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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)

OMB No 1545-0047

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

Open to Public Inspection

A F	or the	2011 calendar year, or tax year beginning $JUL\ 1$, 2011 and	ending J	JUN 30, 2012				
Вс	heck if pplicable	C Name of organization TENNESSEE ELECTRIC		D Employer identific	ation number			
	Addres change	COOPERATIVE ASSOCIATION						
	Name change	Doing Business As	_	62-04	161397			
	Initial return Termin- ated	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Room/suite	E Telephone number (615)	367-9284			
$\overline{}$	Amend			G Gross receipts \$	5,279,418.			
一	Applica			H(a) Is this a group ref	turn			
	pending			for affiliates? Yes X No				
		SAME AS C ABOVE		H(b) Are all affiliates incli				
1 1	ax-exe	mpt status:	or 527	7	ist. (see instructions)			
		TNELECTRIC.ORG		H(c) Group exemption	•			
		organization X Corporation Trust Association Other	L Year		State of legal domicile TN			
		Summary						
		Briefly describe the organization's mission or most significant activities: ${ m TO}$ PI	ROVIDE	INFORMATION	ī,			
Activities & Governance		SERVICES, AND SUPPORT TO THE INTERESTS OF	F RURA	L ELECTRIC				
Ē	i -	Check this box If the organization discontinued its operations or dispose	sed of more	e than 25% of its net ass	sets.			
ove.	1	Number of voting members of the governing body (Part VI, line 1a)		3	12			
Ğ	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	12			
Se	i	otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	14			
Ę	1	otal number of volunteers (estimate if necessary)		6	0			
Ę	l	otal unrelated business revenue from Part VIII, column (C), line 12		7a	620,696.			
•	ы	Net unrelated business taxable income from Form 990-T, line 34		7b	0.			
				Prior Year	Current Year			
o	8 (Contributions and grants (Part VIII, line 1h)		23,200.	28,200.			
Revenue	9 1	Program service revenue (Part VIII, line 2g)	4,793,271.	5,181,581.				
ĕ	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		26,940.	537.			
ш	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,482.	12,338.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,858,893.	5,222,656.			
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1·3)		8,600.	5 , 750.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.				
es	15 8	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,382,105.	1,602,091.			
Šuš	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses	b i	Fotal fundraising expenses (Part IX, column (D), line 25)	0.					
ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	- ¬	3,591,310.	3,839,816.			
	18	「otal expenses Add lines 13-17 (must equal Part IX, columR本面包)/ED	- 1 ∟	4,982,015.	5,447,657.			
	19	Revenue less expenses. Subtract line 18 from line 12	<u> </u>	<123,122.	<pre><225,001.></pre>			
Net Assets or Fund Balances		Fotal assets (Part X, line 16)	IRS-08	eginning of Current Year	End of Year			
Sset	20	Total assets (Part X, line 16)	18	3,164,053.	2,924,760.			
ξĒ	21	Total liabilities (Part X, line 26)		751,192.	736,900.			
<u> </u>	22	Net assets or fund balances. Subtract line 21 from line 20 OGDEN, UT		2,412,861.	2,187,860.			
	art II	Signature Block						
		ties of perjury, I declare that I have examined this return, including accompanying schedule			knowledge and belief, it is			
true	, correct	and complete Declaration of preparer (other than officer) is based on all information of wh	hich prepare		2/1			
		Signature of officer		Date	0/			
Sig		,	m r a					
Her	e	DAVID CALLIS, EXECUTIVE VICE PRESIDEN' Type or print name and title	T & G1	<u> </u>				
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN			
Paid	, 1	MARK E. FOLLIS, CPA MARK E. FOLLIS,	CPA (08/31/12 self-employe				
		Firm's name DEMPSEY VANTREASE & FOLLIS PLLC		Firm's EIN	62-1736974			
	Only	1,,,,,,						
		Firm's address 630 S. CHURCH ST., STE 300 MURFREESBORO, TN 37130		Phone no (615)893-6666			
Ma	v the IE	S discuss this return with the preparer shown above? (see instructions)	· · · · · · · · · · · · · · · · · · ·	1	X Yes No			

LHA For Paperwork Reduction Act Notice, see the separate instructions. 132001 01-23-12

Form **990** (2011)

	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE INFORMATION, SERVICES, AND SUPPORT TO THE INTERESTS OF
	RURAL ELECTRIC COOPERATIVES IN TENNESSEE.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	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.
4a	(Code) (Expenses \$
	PROVIDE MAGAZINE TO 23 COOPERATIVES AND ONE MUNICIPAL WITH A
	CIRCULATION OF ABOUT 547,000 HOMES IN RURAL AREAS. PROVIDES EDUCATIONAL
	INFORMATION REGARDING THE COOPERATIVES AND ELECTRICITY
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
70	(Code) (Expenses \$
	MEMBERS WITH WINNERS EARNING A TOUR TO WASHINGTON D.C.
4c	(Code) (Expenses \$
	PROVIDE A JOB TRAINING AND SAFETY EDUCATIONAL PROGRAM TO EMPLOYEES OF
	MEMBER COOPERATIVES
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ► Form 990 (2011)

Form 990 (2011) COOPERATIVE

Part #V Checklist of Required Schedules COOPERATIVE ASSOCIATION

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	_	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_ 6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8	ļ	x
_	Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide	•		
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	<u> </u>		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	X
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	1 <u>1</u> a	Х	
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	X	
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
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	Ì		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40	x	
	Schedule D, Parts XI, XII, and XIII	12a		
D	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
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	1	X
	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		l	
	or more? If "Yes," complete Schedule F, Parts I and IV	146		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1	1	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19	\vdash	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	X
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	<u> </u> (2011)
		COLL	JJU	(2011)

Form	990 (2011) COOPERATIVE ASSOCIATION 62-046	<u> 51397</u>	P	age 4
	t 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			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
_	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			Ì
	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			
	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		Х
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	The second secon	24d		
	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		
ь	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 disqualifie			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		Ī	
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	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		X
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,			1
_	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			Ī
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701·2 and 301.7701·3? If "Yes," complete Schedule R, Part I	33		X
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	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	35Ь		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	?		
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 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

Par	t 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			·					
С	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?	1c							
2a									
	filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	L					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<u></u>					
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
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.								
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								
	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	ſ							
	were not tax deductible?	6b		ļ					
7	Organizations that may receive deductible contributions under section 170(c).			1					
а	a 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?								
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?								
C	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c							
d	If "Yes," indicate the number of Forms 8282 filed during the year								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	. 7e		<u> </u>					
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		ļ					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			1					
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
a	Did the organization make any taxable distributions under section 4966?	9a		 					
	Did the organization make a distribution to a donor, donor advisor, or related person?	9ь		ļ					
10	Section 501(c)(7) organizations. Enter:	,							
a	Initiation fees and capital contributions included on Part VIII, line 12 Out of a capital contribution 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]								
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders								
a									
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)								
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Ì	1					
		120	-	-					
	· · · · · · · · · · · · · · · · · · ·								
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a	 	 					
а	Note. See the instructions for additional information the organization must report on Schedule O.	100	ļ	†					
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the								
,	organization is licensed to issue qualified health plans	i		1					
_	Enter the amount of reserves on hand	İ							
14a		14a	<u> </u>	X					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	 						

COOPERATIVE ASSOCIATION

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			X
800	Check if Schedule O contains a response to any question in this Part VI tion A. Governing Body and Management			
<u>sec</u>	tion A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12			
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
-	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
J	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	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	
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	X	ļ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a	ļ	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		l .
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request		_	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, are	nd finar	ncial	
	statements available to the public during the tax year.		_	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizada DAVID CALLIS - (615) 367-9284	ation.	_	
	710 SPENCE LANE, NASHVILLE, TENNESSEE 37224-0912			
13200 01-23		Form	990	(2011)

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

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

- 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) Name and Title	(B) Average hours per week	box,	not c unle	(C Post heck i ss per d a di	nore	than s bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) WILLIAM S ROGERS	4 00	4						300.	0.	0.
PRESIDENT	4.00	X		X		_	<u> </u>	300.	0.	<u> </u>
(2) DAN RODAMAKER	1.00	X		х				200.	0.	0.
VICE PRESIDENT	1.00	Λ		_		_		200.		
(3) JOE WHITAKER	1.00	x		х				1,000.	0.	0.
SECRETARY/TREASURER (4) TONY BENTLE	1.00	^		Λ				1,000.		
TRUSTEE	0.50	х						100.	0.	0.
(5) STACY CHASTAIN	0.00						-			
TRUSTEE	0.50	Х						0.	0.	0.
(6) LARRY D MAYBERRY	1-1-1-1								-	
TRUSTEE	0.50	X						700.	0.	0.
(7) ALAN HAYES										
TRUSTEE	0.50	X						300.	0.	0.
(8) HAROLD FINLEY										
TRUSTEE	0.50	X					<u> </u>	900.	0.	0.
(9) FLOYD SHOEMAKER										
TRUSTEE	0.50	X	_			<u> </u>	<u> </u>	800.	0.	0.
(10) ROBERT W. MATHENY									_	
TRUSTEE	0.50	Х	_			ļ	L	300.	0.	0.
(11) GERALD TAYLOR JR					Î	İ	Ì			
TRUSTEE	0.50	X	ļ			<u> </u>	_	300.	0.	0.
(12) RODY BLEVINS										
TRUSTEE	0.50	X	_		_	├	-	200.	0.	0.
(13) ALAN HORSMAN	0.50	,,		İ				100	0.	
TRUSTEE	0.50	X		ļ	ļ	-	-	100.	0.	0.
(14) JOSEPH A THACKER III	0.50	v	1					100.	0.	0.
TRUSTEE	0.50	X	 	 	-	-	┢	100.	· · · · · · ·	ļ
(15) HAROLD WILLIS	0.50	X						300.	0.	0.
TRUSTEE	0.30	^		 	╁	┼	-	300.		
(16) DAVID CALLIS EXECUTIVE VP AND GM	60.00					X		151,418.	0.	65,491.
(17) TOM PURKEY		\vdash	╁	\vdash	 	† <u>*</u>	t^-	132,110.		00,1510
EXECUTIVE DIRECTOR(PART YR)	50.00					X		203,789.	0.	78,149.
ARROW OF 22 12		-			<u> </u>	1	٠.			Form 990 (2011)

132007 01-23-12

Par	t VII Section A. Officers, Directors, Tr	T	mplo	oyee	s, a	nd l	High	<u>est</u>	Compensated Employ	ees (continued)			
	. (A))								
	Name and title	Average	i (do not check more than one					one	Reportable	Reportable			
		hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation compensation				
		week		cer ar	lo a d	Teck	or/trus	(ee)	from	from related		oth	
		(describe hours for	ig Ct				L		the	organization		comper	
		related	5	188					organization (W-2/1099-MISC)	(W-2/1099-MIS	,0,	organiz	
		organizations	l ag	trustee		8			(44-2/1099-WIIGC)			and re	
		in Schedule	툹	tona	١.	흏	2 S	ļ "				organiz	
		O)	Individual trustee or director	Institutional t	E G	Кеу етріоуев	Highest compensated employee	Ē				•	
		-	 		<u> </u>	-	T -						
							_						
				<u> </u>	<u> </u>	<u> </u>							
			_	-	<u> </u>	.	+						
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			-	┢	-	-	+	\vdash	†·				
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			_				<u> </u>	L.					
							ŀ						
	· · · · · · · · · · · · · · · · · · ·			<u>i</u>	<u> </u>	<u></u>	Ļ	<u> </u>	260 007		$\overline{}$	142	C 4 O
	Sub-total								360,807.		0.	143,	640.
	Total from continuation sheets to Part V	II, Section A					•		0.		0.	1/12	$\frac{0.}{640.}$
	Total (add lines 1b and 1c)								360,807.			143,	040.
2	Total number of individuals (including but	not limited to th	nose	liste	ed a	.bov	e) w	no r	eceived more than \$100	0,000 of reportab	·le		2
	compensation from the organization						-					Ye	
3	Did the organization list any former office	director or tri	ucto	- L	A	male	~	٥r	highest compensated a	mployee on	ſ		
3	line 1a? If "Yes." complete Schedule J for			.c, n	sy e	прк	Jyee	, 01	ingriest compensated e	inployee on	l	3	X
4	For any individual listed on line 1a, is the s			omo	one	atio	n an	d 0t	her compensation from	the organization	ŀ		
•	and related organizations greater than \$15								•	the Organization		4 2	۱ ا
5	Did any person listed on line 1a receive or									idual for services	,		
•	rendered to the organization? If "Yes," cor	•					•					5	X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest c	ompensated in	dep	ende	ent d	cont	racto	ors '	that received more than	\$100,000 of con	npens	ation fron	n
	the organization Report compensation for	the calendar y	/ear	end	ıng v	with	or w	<u>/ithi</u>	n the organization's tax	year			
	(A)								(B) Description of s			(C)	****
	Name and busines								Description of s	services	<u> </u>	ompensa	ation .
	DONNELLEY RECEIVABLES BOX 905151, CHARLOTTE		20	Λ	51	5 1			PRINTING		1	,201,	191
TEI	NNESSEE TECHNOLOGY CEN	TO AT	MII	0 F	D E	ᇎ	RΩ			. AND	-	, 201,	777.
	03 OLD FORT PARKWAY, M										ĺ	461.	050.
13	OJ OLD TOKT FARRMAL, P.	OKI KEEO.				T 1A		, 1	DITT INGINIO	- 01. 111	 	<u> </u>	. 550 •
													-
									<u> </u>				
2	Total number of independent contractors		not I	imite	ed to		_	ste	d above) who received r	nore than	İ		
	\$100,000 of compensation from the organ	ilization P					2			 	<u> </u>	Form 00	0 (2011)

Page 9

Statement of Revenue Part VIII (D) Revenue (B) (C) (A) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns 16 Membership dues 1c c Fundraising events 1d d Related organizations 1e e Government grants (contributions) f All other contributions, gifts, grants, and 28,200 similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ 28,200 h Total. Add lines 1a-1f Business Code 511120 2536187 2536187. 2 a MAGAZINE Program Service Revenue 1363104. 1363104. 900099 **b** MEMBERSHIP DUES 620,696. c MAGAZINE ADVERTISING 511120 620,696. 900099 395,096. 395,096. d CONFERENCES/WORKSHOPS 266,498.266,498. 900099 e YOUTH TOUR All other program service revenue 5181581 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 10,379. 10,379 other similar amounts) ▶ Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities 46,920. assets other than inventory b Less: cost or other basis 56,762 and sales expenses <9,842 c Gain or (loss) <9,842.> <9,842. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses > c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 12,338. 900099 12,338. MISCELLANEOUS 11 a All other revenue 12,338. Total. Add lines 11a-11d 5222656. 4563381. 620,696. 10,379. 12 Total revenue. See instructions

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 respons	(A)	(B)	(C)	_ (D)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses	
1	Grants and other assistance to governments and	İ				
	organizations in the United States See Part IV, line 21					
2	Grants and other assistance to individuals in					
	the United States. See Part IV, line 22	5,750.		11111	·	
3	Grants and other assistance to governments,					
	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,					
	trustees, and key employees	481,736.				
3	Compensation not included above, to disqualified					
	persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B)					
,	Other salaries and wages	635,868.				
3	Pension plan accruals and contributions (include					
	section 401(k) and section 403(b) employer contributions)	189,201.				
€	Other employee benefits	218,729.			. <u></u> .	
)	Payroll taxes	76,557.				
ı	Fees for services (non-employees):					
а	Management					
b	Legal	68,143.				
С	Accounting	15,378.				
d	Lobbying	51,500.				
e	Professional fundraising services See Part IV, line 17					
f	Investment management fees					
g	Other	44,766.			. 	
2	Advertising and promotion		· · · · · · · · · · · · · · · · · · ·			
3	Office expenses	120,115.				
ı	Information technology	32,896.	<u>. </u>			
5	Royalties					
3	Occupancy	61,414.			<u> </u>	
7	Travel	103,589.				
3	Payments of travel or entertainment expenses					
	for any federal, state, or local public officials					
9	Conferences, conventions, and meetings	258,255.				
)	Interest					
ı	Payments to affiliates					
2	Depreciation, depletion, and amortization	76,423.				
3	Insurance	29,819.				
1	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)					
а	MAGAZINE POSTAGE/PRINTI	2,060,179.				
þ	SAFETY TRAINING CONTRAC	479,400.			-	
С	WASHINGTON YOUTH TOUR E	292,173.				
d	SPECIAL PROJECTS	54,077.				
е	All other expenses	91,689.			.	
5_	Total functional expenses. Add lines 1 through 24e	5,447,657.		ļ <u> </u>		
6	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)					

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Pa	rt X	Balance Sheet				
	•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		248,017.	1	428,101.
	2	Savings and temporary cash investments		457,330.	2	133,587.
	3	Pledges and grants receivable, net	ĺ		3	
	4	Accounts receivable, net		383,425.	4	418,131.
	5	Receivables from current and former officers, direct				
		employees, and highest compensated employees.				
		of Schedule L			5	
	6	Receivables from other disqualified persons (as de	fined under section		- "	
		4958(f)(1)), persons described in section 4958(c)(3				
		employers and sponsoring organizations of section				
		employees' beneficiary organizations (see instructi			6	
ets	7	Notes and loans receivable, net	·		7	
Assets	8	Inventories for sale or use		15,218.	8	3,749. 270,031.
	9	Prepaid expenses and deferred charges		314,748.	9	270,031.
	10a	Land, buildings, and equipment: cost or other	1			
		ı	0a 1,500,808.			
	ь	·	0a 1,500,808. 0b 809,046.	769,137.	10c	691,762.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		1,000,000.	12	1,000,000.
	13	Investments · program-related. See Part IV, line 11			13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	<23,822.	>15	<20,601.	
	16	Total assets. Add lines 1 through 15 (must equal l	3,164,053.	16	2,924,760.	
	17	Accounts payable and accrued expenses	616,743.	17	2,924,760. 593,506.	
	18	Grants payable		18		
	19	Deferred revenue		134,449.	19	143,394.
	20	Tax-exempt bond liabilities			20	·
Š	21	Escrow or custodial account liability. Complete Pa	rt IV of Schedule D		21	
<u>≅</u>	22	Payables to current and former officers, directors,				
Liabilities		highest compensated employees, and disqualified	persons. Complete Part II			
=		of Schedule L	·		22	
	23	Secured mortgages and notes payable to unrelate	d third parties		23	
	24	Unsecured notes and loans payable to unrelated t			24	
	25	Other liabilities (including federal income tax, paya	bles to related third			· · · · · · · · · · · · · · · · · · ·
		parties, and other liabilities not included on lines 1	7-24). Complete Part X of			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		751,192.	26	736,900.
	i	Organizations that follow SFAS 117, check here	x ► X and complete			
Š		lines 27 through 29, and lines 33 and 34.			1	
Š	27	Unrestricted net assets		2,412,861.	27	2,187,860.
ala	28	Temporarily restricted net assets		28		
<u>Б</u>	29	Permanently restricted net assets			29	
٦		Organizations that do not follow SFAS 117, che	ck here 🕨 🔲 and			
<u></u>		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds			30	
SSI	31	Paid in or capital surplus, or land, building, or equi	pment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inco	·		32	
ž	33	Total net assets or fund balances		2,412,861.	33	2,187,860.
	34	Total liabilities and net assets/fund balances	_ :	3,164,053.	34	2,924,760.

Form **990** (2011)

Form	990 (2011) COOPERATIVE ASSOCIATION	62-046	<u> 1397</u>	Pag	_{1e} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		5,22		
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,44		
3	Revenue less expenses. Subtract line 2 from line 1	3			$\frac{01.}{61}$
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,41	2,8	<u>p 1 · </u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5	- 10		<u>0.</u>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,18	7,8	<u>60.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
			F	Yes	No
1	Accounting method used to prepare the Form 990				ĺ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
b	Were the organization's financial statements audited by an independent accountant?		2b	<u>X</u>	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audīt,			
	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 Sch	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	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				l
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	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 requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

132012 01-23-12

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

_	Canting E01/a)(4) (5) (6)	restance Complete Dart III	••		
	Section 501(c)(4), (5), or (6) organization TENNES	SSEE ELECTRIC		Emple	oyer identification number
1 1411		RATIVE ASSOCIATION			62-0461397
Pa	art I-A Complete if the	organization is exempt und	er section 501(c)	or is a section 527 or	
F	at PA; Complete if the	organization is exempt und	9001011 30 1(0)	01 13 & 3000001 027 01	gainzation.
1	Provide a description of the orga	anization's direct and indirect politic	al campaign activities	ın Part IV.	
	Political expenditures			▶ \$	
	Volunteer hours			•	
Pa	art I-B Complete if the	organization is exempt und	ler section 501(c)	(3)	
	 	ax incurred by the organization und		▶ \$	
		ax incurred by organization manag		. .	
	•	ction 4955 tax, did it file Form 4720		•	Yes No
	Was a correction made?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		Yes No
ь	o If "Yes," describe in Part IV.				
	art I-C Complete if the	organization is exempt und	ler section 501(c)	, except section 501(c)(3).
1	Enter the amount directly expen	ded by the filing organization for se	ction 527 exempt fund	ction activities >\$	
2	Enter the amount of the filing or	ganization's funds contributed to ot	her organizations for s	ection 527	
	exempt function activities			▶\$	
3	Total exempt function expenditu	res Add lines 1 and 2. Enter here a	and on Form 1120-POL	- 1	
	line 17b			▶\$	
4	Did the filing organization file Fo	rm 1120-POL for this year?			Yes No
5	Enter the names, addresses and	i employer identification number (El	N) of all section 527 pe	olitical organizations to whic	h the filing organization
	made payments. For each organ	ization listed, enter the amount pai	d from the filing organi	zation's funds. Also enter th	e amount of political
		promptly and directly delivered to		•	te segregated fund or a
	political action committee (PAC)	. If additional space is needed, prov	/ide information in Part	t IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and promptly and directly
				funds. If none, enter -0-	delivered to a separate
					political organization.
					If none, enter -0
					ļ
					 -
		l .	I	1	I

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 CO	OPERATIVE	ASSOCIATIO	N	62-0	0461397 Page 2
Part II-A Complete if the organi	zation is exer	npt under sectio	n 501(c)(3) and file	ed Form 5768	
(election under section		•			
A Check In the filing organization		liated group (and list in	Part IV each affiliated	group member's nar	me, address, EIN,
expenses, and share of				•	
B Check If the filing organization			ovisions apply.		
				(a) Filing	(b) Affiliated group
	n Lobbying Expe			organization's	totals
(The term "expenditu	res" means amou	ints paid or incurred.))	totals	
1a Total lobbying expenditures to influence	e public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence					
T + 11 11		2) (223. 10.2.73)		-	
• • •	14 410 107		Ì		
d Other exempt purpose expenditures	dd linon 10 and 10	4/			
e Total exempt purpose expenditures (a			h columns		
f Lobbying nontaxable amount. Enter th			1.1		
If the amount on line 1e, column (a) or (b)		bying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,00		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500,0		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000	,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (enter	25% of line 1f)		-		
h Subtract line 1g from line 1a. If zero or	less, enter -0-				
i Subtract line 1f from line 1c If zero or	•			·	<u> </u>
j If there is an amount other than zero o	n either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this yea	r?		<u> </u>		Yes No
		eraging Period Under			
(Some organization	ns that made a s	ection 501(h) election	n do not have to comp	lete all of the five	
colum			es 2a through 2f on pa	ge 4.)	
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year		#1.000	4 3 2242	4.0.0044	(-) T-4-1
(or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
				 	
		1			
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990 EZ) 2011 COOPERATIVE ASSOCIATION 62-046139

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)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?		No	Am	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?				
a Volunteers?				
b. Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
b 1 aid stail of filaliagement (include compensation in expenses reperted on initial in the same said in the said stail of the said stail				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i		771		
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912		******************		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		1		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5), or se	ction	
501(c)(6).			Yes	No
			X	140
1 Were substantially all (90% or more) dues received nondeductible by members?		1	Λ	X
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? 		3		X X
		(2)	III-A, lir	ne 3, i
answered "Yes."			III-A, lir	ne 3, i:
answered "Yes." 1 Dues, assessments and similar amounts from members		1	III-A, lir	ne 3, is
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political			III-A, lir	ne 3, i:
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		1	III-A, lir	ne 3, i:
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year		1 	III-A, lir	ne 3, i:
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year		2a 2b	III-A, lir	ne 3, i
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total		2a 2b 2c	III-A, lir	ie 3, i:
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2a 2b	III-A, lir	ne 3, is
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		2a 2b 2c	III-A, lir	ne 3, is
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.		2a 2b 2c 3	III-A, lir	ne 3, i
answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		2a 2b 2c	III-A, lir	ne 3, i

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

➤ 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

TENNESSEE ELECTRIC

COOPERATIVE ASSOCIATION

Employer identification number 62-0461397

-	COUPERATIVE ASSOCI		02-0401357
Pa			s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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 advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	L Yes
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
, -	Impermissible private benefit?		Yes No
Pa	TELL Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ear	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements in		L Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		L Yes L No
9	In Part XIV, describe how the organization reports conservation	· ·	
	Include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
1	conservation easements.	(MI 0: 11 AA-
ra	Organizations Maintaining Collections o		πner Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ext	·	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS	•	•
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service, 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		al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		▶ \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

TENNESSEE ELECTRIC COOPERATIVE ASSOCIATION 62-0461397 Page 2 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): Loan or exchange programs Public exhibition Scholarly research Preservation for future generations 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 Yes on Form 990, Part X? **b** If "Yes," explain the arrangement in Part XIV and complete the following table: <u>Amount</u> 1c c Beginning balance 1d d Additions during the year 1e Distributions during the year 1f Ending balance Yes 2a Did the organization include an amount on Form 990, Part X, line 21? Nο b If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (c) Two years back (d) Three years back (e) Four years back (b) Prior year (a) Current year 1a Beginning of year balance Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment **b** Permanent endowment ► c 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 No by: 3a(i) (i) unrelated organizations 3a(ii) (ii) related organizations 3h 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.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		34,713.		34,713.
b Buildings		1,030,194.	440,651.	589,543.
c Leasehold improvements				
d Equipment		91,923.	74,604.	17,319.
e Other		343,978.	293,791.	50,187.
Total Add lines 1a through 1e (Column (d) mus	st equal Form 990 Part X colu	mn (B), line 10(c))	•	691,762.

Schedule D (Form 990) 2011

TENNESSEE E			63	0461207	
	ASSOCIATION		62-	<u>-0461397</u>	Page 3
Part VII Investments - Other Securities. See	Form 990, Part X, line 12		4 3 3 4 4 4 4 4 4 4 4 4		
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valuat st or end-of-year mark		
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A) MEDIUM TERM NOTE-NRUCFC	1,000,000.	COST			
(B) ·					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)		· · · · · · · · · · · · · · · · · · ·			
	1 000 000				
Total (Col (b) must equal Form 990, Part X, col (B) line 12)	1,000,000.				
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 st or end-of-year mark		
(1)					
(2)					
(3)					
(4)					
(5)					
(6)				· -	
					
(8)					
(9)					
(10)					
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)					
Part IX Other Assets. See Form 990, Part X, line				(b) Book va	oluo.
	Description			(b) Book v	alue
					
(2)		-			
(3)					
(4)		 			<u> </u>
(5)					
<u>(6)</u>					
(7)					
(8)		.			
(9)					
(10)	15\		•		
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X,		· ·			
(a) Description of liability		(b) Book value		·····	
(1) Federal income taxes					
			-		
(2)			1		
(4)			1		
		-	1		
<u>(5)</u> (6)			1		
(7)			1		
(8)			1		
(9)			1		
(10)			1		
			1		

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 2. FIN 48 (ASC 740)

2. FIN 4 132053 01-23-12

TENNESSEE ELECTRIC COOPERATIVE ASSOCIATION Schedule D (Form 990) 2011 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 5,222,656. Total revenue (Form 990, Part VIII, column (A), line 12) 5,447,657. Total expenses (Form 990, Part IX, column (A), line 25) 2 2 <225,001.> 3 Excess or (deficit) for the year. Subtract line 2 from line 1 3 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 5 6 Investment expenses 6 7 Prior period adjustments 7 8 8 Other (Describe in Part XIV.) 9 Total adjustments (net). Add lines 4 through 8 9 <225,001 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 5,222,895. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a a Net unrealized gains on investments 2b b Donated services and use of facilities 2c c Recoveries of prior year grants 3,460. d Other (Describe in Part XIV.) 2d 3,460. 2e e Add lines 2a through 2d 5,219,435. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b 4a 3,221. 4b **b** Other (Describe in Part XIV.) 3,221. c Add lines 4a and 4b 5,222,656. 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 5,447,896. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a a Donated services and use of facilities 2b **b** Prior year adjustments 2c c Other losses 239. d Other (Describe in Part XIV.) 2d 239. 2e e Add lines 2a through 2d 5,447,657. Subtract line 2e from line 1 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 4a 4b **b** Other (Describe in Part XIV.) 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 IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, lines 1b and 2 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 X, LINE 2: NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES: INCOME TAXES

THE SUBSIDIARY'S OPERATIONS ARE SUBJECT TO FEDERAL AND STATE INCOME TAXES. INCOME TAXES ARE PROVIDED FOR ALL TAXABLE ITEMS INCLUDED IN THE STATEMENT OF OPERATIONS REGARDLESS OF WHEN SUCH ITEMS ARE REPORTED FOR INCOME TAX PURPOSES.

Schedule D (Form 990) 2011

Part XIV Supplemental Information (continued)

ADVERTISING REVENUES MAY BE SUBJECT TO THE FEDERAL UNRELATED BUSINESS

INCOME TAX. HOWEVER, RELATED OPERATING DEDUCTIONS ARE GENERALLY AVAILABLE

TO ELIMINATE ANY RELATED TAX LIABILITY.

OTHER OPERATIONS OF THE ASSOCIATION ARE EXEMPT FROM FEDERAL AND STATE

INCOME TAXES UNDER PROVISIONS OF SECTION 501(C)(6) OF THE INTERNAL REVENUE

CODE; ACCORDINGLY, NO PROVISION IS RECOGNIZED IN THE FINANCIAL STATEMENTS

FOR INCOME TAXES ON SUCH OPERATIONS.

THE COMPANY ACCOUNTS FOR UNCERTAINTIES IN INCOME TAX LAW UNDER FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740-10. ASC 740-10 PRESCRIBES A COMPREHENSIVE MODEL FOR THE FINANCIAL STATEMENT RECOGNITION, MEASUREMENT, PRESENTATION AND DISCLOSURE OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN INCOME TAX RETURNS. ASC 740-10 REQUIRES THAT THE TAX EFFECTS OF A POSITION BE RECOGNIZED ONLY IF IT IS MORE-LIKELY-THAN-NOT TO BE SUSTAINED BY THE TAXING AUTHORITY AS OF THE REPORTING DATE. IF THE TAX POSITION IS NOT CONSIDERED MORE-LIKELY-THAN-NOT TO BE SUSTAINED, THEN NO BENEFITS OF THE POSITION ARE TO BE RECOGNIZED. THE COMPANY HAS NO UNRECOGNIZED TAX BENEFITS FOR ANY OF THE PERIODS PRESENTED. TO THE EXTENT APPLICABLE IN THE FUTURE, INTEREST AND PENALTIES RELATED TO INCOME TAX LIABILITIES WILL BE INCLUDED IN PRE-TAX INCOME AS INTEREST EXPENSE AND TAX PENALTIES. AT JUNE 30, 2012, THE COMPANYS TAX RETURNS RELATED TO FISCAL YEARS ENDED JUNE 30, 2009 THROUGH JUNE 30, 2012 REMAIN OPEN TO EXAMINATION BY THE TAX AUTHORITIES.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

TECA TELECOM REVENUES

<u>3,458.</u>

132055 01-23-12

Schedule I (Form 990) (2011) **≗** ∏ **Employer identification number** 62-0461397 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant 201. or assistance X Yes 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 traceived more than \$5,000. Part II can be duplicated if additional space is needed ame and address of organization

(d) Amount of cash grant in cash 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. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. COOPERATIVE ASSOCIATION Enter total number of other organizations listed in the line 1 table TENNESSEE ELECTRIC General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part Part II

62-0461397

COOPERATIVE ASSOCIATION

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 can be duplicated if additional space is needed. Schedule I (Form 990) (2011) Part III

(f) Description of non-cash assistance (book, FMV, appraisal, other) (d) Amount of non-cash assistance ö ö 750. 5,000. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance CHARITABLE DONATIONS SCHOLARSHIPS

SCHEDULE I, PART I, LINE 2: BOARD APPROVED SCHOLARSHIPS GIVEN TO QUALIFYING Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

OTHER GIFTS WERE

TO 501(C)(3) ORGANIZATIONS, THEREFORE NO NEED FOR MONITORING.

STUDENTS WHOSE FAMILIES ARE MEMBERS OF THE COOPERATIVES.

132102 01-27-12

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

See separate instructions.

Part IV, line 23.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

TENNESSEE ELECTRIC COOPERATIVE ASSOCIATION

Attach to Form 990.

Employer identification number 62-0461397

Schedule J (Form 990) 2011

Pa	art I Questions Regarding Compensation			
L		PH 1000	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	if any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
•	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
_	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
	Tables, and the dear Exceptive billotter, regulating the terms choosed in time ru.			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	Ì		
·	CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	Tomis 350 of other organizations			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Ì	Х
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part !!!	1		
	1 165 to any or lines 42 c, list the persons and provide the applicable amounts for each term in 1 art in			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a]
	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a]
	Any related organization?	6b		T
-	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	1		
-	not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			T
•	Pegulations section 53 (058-6/c)?	۵		1

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

62-0461397

Schedule J (Form 990) 2011

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2	N-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C) Betrement and	(D)	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)-(I)(B)	reported as deferred in prior Form 990
	8	151,418.	0	0	41,627.	23,864.	216,909.	0
1 DAVID CALLIS	(1)		0	0	0	0		0
	ε	203,78	0	0	53,572.	24,577.	281,938.	0
2 TOM PURKEY	€	0	0	• 0	0	0	0	0
	ε							
3	(ii)							
	8							
4	(ii)							
	ε							
LS.	€							
	(1)							
9	€							
	Θ							
7	▣							
	ε							
8	(ii)							
	Θ							
6	(ii)							
	Θ							
10	⊕							
	8							
11	<u>(ii)</u>							
	Ξ							
12	▣							
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13	▣							
	€							
14	(ii)							
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15	<u> </u>							
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16	▣	ļ						

Schedule J (Form 990) 2011

SCHEDULE'O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

TENNESSEE ELECTRIC
COOPERATIVE ASSOCIATION

Employer identification number 62-0461397

COOPERATIVE ASSOCIATION	62-0461397
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MI	SSION:
COOPERATIVES IN TENNESSEE	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
SPONSOR ANNUAL CONFERENCES FOR APPROX 275 MEMBERS TO UPD	ATE MEMBERS ON
ISSUES FACING ELECTRIC COOPERATIVES.	
FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF DIRE	CTORS IS ELECTED
BY THE MEMBER ORGANIZATIONS AT THE ANNUAL MEETING OF THE	ASSOCIATIONS
MEMBER COOPERATIVES.	
FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO THE FILI	NG DATE, THE FORM
990 WAS MADE AVAILABLE FOR REVIEW VIA E-MAIL OR DRAFT CO	PIES WERE DELIVERED
AT A BOARD MEETING. DAVID CALLIS (GENERAL MANAGER) OR AM	Y JORDAN
(CONTROLLER) ARE AVAILABLE FOR QUESTIONS OR COMMENTS THE	BOARD MEMBERS MAY
HAVE. ANY QUESTIONS OR COMMENTS ARE DOCUMENTED FOR REVI	EW WITH THE BOARD
CHAIRMAN.	····
FORM 990, PART VI, SECTION B, LINE 12C: PERIODIC REVIEWS	SHALL, AT A
MINIMUM, INCLUDE THE FOLLOWING SUBJECTS:	
A. WHETHER COMPENSATION ARRANGEMENTS AND BENEFITS ARE R	
COMPETENT SURVEY INFORMATION, AND THE RESULT OF ARM'S LE	NGTH BARGAINING.
B. WHETHER PARTNERSHIP, JOINT VENTURES, AND ARRANGEMENT	S WITH MANAGEMENT
ORGANIZATIONS CONFORM TO THE ASSOCIATION'S WRITTEN POLIC	
	edule O (Form 990 or 990-EZ) (2011)

Employer identification number, 62-0461397 2011 . Open to Public Inspection 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 COOPERATIVE ASSOCIATION TENNESSEE ELECTRIC Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part

e Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) <u>@</u> <u>e</u>

Primary activity Legal domicile (state or Total income End-of-year assets Direct controlling foreign country)		tions (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	(b) (c) (d) (d) (e) (f) (g) (g) Section 5/2(b)(13) (f) Section 5/2(b)(13) (f) Section 5/2(b)(13) (f) Section 5/2(b)(13) (f) Section 5/2(b)(13) (f) Section 6/2(b)(13) (f) Section 6/2(b		
Name, address, and EIN of disregarded entity		Identification of Related Tax-Exempt Organizations (Complete if the organizations during the tax year.)			

TENNESSEE ELECTRIC

COOPERATIVE ASSOCIATION 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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General or Percentage managing ownership 3 Yes No Code V-UBI camount in box n 20 of Schedule H-1 (Form 1065) Y $\boldsymbol{\epsilon}$ ate allocations? Disproportion-Yes Ξ Share of end-of-year assets <u>6</u> Share of total Income $\boldsymbol{\varepsilon}$ Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Direct controlling entity ত্ত (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization (a) Part IV

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)	(q)	(2)	9	(9)	€	6	ε
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling Type of entity (C corp., S corp., or trust)	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
TECA TELECOM, INC - 62-1366350	INACTIVE/DISCONTINUED						
PO BOX 100912	ORIGINAL OPERATIONS						
NASHVILLE, TN 37224	WERE TO PROVIDE	TN		c CORP	3,458.	0.	100.008
	DISH/SATELLITE						
	TELEVISION TO COOP						
(TECA TELECOM, INC CONTINUED)	MEMBERS						
					-		

Schedule R (Form 990) 2011

132162 01-23-12

TENNESSEE ELECTRIC COOPERATIVE ASSOCIATION Schedule R (Form 990) 2011 Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	S No.
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?	ns with one or more r	elated organizations listed	In Parts II-IV?		
a Receipt of (i) interest (ii) annutites (iii) royalties or (iv) rent from a controlled entity				, e	×
b Giff, grant, or capital contribution to related organization(s)				1b	×
c Gift, grant, or capital contribution from related organization(s)				10	×
d Loans or loan guarantees to or for related organization(s)				1d	×
e Loans or loan guarantees by related organization(s)				16	×
					>
r Sale of assets to related organization(s)				=	د :
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)				;=	×
j Lease of facilities, equipment, or other assets from related organization(s)				; -	×
k Performance of services or membership or fundraising solicitations for related organization(s)	lanization(s)			+	×
1 Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			=	×
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			£	×
n Sharing of paid employees with related organization(s)				Ę.	×
 Reimbursement paid to related organization(s) for expenses 				9	×
				-	×
				,	>
 q uner transfer of cash or property to related organization(s) r Other transfer of cash or property from related organization(s) 				1-	×
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.	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	_	
(5)					
(4)					
9					
(9)	,,			!	
32163 01-23-12	54		Schedu	Schedule R (Form 990) 2011	90) 2011

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TENNESSEE ELECTRIC

COOPERATIVE ASSOCIATION

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.

	ntage rship		1				
3	Percer				_	 	
6	eneral or ranaging sartner?	0 8 8 8		_			
()	Ospropor- tonate amount in box 20 managing ownership of Schedule K-1 partner?	(600)					
Ξ	spropor- tonate	No No				 	
	<u>용</u> 유	\$					
(6)	Share of end-of-year						
	Share of total						
(e)	501(c)(3) orgs ?	0 N					
(b)	Predominant income parties sec (related, unrelated, 501(c)(3) excluded from tax	Vincel Section 5 12-5 14)					
(2)	Legal domicile (state or foreign						
(Q)	Primary activity						
(a)	Name, address, and EIN of entity						

Schedule R (Form 990) 2011