

Form **990**

OMB No 1545-0047

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)

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

2005
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2005 calendar year, or tax year beginning and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization: **CADDO ELECTRIC COOPERATIVE**
 Number and street (or P O box if mail is not delivered to street address) Room/suite: **P.O. BOX 70**
 City or town, state or country, and ZIP + 4: **BINGER OK 73009-0070**

D Employer identification no.: **73-0169405**

E Telephone number: **405-656-2322**

F Accounting method: Cash Accrual Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and are not applicable to section 527 organizations I

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates Yes No

H(c) Are all affiliates included? Yes No
(If "No," attach a list See instr)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number

M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

G Website: **N/A**

J Organization type (check only) 501(c) (12) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **25,237,890**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a			
b	Indirect public support	1b			
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ _____ noncash \$ _____)		1d		0
2	Program service revenue including government fees and contracts (from Part VII, line 93)		2		25,029,557
3	Membership dues and assessments		3		
4	Interest on savings and temporary cash investments		4		91,578
5	Dividends and interest from securities		5		63,468
6a	Gross rents	6a			15,480
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)		6c		15,480
7	Other investment income (describe _____)		7		
8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
b	Less cost or other basis and sales expenses	8a			-2,758
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			-2,758
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>		SEE STMT 1	8d	
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
b	Less direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)		9c		
10a	Gross sales of inventory, less returns and allowances	10a			25,252
b	Less cost of goods sold	10b			7,270
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		STMT 2	10c	17,982
11	Other revenue (from Part VII, line 103)		11		15,313
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12		25,230,620
13	Program services (from line 44, column (B))		13		
14	Management and general (from line 44, column (C))		14		
15	Fundraising (from line 44, column (D))		15		
16	Payments to affiliates (attach schedule)		16		
17	Total expenses (add lines 13 and 14, column (A))		17		24,431,903
18	Excess or (deficit) for the year (subtract line 17 from line 12)		18		798,717
19	Net assets or fund balances at beginning of year (from line 73, column (A))		19		15,474,969
20	Other changes in net assets or fund balances (attach explanation)		20		73,289
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21		16,346,975

P 10

REVENUE
EXPENSES
NET ASSETS

RECEIVED
OPEN UP

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22			
23	Specific assistance to individuals (attach schedule) <input type="checkbox"/>	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25 97,335			
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33			
34	Telephone	34			
35	Postage and shipping	35			
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41 1,442,588			
42	Depreciation, depletion, etc (attach schedule)	42 1,679,929			
43	Other expenses not covered above (itemize)				
a	SEE STATEMENT 4	43a 21,212,051			
b		43b			
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 24,431,903	0	0	0

Joint Costs. Check if you are following SOP 98-2
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,
 (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose?

▶ **TO PROVIDE ELECTRICITY TO MEMBERS**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) & (4) orgs., & 4947(a)(1) trusts, but optional for others.)

a PROVIDED ELECTRICITY TO MEMBERS.

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

b

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

c

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

d

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here ▶

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

▶ **0**

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash-non-interest-bearing	1,232,715	45	2,574,841	
	46 Savings and temporary cash investments	70,000	46	70,000	
	47a Accounts receivable	4,923,689			
	b Less allowance for doubtful accounts	213,611	47c	4,710,078	
	48a Pledges receivable				
	b Less allowance for doubtful accounts		48c		
	49 Grants receivable		49		
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50		
	51a Other notes and loans receivable (attach schedule)				
	b Less allowance for doubtful accounts		51c		
	52 Inventories for sale or use	625,599	52	757,348	
	53 Prepaid expenses and deferred charges	437,404	53	378,421	
	54 Investments-securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54		
	55a Investments-land, buildings, and equipment basis				
	b Less accumulated depreciation (attach schedule)		55c		
56 Investments-other (attach schedule)	SEE STMT 5	8,266,394	56	8,571,715	
57a Land, buildings, and equipment basis	62,201,767				
b Less accumulated depreciation (attach schedule) SEE STATEMENT 6					
57b	17,632,517	42,423,039	57c	44,569,250	
58 Other assets (describe <input type="checkbox"/>)			58		
59 Total assets (must equal line 74) Add lines 45 through 58		55,781,180	59	61,631,653	
Liabilities	60 Accounts payable and accrued expenses	1,884,336	60	2,341,247	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a Tax-exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule) SEE WORKSHEET		35,227,553	64b	39,487,874
	65 Other liabilities (describe <input type="checkbox"/> SEE STATEMENT 7)		3,194,322	65	3,455,557
66 Total liabilities. Add lines 60 through 65		40,306,211	66	45,284,678	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67 Unrestricted		67		
	68 Temporarily restricted		68		
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds	50,565	70	51,550	
	71 Paid-in or capital surplus, or land, building, and equipment fund	20,071	71	72,903	
	72 Retained earnings, endowment, accumulated income, or other funds	15,404,333	72	16,222,522	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)		15,474,969	73	16,346,975	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		55,781,180	74	61,631,653	

Part VI Other Information (continued)

		Yes	No
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III.)	82b		
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	N/A	
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	N/A	
c Dues, assessments, and similar amounts from members	85c		
d Section 162(e) lobbying and political expenditures	85d		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a		
b Gross receipts, included on line 12, for public use of club facilities	86b		
87 501(c)(12) orgs Enter a Gross income from members or shareholders	87a	25,029,557	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	195,611	
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X	
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> _____, section 4912 <input type="checkbox"/> _____, section 4955 <input type="checkbox"/> _____			
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year sections 4912, 4955, and 4958 <input type="checkbox"/> _____			
d Enter Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/> _____			
90a List the states with which a copy of this return is filed <input type="checkbox"/> OK			
b Number of employees employed in the pay period that includes March 12, 2005 (See instructions.)	90b		70
91a The books are in care of <input type="checkbox"/> CLINT PACK P.O. BOX 70 Located at <input type="checkbox"/> BINGER, OK			
Telephone no <input type="checkbox"/> 405-656-2322			
ZIP + 4 <input type="checkbox"/> 73009-0070			
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 <input type="checkbox"/> _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts At any time during the calendar year, did the organization maintain an office outside of the United States?	91b		X
c If "Yes," enter the name of the foreign country <input type="checkbox"/> _____	91c		X
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 92			

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by sec 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a SALES OF ELECTRICITY					25,029,557
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	91,578	
96 Dividends and interest from securities			14	63,468	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			11	15,480	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			1	-2,758	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory			41	17,982	
103 Other revenue a					
b NON-OPERATING INCOME			1	15,313	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		201,063	25,029,557
105 Total (add line 104, columns (B), (D), and (E))					25,230,620

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93A	SALES OF ELECTRICITY REPRESENTS THE COOPERATIVE'S CENTRAL PURPOSE FOR EXISTENCE.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
SEE STATEMENT 8	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

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

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including attachments, if any, and believe that it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has knowledge.

Signature of officer: Bob Thomason

Type or print name and title: Bob Thomason CEC

Paid Preparer's Use Only

Preparer's signature: Sean Sundry

Firm's name (or yours if self-employed), address, and ZIP + 4: BRISCOE, BURKE & G
4120 EAST 51ST ST
TULSA, OK 74135-3

Forms 990 / 990-PF	Mortgages and Other Notes Payable	2005
For calendar year 2005, or tax year beginning _____, and ending _____		

Name CADDO ELECTRIC COOPERATIVE	Employer Identification Number 73-0169405
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FORM 990, PART IV, LINE 64B - ADDITIONAL INFORMATION

Name of lender	Relationship to disqualified person
(1) RURAL UTILITIES SERVICE	
(2) NRUCFC	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1)	VARIOUS	VARIOUS		
(2)	VARIOUS	VARIOUS		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1) UTILITY PLANT	PROVIDE ELECTRICITY TO MEMBERS
(2) UTILITY PLANT	PROVIDE ELECTRICITY TO MEMBERS
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	21,762,138	25,764,947
(2)	13,465,415	13,722,927
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals	35,227,553	39,487,874

Federal Statements

Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
DISTRIBUTION OF PROPERTY PURCHASE			VARIOUS	VARIOUS	\$ -2,758	\$	\$	\$ -2,758
TOTAL					<u>\$ -2,758</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ -2,758</u>

Federal Statements**Statement 2 - Form 990, Line 10c - Sales of Inventory**

<u>Description</u>	<u>Gross Sales</u>	<u>COGS</u>	<u>Gross Profit</u>
MATERIAL/OTHER	\$ 25,252	\$ 7,270	\$ 17,982
TOTAL	<u>\$ 25,252</u>	<u>\$ 7,270</u>	<u>\$ 17,982</u>

Statement 3 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

<u>Description</u>	<u>Amount</u>
INCREASE IN MEMBERSHIPS	\$ 985
ACCRUAL TO CASH CONVERSION OF PATRONAGE DIVIDENDS	310,313
TRANSFERS AND OTHER CHANGES IN EQUITY	52,833
RETIREMENTS OF PATRONAGE CAPITAL	-247,967
SUBSIDIARY INCOME	-43,395
DECREASE IN TRANSFERS OF OTHER EQUITIES	520
TOTAL	<u>\$ 73,289</u>

Federal Statements**Statement 4 - Form 990, Part II, Line 43 - Other Functional Expenses**

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
EXPENSES	\$	\$	\$	\$
COST OF POWER	15,315,323			
TRANSMISSION & DISTRIBUTION	2,851,973			
CONSUMER EXPENSE	1,484,237			
GENERAL & ADMINISTRATIVE	1,281,962			
TAXES	278,556			
TOTAL	<u>\$21,212,051</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

Federal Statements**Statement 5 - Form 990, Part IV, Line 56 - Other Investments**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>
ECONOMIC DEVELOPMENT LOANS	\$ 6,266,024	\$ 2,061,156	
INVESTMENTS IN ASSOCIATED	2,064,143	6,617,727	
INVESTMENT IN SUBSIDIARY	-63,773	-107,168	
TOTAL	<u>\$ 8,266,394</u>	<u>\$ 8,571,715</u>	

Statement 6 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

<u>Description</u>	<u>Beginning of Year</u>	<u>Accum Deprec</u>	<u>End of Year</u>	<u>Accum Deprec</u>
PROPERTY, PLANT & EQUIPMENT	\$58,936,932	\$16,513,893	\$62,201,767	\$17,632,517
TOTAL	<u>\$58,936,932</u>	<u>\$16,513,893</u>	<u>\$62,201,767</u>	<u>\$17,632,517</u>

Statement 7 - Form 990, Part IV, Line 65 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
POST-RETIREMENT BENEFIT OBLIGATION	\$ 2,768,407	\$ 3,070,494
MEMBER DEPOSITS	262,968	267,709
DEFERRED CREDITS	162,947	117,354
TOTAL	<u>\$ 3,194,322</u>	<u>\$ 3,455,557</u>

Federal Statements

Statement 8 - Form 990, Part IX - Information Regarding Taxable Subsidiaries

<u>Bus Name</u>		<u>Addr</u>	<u>Income</u>	<u>EOY Assets</u>
<u>EIN</u>	<u>Ownership %</u>	<u>Nature of Activity</u>		
CADD0 ELECTRIC COOPERATIVE ENTERPRISES, INC.				-
73-1563867	100.0000	INTERNET SERVICE	\$ 65,870	\$ 3,795
TOTAL			<u>\$ 65,870</u>	<u>\$ 3,795</u>

Caddo Electric Cooperative, Inc.

BOARD INSURANCE BENEFITS 2005

	AVG HRS	HEALTH INS	DENTAL/VISIO	LIFE INS		CANCER CARE	TOTALS
				DIR	ATTNY 24 HR		
John Garland	1	11,028.74	1,637.88		178.32	288.00	13,132.94
Walter Hrbacek	1	7,888.56	1,233.60		141.36	288.00	9,551.52
Gerald Kenedy	1	5,255.70	1,144.70		80.28	59.40	6,540.08
Donna Lawrence	1	1,178.80	174.52		59.44	75.68	1,488.44
Greg Little	1	7,493.14	1,272.00		118.88	216.00	9,100.02
Jack McIemore	1	9,371.56	1,075.88		87.36	-	10,534.80
Herman Myers	1	8,231.56	1,233.60		164.88	288.00	9,918.04
Glenn Propps	1	8,763.74	1,233.60		178.32	288.00	10,463.66
Fred Reuter	1	8,763.74	1,908.00		180.96	288.00	11,140.70
Max Scudder	1	8,225.56	1,075.88		178.32	264.60	9,744.36
Mark Slemp	1	11,028.74	1,908.00		168.00	288.00	13,392.74
Donald Wnght	1	8,231.56	287.28		131.28	288.00	8,938.12
		95,461.40	14,184.94		1,667.40	2,631.68	113,945.42

Current Manager

Bob Thomasson	40			ANNUAL SALARY		R&S	
				97,335.00		14,269.32	111,604.32

Former Board Member

	HEALTH INS	DENTAL/VISIO	LIFE INS		CANCER CARE	TOTALS
			DIR	ATTNY 24 HR		
Ray Mills	2,447.16	-		-	113.40	2,560.56

Former Manager

	HEALTH INS	DENTAL/VISIO	LIFE INS		CANCER CARE	TOTALS
			DIR	ATTNY 24 HR		
Doyle Marlett	3,498.84	-		-	55.80	3,554.64

70 Employees as of March 12, 2005