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Form **990-EZ**

Short Form 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)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain

2012

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

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	Charle	ne 2012 ca	alendar year, or tax year beginning , 2012, and ending		,			
'n	Addres	if applicable ss change	C	D	Employer iden	tification number		
П		change	PEE DEE ELECTRIC TRUST P. O. BOX 491		57-0966	373		
Ħ	Initial	return	Telephone nun	nber				
Ħ	Termir	nated	DARLINGTON, SC 29532		843-665	5-4070		
П	Amend	ded return		-	Group Exer			
	Applic	ation pending		'	Number	iiptioi1 ▶		
G	Acco	unting Met	thod Cash X Accrual Other (specify) ► H	Check ►	X if the or	ganization is not		
ı	Web	site: 🟲 N				hedule B (Form		
<u>J</u>		Tax-exempt status (check only one) —						
K	Chec	k ► ∐ ıft	the organization is not a section 509(a)(3) supporting organization or a section 527 or	ganizatio	on and its gi	oss receipts are		
	norm	ially not m	nore than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 99 But if the organization chooses to file a return, be sure to file a complete return	0-N (e-p	ostcard) mag	y be required (see		
			ic, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more	re or if to	otal			
_	asse	ts (Part II,	line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990	EZ	> \$	124,796.		
Pa	rt I	Revenu	ue, Expenses, and Changes in Net Assets or Fund Balances (see the	e ınstru	ictions for			
		Check if	the organization used Schedule O to respond to any question in this Part I			X		
	1	Contributi	ions, gifts, grants, and similar amounts received		1	121,644.		
	2	Program	service revenue including government fees and contracts		2			
<u>(27)</u>	3	Members	ship dues and assessments		3			
2013,	4	Investme	int income		4	3,152.		
	5 a	Gross am	nount from sale of assets other than inventory 5 a			<u> </u>		
<u>ි</u>	b	Less cos	st or other basis and sales expenses 5 b					
	С	Gain or (loss	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5 c			
A.	6	Gaming a	and fundraising events					
⊂'R E	а	Gross inc	come from gaming (attach Schedule G if greater than \$15,000)					
\mathcal{L}	b	Gross inc	come from fundraising events (not including\$ of contribution	s	_			
SCANINED MAY		from fund	draising events reported on line 1) (attach Schedule G if the sum tross income and contributions exceeds \$15,000)					
遷								
		- 11	ect expenses from patring and fundraising events 6c		_			
Š	d	Net incom	ne or (loss) from gaming and Hridraising events (add lines 6a and					
	_	6b and St	utifract line 6c) 7 2013 O		6 d			
		11			_			
	D	Less cos	To goods sold 7b					
		Gross pro	ofit or (1953) from seles of inventory (Subtract line 7b from line 7a)		7 c			
	8		enue (describe în Schedule O)		8			
	9		enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	124,796.		
	10 11		nd similar amounts paid (list in Schedule O) See Schedule paid to or for members	J	10	135,061.		
_		•	•		11			
EXPERSES	12		other compensation, and employee benefits		12			
E	13		anal fees and other payments to independent contractors		13			
Š	14		cy, rent, utilities, and maintenance publications, postage, and shipping		14			
5	15		15					
	16 17		penses (describe in Schedule O) Denses. Add lines 10 through 16		► 16 ► 17	125 061		
	18		r (deficit) for the year (Subtract line 17 from line 9)			135,061.		
Ą	_				18	-10,265.		
A S S E T	19	Net assets	ts or fund balances at beginning of year (from line 27, column (A)) (must agree with e	nd-of-ye	ar	115 000		
ŦĘ	20		ported on prior year's return)		19	115,882.		
S	20 21		anges in net assets or fund balances (explain in Schedule O) ts or fund balances at end of year Combine lines 18 through 20		≥ 20 ► 21	105 615		
			rk Reduction Act Notice, see the separate instructions.			105,617.		
DM	י רטו	ı rapcı wu	in neudonon Act Houce, see the separate Histractions.			orm 990-EZ (2012)		

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rai	Check if the organization used Sche		estion in this Part II			X
				(A) Beginning of year	r	(B) End of year
22	Cash, savings, and investments			105,747.	22	95,441.
23	Land and buildings	Coo Cobodul			23	
24	Other assets (describe in Schedule O)	See Schedul	e U	10,135.	24	10,176.
25	Total assets			115,882.	25	105,617.
26	Total liabilities (describe in Schedule O)			0.	26	0.
27	Net assets or fund balances (line 27 of			115,882.	27	105,617.
Pai	t III Statement of Program Service Ac Check if the organization used Sc			[X]	(Rea	Expenses uired for section 501
What	is the organization's primary exempt purpose? See	Schedule O	question in this rait in	<u></u>	(c)(3) and 501(c)(4)
Desc	cribe the organization's program service a sured by expenses. In a clear and concise	ccomplishments for each of	its three largest progra	am services, as	orgai 4947	nizations and section (a)(1) trusts, optional
mea	sured by expenses. In a clear and concise fited, and other relevant information for e	e manner, describe the servi	ces provideď, the núm	ber of persons	for o	thers)
28	TO ACCUMULATE AND DISBURS		דאפוד פווספרכ	דאז דעב	-	· ·
	SERVICE AREA OF PEE DEE E			- TM -105		
20	(Grants \$ 135, 061.) If th	is amount includes foreign g	rants, check here	<u> </u>	28 a	135,061.
29						
	(Grants \$) If th	is amount includes foreign g	rants, check here	·	29 a	
30	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
	(Grants \$) If th	is amount includes foreign g	rants, check here	·	30 a	
31	Other program services (describe in Sch					
	(Grants \$) If th	is amount includes foreign g	rants, check here		31 a	
32	Total program service expenses (add lin	nes 28a through 31a)		•	32	135,061.
Par		Trustees, and Key Emp	oloyees. List each one e	ven if not compensated (see th	e instructions for Part IV)
	Check if the organization used Sc	hedule O to respond to any	question in this Part IV	<u> </u>		L
	(a) Name and Title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits contributions to emplo benefit plans, and defe compensation	yee	(e) Estimated amount of other compensation
Wai	ren Jeffords					
	ce-Chairman	2	0		0.	0.
Jir	Huggins					
	istee	2	0	·	0.	0.
	ıl Seward					
	istee	2	0	•	0.	0.
	drea_McGill					
	cretary	2	0	•	0.	0.
	colyn Cain	2			_	
	istee	2	0	•	0.	0.
	line Atkinson	2	0		0.	0.
	nny Quick			•	υ.	0.
	istee	2	0		0.	0.
	ki Spears			•	<u></u>	<u> </u>
	istee	2	0		0.	0.
	my Stephens					
	easurer	2	0		0.	0.
	nne Nobles		T.			
	istee	2	0		0.	0.
Els	ie_Byrd					
Cha	irman	2	0	•	0.	0.
				ļ		
BAA		TEEA0812L C	3/14/13	1		Form 990-F7 (2012)

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the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Pa		J	X
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,'	-	Yes	No
provide a detailed description of each activity in Schedule O	33		Х
34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if the	ney reflect		
a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		Х
35 a 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)?	35 -		7,
b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Sche	35 a		X
	dule 0 35 b		
c 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	35 c		Х
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	36		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a	0.		
b Did the organization file Form 1120-POL for this year?	37 b		X
38 a 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?	38 a		X
b If 'Yes,' complete Schedule L, Part II and enter the total		-	
amount involved 38b	N/A		
39 Section 501(c)(7) organizations Enter	N7 /2		
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39a 39b	N/A		
· · · · · · · · · · · · · · · · · · ·	N/A		
40 a 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 ►			
section 4911 ► 0 , section 4912 ► 0 , section 4955 ► b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	0.		
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	40 b		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.		1
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed			1
by the organization	0.		ĺ
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax			X
chalter transaction? If 'Vos ' complete Form 9886 T	40.0		
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 41 List the states with which a copy of this return is filed ► SC	40 e		
41 List the states with which a copy of this return is filed SC 42 a The organization's books are in care of Debbie Osterberg Telephone no		355_ Yes	No X
42 a The organization's books are in care of ▶ Debbie Osterberg Telephone no ▶ Located at ▶ P.O. BOX 491 DARLINGTON SC 2IP + 4 ▶ 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 ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial account)? If 'Yes,' enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. c 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 ▶ 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If 'Yes,' to line 44c, has the organization filed a Form 720 to report these payments? If 'Yes,' provide an explanation in Schedule Q 45a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?	843-292-4 29532 42b 42c 42c 44d 44b 44c 44d 45a		No X
42 a The organization's books are in care of ► Debbie Osterberg Telephone no Located at ► P.O. BOX 491 DARLINGTON SC ZIP + 4 ► 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 ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial account)? If 'Yes,' enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial accounts. c 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 ► 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If 'Yes,' to line 44c, has the organization filed a Form 720 to report these payments? If 'Yo,' provide an explanation in Schedule Q If 'Yes,' provide an explanation in Schedule Q	843-292-4 29532 42b 42c 42c 44d 44b 44c 44d 45a	Yes	No X X N/A N/A No X X X

Form	990-EZ (2012) PEE DEE ELECTRIC TRUST 57-	-0966373	Page 4
46	. Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition candidates for public office? If 'Yes,' complete Schedule C, Part I	to 46	Yes No
Par	VI Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47-49b and 52, and comp for lines 50 and 51.	olete the tab	
48	Check if the organization used Schedule O to respond to any question in this Part VI Old 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 is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Old the organization make any transfers to an exempt non-charitable related organization?	47 48 49	Yes No X X X
b	f 'Yes,' was the related organization a section 527 organization? Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees a employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'Non	491 and key	
	(a) Name and title of each employee paid more than \$100,000 (b) Average hours per week devoted to position (c) Reportable compensation (Forms W-2/1099-MISC) (d) Health benefits contributions to employee benefit plans, and defection compensation compensation (Forms W-2/1099-MISC)	yee (e) Estimat	ted amount of mpensation
Non			
51	Total number of other employees paid over \$100,000 Complete this table for the organization's five highest compensated independent contractors who each received more the compensation from the organization. If there is none, enter 'None'		
Non	(a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service	(c) Con	npensation
52	Total number of other independent contractors each receiving over \$100,000. Old the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexemplifications must attach a completed Schedule A.	ot	s No
Under i	enalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge arect, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	and belief, it is	
Sign Here	Signature of officer V. E. LePou Nettles, Jr. President and CEO Type of our name and the president and CEO	9,2013	
Paid	Print/Type preparer's name BRYAN A ISGETT Preparer's signature Date MAY 0 5 2013 Check self-employed	PTIN PTIN PTIN PTIN PTIN PTIN PTIN PTIN	28
Prepa Use (► 58-109 (478) 746-	4351 -6277

► X Yes No
Form 990-EZ (2012)

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

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Total

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.

Employer identification number PEE DEE ELECTRIC TRUST 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(bX1XAXiii) 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). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities 9 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 Type III - Functionally integrated Type II d | Type I h c Type III - Non-functionally integrated 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 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) 11 g (i) below, the governing body of the supported organization? A family member of a person described in (i) above? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) h Provide the following information about the supported organization(s) (vi) Is the organization in column (i) organized in the US? (iv) Is the organization in column (i) listed in (i) Name of supported organization (n) EIN (iii) Type of organization (described on lines 1 9 above or IRC section (see instructions)) (v) Did you notify (vii) Amount of monetary the organization in column (i) of your support? support Yes Yes No Yes No (A) (B) (C) (D) **(E)**

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

Schedule A (Form 990 or 990-EZ) 2012

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 I f the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support					-		
	endar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.)	124,645.	109,374.	120,287.	121,519.	121,644.	597,469.	
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	124,645.	109,374.	120,287.	121,519.	121,644.	597,469.	
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						597,469.	
Sec	tion B. Total Support	·		1				
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
7	Amounts from line 4	124,645.	109,374.	120,287.	121,519.	121,644.	597,469.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,356.	4,546.	332.	6.	3,152.	12,392.	
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						609,861.	
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	0.	
	First five years. If the Form 990 is organization, check this box and	stop here		d, fourth, or fifth to	ax year as a section	501(c)(3)	▶ 🗍	
	tion C. Computation of Pul							
	Public support percentage for 20	- ·	• •	e 11, column (f))		14	97.97%	
	Public support percentage from 2					15	97.74%	
16 a	33-1/3% support test — 2012. If and stop here. The organization	the organization d qualifies as a pub	lid not check the b licly supported org	oox on line 13, ar ganization	nd the line 14 is 33	3-1/3% or more, ch	neck this box	
t	33-1/3% support test – 2011. If t and stop here. The organization	he organization di qualifies as a pub	d not check a box blicly supported or	on line 13 or 16 ganization	a, and line 15 is 3	3-1/3% or more, c	heck this box	
17 a	17a 10%-facts-and-circumstances test — 2012. 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.							
	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances' est The organizat	test, check this lon qualifies as a	box and stop here publicly supporte	e. Explain in Part l' d organization	V how the	
	Private foundation. If the organiz	zation did not ched	ck a box on line 13	3, 16a, 16b, 17a,	or 17b, check this			
RAA					Cab	adula A /Earm 000	or 000 E71 2012	

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)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in) 🟲	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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						
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons						-
b	Amounts included on lines 2	-					1
	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)						
Sec	tion B. Total Support		,				· · · · · · · · · · · · · · · · · · ·
	dar year (or fiscal yr beginning in) >	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6						
iva	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						
_	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				1		
	gain or loss from the sale of capital assets (Explain in						
12	Part IV)	 			 		
	Total support. (Add Ins 9, 10c, 11, and 12) First five years. If the Form 990	is for the organiz	ation's first secon	d third fourth a	or fifth tay year ac	a section 501(a)(3/
14	organization, check this box and	stop here	ation's inst, secon	iu, thiru, lourtii, t	or illuritax year as	a section 501(c)(• □
	tion C. Computation of Pul						
	Public support percentage for 20	-	•	ie 13, column (f))	15	
	Public support percentage from :					16	
	tion D. Computation of Inv						
	Investment income percentage for	•		•	umn (f))	17	% ————————————————————————————————————
	Investment income percentage fi					18	96
	33-1/3% support tests — 2012. If is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization	· ►
	33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%	, check this box a	and stop here. The	e organization qu	ualifies as a public	ly supported orga	3-1/3%, and nization ► []
20	Private foundation. If the organiz	zation did not che	ck a box on line 1	4, 19a, or 19b, o	check this box and	see instructions	▶ []

Schedule A	(Form 990 or 990-EZ) 2012	PEE DEE	ELECTRIC	TRUST	57-0966373	Page 4
Part IV	Supplemental Informat Part II, line 17a or 17b; (See instructions).	i on. Comp and Part II	lete this par I, line 12. A	t to provide the expl lso complete this pai	anations required by Part II, line rt for any additional information.	10;
		- 				

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 2012

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.

Open to Public Inspection

PEE DEE ELECTRIC TRUST	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 Bene	fit Contracts
(a) Did the organization, during the year, receive any fur	nds, directly or
indirectly, to pay premiums on a personal benefit contract?	? No
(b) Did the organization, during the year, pay premiums, o	directly or
indirectly, on a personal benefit contract?	NoNo

Schedule O - Supplemental Information 2012 Client 6708400 PEE DEE ELECTRIC TRUST 57-0966373 5/05/13 Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid In Excess of \$5,000 SEE ATTACHED Donee's Name: Cash Amount Given: 135,061. Form 990-EZ, Part II, Line 24 Other Assets Beginning Ending 10,135. \$ 10,135. \$ Accounts Receivable \$ Total \$

Page 2

03 47PM

Adam Fields	\$	1,079
Albertine Gause	Ψ	750
Alexis Davis		1,045
Alma Manning		300
Amanda Hoffman		500
Amy Gause		203
Andruel Holloman		235
Angela Davis		2,049
Angerlyn Funderburk		300
Annette Brown		150
Ashley Kinney		839
Ashley Watts		500
Atonya Simmons		500
Barbara Fulmore		600
Beady Oliver		300
Bennie Boston		1,466
Bernetha Ervin		648
Bernice McNeil		592
Betty Williamson		250
Brandi Weeks		1,160
Brenda Davis		706
Cassandra Haselden		1,074
Cathy Sink		258
Catina Tisdale		570
Charlie Campbell		1,020
Chemeka Benjamin		761
Cheryl Monroe		200
Clemson Page		1,800
Clyde Monahan		871
Crystal Davis		300
Cynthia Dykes		674
Cynthia Townsend		700
Davis Richardson		317
Dawn Campbell		381
Debbie Harper		1,100
Dennis Davis		450
Dianne Serhus		704
Donna Register		753
Donna Rowell		1,485
Balance-Carried Forward	\$	27,590

Balance-Brought Forward	\$ 27,590
Donna Walters	541
Dottie Powers	1,184
Earline McCoy	309
Eatherree Rast	300
Edith Williams	1,318
Edna Hodge	900
Edna Willis	435
Elaine Freeman	141
Elanore Gainey	164
Estelle Monroe	200
Felesha Brown	974
Frank McPhail	891
Fredericka Willis	504
Gail Bailey	271
George McLaughlin	500
Gerald Byrd	2,000
Geraldine Tisdale	947
Glenda Godbolt	820
Glenn Barfield	1,275
Gloria Ellison	300
Grace Davis	752
Grace Windham	108
Gracie Gause	236
Harold Timmons	865
Harry Clifton	417
Harry Kirven	1,120
Harvey Owens	1,276
Heather White	1,510
Heidi Eaddy	852
Helen Boucher	327
Helen Ham	247
Hester Small	716
Heyward Parker	624
Horine Lupo	500
Howard Wright	1,040
Iola Eaddy	500
Iris Wilson	 134
Balance-Carried Forward	 52,788

Balance-Brought Forward	\$	52,788
Ivielle Hemingway		855
James Buey		1,052
James Hemingway		1,000
James Hodges		432
James Kennedy		574
James Kurtnacker		800
James Marlowe		800
Janell Wright		373
Janice Swinton		313
Janice Williamson		1,530
Jay McKenzie		982
Jean Moultrie		762
Jeanne Bacote		334
Jeffrey David Long		497
Jenna Strickland		500
Jennifer Wright		799
Jenny Brown		354
Jerry Brewer		1,500
Jessica Sawyer		297
Joanne Elvington		1,428
John Bess		200
Johnny Davis		503
Johnny Holland		1,195
Joseph Nice		150
Joyce O'Neal		420
Judy McAllister		455
Julia Green		621
Kenya Hunter		250
Keshia Rogers		591
Laconda Stackhouse		462
Lamonte Paige		600
Larry Moody		900
Laura Davis		652
Leroy McDaniel		368
Levan Evans		125
Linda Crawford		259
Balance-Carried Forward	_\$_	75,721

Balance-Brought Forward	\$	75,721
Lizzie Scott		450
Mable Dowdy		190
Marcus Mclellan		250
Margaret Benjamin		820
Marion Washington		273
Mary Dixon		127
Mary Timmons		529
Megan Owens		200
Melissa Baird		610
Melissa Harmon		121
Memrie Blue		1,000
Mercedes Sims		771
Mike Freeman		956
Mona McIver		192
Monette Woodbury		870
Monroe McFarland		530
Morris Mazyck		655
Nadine O'Neal		750
Olivia Bostick		417
Oral Outlaw		200
Patricia Campbell		820
Perry Blue		850
Peter Smith		167
Philesa Braddy		195
Priscilla Morris		644
Randy Brewer		200
Randy Sawyer		1,171
Ray Jefferson		150
Raymond Sansbury		169
Renata Williamson		800
Renee Ceasar		498
Renee Davis		500
Retha Dials		905
Rhonda Graham		362
Roosevelt Dewitt		200
Rosa Alford		412
Balance-Carried Forward	_\$_	93,675

Balance-Brought Forward	\$	93,675
Rose Haynesworth		120
Sabrina Monroe		200
Sammie Davis		200
Sarah Lowery		350
Sena Easterling		499
Sharon Johnson		230
Sharon Watson		282
Sheila Dozier		367
Sheila Walker		1,187
Shelia Davis		141
Sherry Stroud		836
Shirley Hannah		691
Shirley Jacobs		535
Shonte Upshur		410
Sue Ellen Baxley		137
Suquatta Keyes		500
Sylvia Williams		150
Tawanda Joint		150
Teissha Lewis		500
Teresa Goss		461
Teresa Hawkins		407
Teresa Vanderhall		1,649
Theresa McIntyre		368
Thomas Wilkes		438
Tommy Slater		1,000
Tony Johnson		500
Vanessa Richardson		836
Venita Rogers		200
Vera Cribb		163
Vernita Rogers		110
Veronica Smith		236
Vickie Lunnon		375
Victor Hayes		280
Walter McKnight		1,500
Wanda Page		725
William Carder		1,193
William Guzman		500
Balance-Carried Forward	_\$_	112,101

Balance-Brought Forward	\$ 112,101
William King	425
Willie Berry	500
Willie Lee Mack	278
Yolanda Davis	470
	\$ 113,774

PEE DEE ELECTRIC TRUST Pg. 1 Part I-Line 10-SCHEDULE OF COMMUNITY ASSISTANCE FOR THE YEAR ENDED DECEMBER 31, 2012

Camp RAE	\$ 1,444
Palmetto Rural Fire Department	1,500
Darlington County Habitat for Humanity	1,500
Dillon County Council on Aging	2,095
Florence County Disabilities Foundation	500
Gregory Davis Ministries	1,543
Marion County Council on Aging	1,700
Marion County Habitat for Humanity	1,500
Pee Dee Coalition Order	1,000
Rebuilding Together	2,500
Santahatchie-Florence Camp	1,000
Toys for Tots	 5,000
	\$ 21,282