, see the separate instructions.Form **990-EZ** (2011)

P 15

Part II	Balance Sheets. (see the instructions for Part II.)
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Check if the organization used Schedule O to respond to any question in this Part II

☒

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	106,239.	22 105,747.
23	Land and buildings		23
24	Other assets (describe in Schedule O) See Schedule O	10,173.	24 10,135.
25	Total assets	116,412.	25 115,882.
26	Total liabilities (describe in Schedule O)	0.	26 0.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	116,412.	27 115,882.

Part III	Statement of Program Service Accomplishments (see the instrs for Part III.)
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Check if the organization used Schedule O to respond to any question in this Part III

☒

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose? See Schedule O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28	TO ACCUMULATE AND DISBURSE FUNDS FOR CHARITABLE PURPOSES IN THE SERVICE AREA OF PEE DEE ELECTRIC COOPERATIVE.		
	(Grants \$ 121,771.) If this amount includes foreign grants, check here	☐	28 a 122,055.
29			
	(Grants \$) If this amount includes foreign grants, check here	☐	29 a
30			
	(Grants \$) If this amount includes foreign grants, check here	☐	30 a
31	Other program services (describe in Schedule O)		
	(Grants \$) If this amount includes foreign grants, check here	☐	31 a
32	Total program service expenses (add lines 28a through 31a)	☐	32 122,055.

Part IV	List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)	52	122,000
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Check if the organization used Schedule O to respond to any question in this Part IV

X

[illegible]

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in **SEE SCHEDULE O** the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☒

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
35b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O		
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.		
37b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
38b If 'Yes,' complete Schedule L, Part II and enter the total amount involved		N/A
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9		N/A
b Gross receipts, included on line 9, for public use of club facilities		N/A
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 0. , section 4912 0. , section 4955 0.		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I		X
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 0.		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T		X
41 List the states with which a copy of this return is filed SC		

42a The organization's books are in care of **DEBBIE OSTERBERG** Telephone no **843-292-4355**
 Located at **P.O. BOX 491 DARLINGTON SC** ZIP + 4 **29532**

	Yes	No
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country. SC		X
42c See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country. SC		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ☐ N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year **43** N/A

	Yes	No
44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
44b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
44c Did the organization receive any payments for indoor tanning services during the year?		X
44d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		
45a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?		X
45b 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,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

47 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

	Yes	No
47		X

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

	Yes	No
48		X

49a Did the organization make any transfers to an exempt non-charitable related organization?

	Yes	No
49a		X

b If 'Yes,' was the related organization a section 527 organization?

	Yes	No
49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

e Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

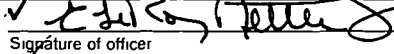
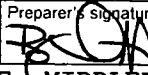
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

e Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

☒ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer 	Date April 16, 2012			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name BRYAN A ISGETT	Preparer's Signature 	Date APR 11 2012	Check ☐ if self-employed	PTIN P01441928
	Firm's name ▶ MCNAIR, MCLEMORE, MIDDLEBROOKS				
	Firm's address ▶ POST OFFICE BOX ONE MACON, GA 31202-0001				
		Firm's EIN ▶ 58-1094351	Phone no (478) 746-6277		

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2011**Open to Public
Inspection**

Name of the organization

PEE DEE ELECTRIC TRUST

Employer identification number

57-0966373

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III – Functionally integrated d ☐ Type III – Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
- g ☐ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants'.)	116,377.	124,645.	109,374.	120,287.	121,519.	592,202.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3	116,377.	124,645.	109,374.	120,287.	121,519.	592,202.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6 Public support. Subtract line 5 from line 4						592,202.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	116,377.	124,645.	109,374.	120,287.	121,519.	592,202.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,195.	4,356.	4,546.	332.	284.	13,713.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10						605,915.
12 Gross receipts from related activities, etc (see instructions)					12	0.

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	97.74 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	97.20 %

16a 33-1/3% support test – 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒**b 33-1/3% support test – 2010.** If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐**17a 10%-facts-and-circumstances test – 2011.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ ☐**b 10%-facts-and-circumstances test – 2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ ☐**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

BAA

Schedule A (Form 990 or 990-EZ) 2011

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17.	18	%

19a 33-1/3% support tests – 2011. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶ ☐**b 33-1/3% support tests – 2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ▶ ☐**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ ☐

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

[illegible]

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

PEE DEE ELECTRIC TRUST

Employer identification number

57-0966373

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

CHARITABLE COMMUNITY DEVELOPMENT

Form 990-EZ, Part V - Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or
indirectly, to pay premiums on a personal benefit contract? No

(b) Did the organization, during the year, pay premiums, directly or
indirectly, on a personal benefit contract? No

Client 6708400

PEE DEE ELECTRIC TRUST

57-0966373

4/10/12

10 58AM

Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid In Excess of \$5,000

Donee's Name: SEE ATTACHED
 Cash Amount Given: \$ 121,771.

Form 990-EZ, Part I, Line 16
Other Expenses

MISCELLANEOUS
 Total \$ 284.
 \$ 284.

Form 990-EZ, Part II, Line 24
Other Assets

	Beginning	Ending
Accounts Receivable	\$ 10,173.	\$ 10,135.
Total	\$ 10,173.	\$ 10,135.

Form 990-EZ, Part IV
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compensation	Health Benefits & Contrib- ution to EBP & DC	Expense Account & Other Allowances
Warren Jeffords 1355 East McIver Rd. Darlington, SC 29540	Vice-Chairman 2	\$ 0.	\$ 0.	\$ 0.
Jim Huggins 1355 East McIver Rd. Darlington, SC 29540	Trustee 2	0.	0.	0.
Paul Seward 1355 East McIver Rd. Darlington, SC 29540	Trustee 2	0.	0.	0.
Andrea McGill 1355 East McIver Rd. Darlington, SC 29540	Secretary 2	0.	0.	0.
Carolyn Cain 1355 East McIver Rd. Darlington, SC 29540	Trustee 2	0.	0.	0.

Client 6708400

PEE DEE ELECTRIC TRUST

57-0966373

4/10/12

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Form 990-EZ, Part IV (continued)

List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compensation	Health Benefits & Contrib- ution to EBP & DC	Expense Account & Other Allowances
Elaine Atkinson 1355 East McIver Rd. Darlington, SC 29540	Trustee 2	\$ 0.	\$ 0.	\$ 0.
Johnny Quick 1355 East McIver Rd. Darlington, SC 29540	Trustee 2	0.	0.	0.
Nicki Spears 1355 East McIver Rd. Darlington, SC 29540	Trustee 2	0.	0.	0.
Tommy Stephens 1355 East McIver Rd. Darlington, SC 29540	Treasurer 2	0.	0.	0.
Luanne Nobles 1355 East McIver Rd. Darlington, SC 29540	Trustee 2	0.	0.	0.
Elsie Byrd 1355 East McIver Rd. Darlington, SC 29540	Chairman 2	0.	0.	0.
	Total	\$ 0.	\$ 0.	\$ 0.

PEE DEE ELECTRIC TRUST

**Pg. 1 Part I-Line 10-SCHEDULE OF FAMILY AND INDIVIDUAL ASSISTANCE
FOR THE YEAR ENDED DECEMBER 31, 2011**

Addie Gainey	\$ 222
Alan Dalrymple	207
Alfrieda Black	650
Alice Bethea	450
Alison Wilde	291
Alma Jean Blakney	92
Alva Williamson	204
Alvin Griggs	600
Amanda Hoffman	709
Amanda Purnell	767
Angerlyn Funderburk	300
Anna Bess	524
Anna Brisk	300
Annie Blanton	200
Annie Hamby	900
Ashley Collins	150
Ashley Jones	1,008
Barbara Moser	165
Belva Gilbert	588
Bennie Boston	1,500
Berneta Thomas	285
Bertha Cuffie	626
Betty Jean Williamson	445
Betty Jenkins	128
Betty Jernigan	175
Betty Smith	578
Beulah Jackson	900
Billy Watson	641
Blackmon Lot	125
Brenda Cowan	500
Brenda Rowell	630
Carol Pringle	396
Carolyn Dias	650
Carolyn Sanders	235
Chameka Benjamin	917
Charles Bennett	538
Charles Walters	1,200
Cheryl Isgett	609
Clara Johnson	513
Balance-Carried Forward	\$ 19,918

PEE DEE ELECTRIC TRUST
Pg. 1 Part I-Line 10-SCHEDULE OF FAMILY AND INDIVIDUAL ASSISTANCE
FOR THE YEAR ENDED DECEMBER 31, 2011

Balance-Brought Forward	\$ 19,918
Clarence Tiller	592
Clifton Fulwood	200
Clyde Monahan	941
Cynthia Hawkins	500
Dana Staggs	400
Danielle Gibson	502
Danny Crowley	351
Danton Mceachern	1,137
David Kirven	250
Dawn Campbell	492
Deborah Sims	300
Denise Conyers	253
Dennis Rawls	930
Dianne Serhus	944
Eleanor Sellers	400
Ernestine Russell	846
Ernestine Worrell	157
Eva Commedo	685
George Massey	560
Gladys Timmons	300
Glarita Smith	1,462
Helen Perdue	665
Herbert Campbell	189
Hester Small	570
Horace Boan	1,227
Howard Wright	747
Hoyt Perkins	334
James Anderson	870
James Bacote	1,091
James Hostetler	1,148
Jan Joye	400
Jeanette Mcphail	673
Jeanette Nolan	530
Jeanne Blackmon	300
Jenetta Tart	549
Jerry Floyd	750
Jerry Vann	617
Balance-Carried Forward	\$ 42,780

PEE DEE ELECTRIC TRUST
Pg. 1 Part I-Line 10-SCHEDULE OF FAMILY AND INDIVIDUAL ASSISTANCE
FOR THE YEAR ENDED DECEMBER 31, 2011

Balance-Brought Forward	\$ 42,780
Joan Williams	200
John Stokley	800
Joquan Lowery	1,026
Josephine Simmons	198
Judy Covington	1,231
Judy Powell	272
Jules Jackson	1,136
Julius Harkless	164
Kenneth Scott	1,500
Kimberly Hayes	953
Leanna Blueford	350
Leshia Mckinnon	1,500
Levan Evans	340
Linda Harper	354
Lisa Berry	300
Lisa Montgomery	700
Lisa Seabrook	1,000
Lorraine Alston	802
Louise Williams	230
Lucius Dykes	824
Lucy Eddy	400
Lula Mae Ware	911
Lydia Perkins	163
Mae Cooper	284
Mae Knight	409
Major Fleming	378
Mamie Poston	343
Marcia Wilson	236
Marcus Mclellan	896
Margaret Swinton	171
Marquita Benton	500
Marsha Mcfarland	599
Mary Jane Parks	400
Mary Mcdaniel	368
Mattie Rogers	796
Melinda James	589
Balance-Carried Forward	\$ 64,103

PEE DEE ELECTRIC TRUST

**Pg. 1 Part I-Line 10-SCHEDULE OF FAMILY AND INDIVIDUAL ASSISTANCE
FOR THE YEAR ENDED DECEMBER 31, 2011**

Balance-Brought Forward	\$ 64,103
Melissa Baird	246
Michael Turbeville	900
Micheal Paige	350
Michelle Hamilton	500
Miller Livingston	1,408
Mona Mciver	350
Olivia Bostick	230
Patricia Campbell	815
Peggy Graham	200
Peggy Windley	720
Preston Davis	707
Ralph Simmons	200
Randy Brewer	450
Ray Jefferson	900
Renee Ceaser	331
Richard George	1,070
Robert Lane	1,418
Robin McCluney	246
Rosa Alford	393
Rose Brooks	800
Ruby Garner	381
Ruby Jackson	162
Ruby Mcarthur	750
Russell Hough	717
Russell Martin	940
Ruth Williams	347
Sabrina Peterson	776
Sandra Grier	790
Setoria Mccoy	972
Shane Lewis	200
Shaneek Evans	187
Shannon Lattymer	400
Shante Upshur	156
Sharon Andrews	46
Sharon Jackson	879
Shaun Mattox	900
Balance-Carried Forward	<u>\$ 84,940</u>

PEE DEE ELECTRIC TRUST
Pg. 1 Part I-Line 10-SCHEDULE OF FAMILY AND INDIVIDUAL ASSISTANCE
FOR THE YEAR ENDED DECEMBER 31, 2011

Balance-Brought Forward	\$ 84,940
Shelia Jackson	570
Sherry McBride	550
Sheryl Perkins	534
Stacie Knotts	909
Sylvia Williams	345
Tammie Lovette	225
Tania Springs	400
Tasha Gibson	160
Tawanda Joint	290
Teresa Price	500
Tony Johnson	1,500
Tornique March	100
Tracy O'Neal	1,107
Tyisha Lloyd	440
Tyrone Sansburg	665
Velva Powell	188
Veronica Rushing	105
Vickie Broughton	1,236
Victor Hays	665
Vivian Brown	229
Walter Mcknight	1,500
Wayne Evans	1,500
Willie Lee Mack	483
Yvonne Campbell	278
Zareadi Simon	150
	\$ 99,569

PEE DEE ELECTRIC TRUST
Pg. 1 Part I-Line 10-SCHEDULE OF COMMUNITY ASSISTANCE
FOR THE YEAR ENDED DECEMBER 31, 2011

American Red Cross-Pee Dee Chapter	\$ 1,000
Camp Rae	1,520
CareFIRST Carolina Foundation	1,682
Florence County Disabilities Foundation	1,500
Habitat for Humanity	1,500
Harvest Hope Food Bank	1,500
Marion Rural Fire Department	1,000
Mercy Medicine Clinic	1,000
Rebuilding Together	1,500
Santahatchie-Florence Camp	1,000
The Care House of Pee Dee	1,000
The Lord Cares	1,000
Toys for Tots	7,000
	\$ 22,202