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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 2007

Open to Public Inspection

Department of the Treasury

SCANNED JAN 2 9 2010

may have to use a copy of this return to satisfy state reporting require

		venue Service(//)				copy or this return to s			requirer	iiciito		-
_			dar year,	or tax year begir	ning	, 2007	, and e	ending	TD -	Janes - 1.2	SC-A-C-A	
В		if applicable	Please use	ET ECEDONIC	TNDHORD	V CIMITERCUITO			1 .	Employer Identification Number		
	H	ddress change	IRS label or print	COALITION,		Y CITIZENSHIP				<u>-1417</u>		
	H	I walle change 1 con 1 1 5 5 1 5 TEL CTD F TT NTW #500							phone nun			
	\mathbf{H}	nitial return	specific Instruc-	WASHINGTON						2-962		
	\vdash	ermination	tions.						F Acc	ounting nod:		Accrual
	\vdash	mended return			_		. 1	11 414	1	Other (spe		
	∐^	pplication pending	Section Charit	on 501(c)(3) orga table trusts mus	anizations and t attach a con	d 4947(a)(1) nonexempt npleted Schedule A	t	H and I are not appl H (a) Is this a gro				X No
			(Form	1 990 or 990-EZ).				H (b) If 'Yes,' enter				21 110
G	Web	site: ► WWW.	EICC.I	NFO				H (C) Are all affili			Yes	No
J	Orga	anization type		_			_]	(If 'No,' atta	ich a list S	ee instructi	ons)	→
_		ck only one)		X 501(c)	6 ◀ (insert n	o) 4947(a)(1) or	527	H (d) Is this a sep				_
K						oorting organization and		organization	covered b	y a group r	uling? Yes	X No
	gros	s receipts are	normally i	not more than \$2 a return, be sure	25,000 Aretu	irn is not required, but i		I Group Ex	 			
						·					ion is not require	
				b, 9b, and 10b to		845,531.					990-EZ, or 990-P	′F).
Pa				•		et Assets or Fund I	Balan	ices (See th	<u>e instri</u>	<u>ICTIONS</u>	. <u>) </u>	
	1			ants, and similar	amounts rece	eived.	1	ı				
				advised funds.	1-1		1a	 		} {		
		•		not included on li	•		1 b			1		
		•		(not included on ons (grants) (not		uno 1a)	1 d	 		1		
		Total (add lines 1a through 1d) (c.		ons (grants) (not			<u> </u>	1		1e		0.
						and contracts (from Pa	, irt VII	line 93)		2		<u>_</u>
	3	Membership			errinerit ices	ana contracts (nom r a	,			3	845.	,531.
	4	•		d temporary cash	ninvestments	•				4		
	5		-	from securities						5		
	_	Gross rents					6a	1				
	ь	Less: rental e	expenses				6b	t		1		
			•	oss) Subtract lin	ne 6b from lin	e 6a		•		6c		
R	7	Other investr	nent incon	ne (describe	>)	7		
REVENU	9.	Gross amoun	t from cal	es of assets other		(A) Securities		(B) Othe	er			
Ė	0 a	than inventor	WQ E C	EIVED	ື່ .		8a] [
Ü	b	Less cost or	other bas	EIVED	enses		8b					
	С	:Gain or ([psss)](a	ttach schedu	le) ļ <i>ģ</i>)		8 c			<u> </u>		
	d	Net gaih&r (I	oss)Albh	BbPae Abhellec, co	umns (A) and	(B) .		_		8d	<u> </u>	
	9	Special Wen	ts and act	ıvıtıes (attach s <u>ü</u>	hedule) If an	y amount is from gamir	ng, che	eck here 🕒				
	а	Gross revenu	عاسات	tuding \$ T	 	of contributions		1				
		reported on t	ne inc.				9a 9b					
				other than fundra			90			9c		
				y, less returns a		ne 9b from line 9a	10a	I		30		
		Less. cost of		=	ilu allowarice:	•	10b					
			-		ch.schedule) Sul	otract line 10b from line 10a	100			10 c		
	11		•	art VII, line 103)	cir scriedarcy ou	Stract line 105 from line 104				11		
	12			es 1e, 2, 3, 4, 5,	6c. 7. 8d. 9c.	10c. and 11				12	845,	531.
	13			line 44, column						13		
Σ	14	-		ral (from line 44						14		_
P E	15			44, column (D))						15		
EZ SES	16			(attach schedule)) .					16		
S	17	=		nes 16 and 44, c						17	665,	105.
_	18			he year Subtrac		line 12				18		426.
N S	19					m line 73, column (A))				19		0.
N S E E T T	20			ssets or fund ba	-					20		
Ś	21	_				lines 18, 19, and 20				21	180,	426.
	\ Fo					ee the senarate instruc	tions		TEE AO 1001	12/27/07		

for section 501(c)(3) and (4) or					T		
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		
22a Grants paid from donor advised funds (attach sch) (cash \$							
non-cash \$) If this amount includes foreign grants, check here 22b Other grants and allocations (att sch)	22 a						
(cash \$)							
If this amount includes foreign grants, check here	22 b						
23 Specific assistance to individuals (attach schedule)	23		- · · · · · · · · · · · · · · · · · · ·				
24 Benefits paid to or for members (attach schedule)	24						
25 a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25 a	0.					
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25 b	0.					
 Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 							
4958(c)(3)(B)	25 c	0.					
26 Salaries and wages of employees not included on lines 25a, b, and c	26						
27 Pension plan contributions not included on lines 25a, b, and c	27						
28 Employee benefits not included on lines 25a - 27	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		<u> </u>				
36 Occupancy37 Equipment rental and maintenance.	36		 		-		
38 Printing and publications	38						
39 Travel	39						
40 Conferences, conventions, and meetings	40						
41 Interest	41						
42 Depreciation, depletion, etc (attach schedule)	42	-					
43 Other expenses not covered above (itemize) a MANAGEMENT COMPANY FEES	43a	590,105.					
b SUPPLY CHAIN DECARBON.	43b	75,000.					
c	43c						
d	43d						
e	43e						
f	43 f						
9	43 g						
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	665,105.					
Joint Costs. Check ► If you are follow	ng SOP 98						
Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? N/A I Yes No If 'Yes,' enter (i) the aggregate amount of these joint costs \$, (ii) the amount allocated to Program services							
\$; (iii) the amount to Fundraising \$	allocated t	o Management and ger	neral \$, and (iv) th	e amount allocated		

	C1 . 1	/ D		complishments	/C H	
IDart III	NTSTAMANT A	t Uraarsm	SOMUCO A	···amplichmente	/ See the	Instructions
ir ai ciii	Juacentenic	ii Fibuiaiii	JEI VILE A	~0011101131111161113		111301 40010113.

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 prin	mary exempt purpose? So So their exempt purpose achie	SEE STATEMENT 1 evernents in a clear and concise manner State the number of	Program Service Expense (Required for 501(c)(3) and
clients served, publications issue	ed, etc. Discuss achievements to	evernents in a clear and concise manner. State the number of that are not measurable. (Section 501(c)(3) and (4) organ- also enter the amount of grants and allocations to others.)	(4) organizations and 4947(a)(1) trusts, but optional for others)
a SEE STATEMENT 2			opasinal to detect y
	·		
(Grants and allocations	\$) If this amount includes foreign grants, check here	
p			
(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	··	, , , , , , , , , , , , , , , , , , , ,	
(Grants and allocations	\$) If this amount includes foreign grants, check here	
f Total of Program Service	e Expenses (should equal lin	ie 44, column (B), Program services)	•

BAA

Form 990 (2007)

Not	e: V	Where required, attached schedules and amounts with column should be for end-of-year amounts only	n the d	escription	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing .				45	180,426
	46	Savings and temporary cash investments				46	
	47.	A consiste or consiste	اءحما				
		Accounts receivable	47a				
	b	Less: allowance for doubtful accounts	47b			47c	
	40	5					
		Pledges receivable .	48a				
		Less allowance for doubtful accounts	48b			48c	
		Grants receivable			49		
	50 a	 Receivables from current and former officers, directo employees (attach schedule) 	rs, trusi	ees, and key		50 a	
A	b	Receivables from other disqualified persons (as definant persons described in section 4958(c)(3)(B) (attack)	ed und	er section 4958(f)(1)) dule)		50 b	
ASSET	51 a	Other notes and loans receivable (attach schedule)	51 a				
Š	b	Less allowance for doubtful accounts	51 b			51 c	
	52	Inventories for sale or use .	-			52	
	53	Prepaid expenses and deferred charges.				53	
	54 a	Investments — publicly-traded securities	•	Cost FMV		54a	
	b	Investments – other securities (attach sch).	•	Cost FMV		54b	
	55 a	Investments - land, buildings, & equipment basis.	55 a				
	b	Less accumulated depreciation (attach schedule)	55 b			55 c	
	56	Investments - other (attach schedule)				56	
	57 a	Land, buildings, and equipment basis	57 a				
	b	Less accumulated depreciation (attach schedule)	57b			57 c	
ı	58 Other assets, including program-related investments						
		(describe ►		.)		58	
	59	Total assets (must equal line 74). Add lines 45 throu	gh 58		0.	59	180,426.
	60	Accounts payable and accrued expenses				60	
	61	Grants payable .				61	
<u>۲</u>	62	Deferred revenue .				62	
A B	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
힐	64 a	Tax-exempt bond liabilities (attach schedule)				64a	
<u> </u>	b	Mortgages and other notes payable (attach schedule) .				64b	
E S	65	Other trabilities (describe ►) [65	
	66	Total liabilities. Add lines 60 inrough 65			0.	66	0
	Orga	anizations that follow SFAS 117, check here ► X a	nd com	plete lines 67			
Ē		through 69 and lines 73 and 74					
	67	Unrestricted .				67	180,426.
ş	68	Temporarily restricted				68	<u> </u>
女のの世下の	69	Permanently restricted .				69	
	Orga	nizations that do not follow SFAS 117, check here ▶	□ a	nd complete lines		1	
- 1		70 through 74.					
FUZD	70	Capital stock, trust principal, or current funds.		70			
- 1	71	Paid-in or capital surplus, or land, building, and equip	oment f	und		71	
Ĕ	72	Retained earnings, endowment, accumulated income	er funds		72		
B女し女之 ひ辿り	73	Total net assets or fund balances. Add lines 67 throu 72 (Column (A) must equal line 19 and column (B) r	ıgh 69 d nust ea	or lines 70 through ual line 21)	0.	73	180,426.
٦	74	Total liabilities and net assets/fund balances. Add lir	nes 66 a	and 73	0.	74	180,426.

Form 990 (2007) ELECTRONIC INDUS	TRY CITIZENSHIP		26-:	141	7796 Page
Part IV-A Reconciliation of Revenuinstructions.)	e per Audited Financia	Statements with I	Revenue per Re	turr	1 (See the
a Total revenue, gains, and other support b Amounts included on line a but not on f 1Net unrealized gains on investments 2Donated services and use of facilities 3Recoveries of prior year grants 4Other (specify):	Part I, line 12 	b1 b2 b3		а	845,531
Add lines b1 through b4 c Subtract line b from line a		<u> b4 </u> 		b c	845,531
d Amounts included on Part I, line 12, but 1 Investment expenses not included on P 2Other (specify): Add lines d1 and d2		d1 d2		d	
e Total revenue (Part I, line 12). Add line	s c and d		•	е	845,531
Part IV-B Reconciliation of Expens	ses per Audited Financi	al Statements with	Expenses per F	₹etι	ırn
	Part I, line 17 [.] : I, line 20	b1 b2 b3		а	665,105
Add lines b1 through b4				b	
c Subtract line b from line a d Amounts included on Part I, line 17, but 1 Investment expenses not included on P 2Other (specify): Add lines d1 and d2		d1 d2		c	665,105
e Total expenses (Part I, line 17). Add lin	es c and d		•	е	665,105
Part V-A Current Officers, Director	rs, Trustees, and Key E	mployees (List each	person who was ar	n off	icer, director, trustee,
or key employee at any time du (A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions employee benefi plans and deferre compensation plan	to t	(E) Expense account and other allowances
SEE STATEMENT 3		0.		0.	0
			_		

Form 990 (2007) ELECTRONIC INDUSTRY C	ITIZENSHIP		26-141779	6	F	age 6	
Part V-A Current Officers, Directors, Tru	stees, and Key E	mployees (continue	d)		Yes	No	
75a Enter the total number of officers, directors, and trustees p				_			
b Are any officers, directors, trustees, or key em- listed in Schedule A, Part I, or highest comper A, Part II-A or II-B, related to each other through	osated professional an	id other independent coi	ntractors listed in Schedule	s			
identifies the individuals and explains the rela	tionship(s)		•	75 b	<u> </u>	X	
c Do any officers, directors, trustees, or key emplisted in Schedule A, Part II, or highest compensation from	acated professional an	id other independent coi	atractore lietad in Schadula	· I			
A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization'							
If 'Yes,' attach a statement that includes the information described in the instructions							
d Does the organization have a written conflict of			 	75 d		X	
Part V-B Former Officers, Directors, True Benefits (If any former officer, directeduring the year, list that person below a the instructions)	or, trustee, or kev emr	plovee received compen-	sation or other benefits (de	scribed	below) e	
(A) Name and address	(A) Name and address (B) Loans and Advances (C) Compensation (if not paid, enter -0-) (If not paid, enter -0-)						
NONE							
					_		
							
Part VI Other Information (See the Insti	ructions.)		1I		Yes	No	
76 Did the organization make a change in its acti		onducting activities?					
If 'Yes,' attach a detailed statement of each ch	nange			76	_	X	
77 Were any changes made in the organizing or g		out not reported to the II	RS? .	77_		Х	
If 'Yes,' attach a conformed copy of the chang		O or more during the ver	or on areal by this return?	78a	-	X	
78a Did the organization have unrelated business of bild 'Yes,' has it filed a tax return on Form 990-T		o or more during me yes	s: covered by this return.	78b	N/		
,	-	·		100			
79 Was there a liquidation, dissolution, terminatio year? If 'Yes,' attach a statement	n, or substantial contr	action during the		79		X	
80 a Is the organization related (other than by asso	ciation with a statewid	le or nationwide organiz	ation) through common			v	
membership, governing bodies, trustees, office	ers, etc, to any other e	exempt or nonexempt or	ganization?	80 a		_ X _	
b If 'Yes,' enter the name of the organization		heck whether it is	xempt or nonexempt	-			
81 a Enter direct and indirect political expenditures).			
b Did the organization file Form 1120-POL for th		•		81 b		X	

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Form **990** (2007)

Form 990 (2007) ELECTRONIC INDUSTRY CITIZENSHIP	26-141779	ŝ	Page 7
Part VI Other Information (continued)			Yes No
82 a Did the organization receive donated services or the use of materials, equipment, or faciliti substantially less than fair rental value?	es at no charge or at	82 a	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 N/A		
83a Did the organization comply with the public inspection requirements for returns and exemp	tion applications?	83 a	N/A
b Did the organization comply with the disclosure requirements relating to quid pro quo contr	ibutions?	83 b	N/A
84a Did the organization solicit any contributions or gifts that were not tax deductible?		84 a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such not tax deductible?	contributions or gifts were	84 b	N/A
85 a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		85 a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	N/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless waiver for proxy tax owed for the prior year	the organization received a		
c Dues, assessments, and similar amounts from members	85c N/A		
d Section 162(e) lobbying and political expenditures	85 d N/A	Ī	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A		
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 g	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 read dues allocable to nondeductible lobbying and political expenditures for the following tax year?	sonable estimate of	85 h	N/A
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on			
line 12	86a N/A		
b Gross receipts, included on line 12, for public use of club facilities	86b N/A		
87 501(c)(12) organizations Enter a Gross income from members or shareholders .	87a N/A		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b N/A	ŀ	
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable or an entity disregarded as separate from the organization under Regulations sections 301.	corporation or partnership, 7701-2 and 301,7701-3?		
If 'Yes,' complete Part IX		88 a	X
b At any time during the year, did the organization, directly or indirectly, own a controlled ent section 512(b)(13)? If 'Yes,' complete Part XI	ity within the meaning of	88 b	х
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year			
section 4911 $ ightharpoonup N/A$; section 4912 $ ightharpoonup N/A$, section	4955 <u>N/A</u>		
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 exc during the year or did it become aware of an excess benefit transaction from a prior year? explaining each transaction	ess benefit transaction If 'Yes,' attach a statement 	89b	N/A
c Enter Amount of tax imposed on the organization managers or disqualified persons during	the		-
year under sections 4912, 4955, and 4958.	► N/A ► N/A	İ	
d Enter: Amount of tax on line 89c, above, reimbursed by the organization			<u>X</u>
e All organizations. At any time during the tax year, was the organization a party to a prohibit		89e 89f	$\frac{x}{x}$
f All organizations. Did the organization acquire a direct or indirect interest in any applicable	insurance contract?	031	
g For supporting organizations and sponsoring organizations maintaining donor advised fund	s. Did the supporting		
organization, or a fund maintained by a sponsoring organization, have excess business hole the year?	dings at any time during	89 g	X
90 a List the states with which a copy of this return is filed NONE			
	-		
b Number of employees employed in the pay period that includes March 12, 2007 (See instructions)		90 ь	0
91a The books are in care of ► NAVISTA, INC Located at ► 1155 15TH STREET, NW , SUITE 500 WHASHINGTON DC	umber ► 202-962-016 ZIP + 4 ► 20005		
		-	Yes No
b At any time during the calendar year, did the organization have an interest in or a signature financial account in a foreign country (such as a bank account, securities account, or other	financial account)?	91 b	X
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 o Financial Accounts.			200 (0007)
BAA		Form !	990 (2007)

		2007) ELECTRONIC INDUSTE		SHIP			26-141	17796		Page 8
		Other Information (continu							Ye	
		y time during the calendar year, di s,' enter the name of the foreign count		ion maintai	n an office	e outside of the	United States?	. [<u>9</u>	1 c	<u> </u>
		on 4947(a)(1) nonexempt charitable			lieu of Fo	rm 1041 — Chec			N/A	
		enter the amount of tax-exempt inte	-				► 92	1	, 22	N/A
		Analysis of Income-Produc						<u> </u>		24, 11
	• • • • •			business in			ection 512, 513, or 51	4		
		r gross amounts unless ndicated	(A) ((C) Exclusion code	(D) Amount	Relate	(E) ed or ex tion ince	empt ome
93	Pro	gram service revenue:		-						
ä	a									
t	b									
•	c									
c				_		_				
	-			_						
		dicare/Medicaid payments								
		& contracts from government agencies								
94		mbership dues and assessments		_					845,	531.
95		est on savings & temporary cash invmnts						 		
96		dends & interest from securities						 		
97		rental income or (loss) from real estate:				<u></u>		 		
		t-financed property.				 		+		
		debt-financed property				 				
98		rental income or (loss) from pers prop								
99	Oth	er investment income						 		
100	Gan othe	n or (loss) from sales of assets er than inventory								
101	Net ı	ncome or (loss) from special events						_		
102		s profit or (loss) from sales of inventory								
103	Oth	er revenue a								
Ł	·									
C										
C										
404									045	F 2 1
104		otal (add columns (B), (D), and (E))	1 (5)		·-					531.
		al (add line 104, columns (B), (D),		10					845,	<u>531.</u>
-		105 plus line 1e, Part I, should equ				ampt Burnes	as (Saa tha instri	uotione)		
Part Line										
Litte	NO.	Explain how each activity for whice of the organization's exempt purp	h income is rep oses (other tha	ported in co in by provid	lumn (E) (ing funds	of Part VII contr for such purpos	ibuted importantly to es).	the accomp	olishme	ent
N/A		or the ergonization of enempt purp				рапра				
147.11			-					· · · · ·		
										.
Part	ΪX	Information Regarding Tax	able Subsid	liaries and	d Disrec	arded Entition	es (See the instru	ictions.)		
		(A)	(B)		(0		(D)		(E)	
Na	ma	address, and EIN of corporation,	Percentage	nf			Total	En	d-of-yea	ar
140		nership, or disregarded entity	ownership inte		Nature of	activities	income		assets	3 1
N/A				8						
				8						
				ક						
				્ર						
Parl	ŧΧ	Information Regarding Tra	nsfers Asso	ciated wi	th Perso	onal Benefit	Contracts (See th	ne instruc	tions.)
a D	od the	organization, during the year, receive any fu						Ye	s X	No
b C	old th	e organization, during the year, pa	y premiums, d	rectly or inc	directly, or	n a personal bei	nefit contract?	Ye	5 X	No
No	te: //	'Yes' to (b), file Form 8870 and Fo	rm 4720 (see	instructions))					
BAA							TEEA0108L 12/2	27/07 Fo	rm 990	(2007)

						Yes	No
106	Did the reporting organization make any transfers to 'Yes,' complete the schedule below for each control	a controlled entity as defined entity	ed in section 5	12(b)(13) of the (Code? If		х
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	Desc tr	(C) ription of ansfer	Amount o	D) of tran	sfer
а							
b							
С							
	Totals						
107	Did the reporting organization receive any transfers 'Yes,' complete the schedule below for each control	from a controlled entity as o	defined in secti	on 512(b)(13) of	the Code? If	Yes	No X
	(A) Name, address, of each controlled entity	(B) Employer identification Number	Desc tra	(C) ription of ansfer	(I Amount o	(D) of transfer	
а		-					
b		-					
С		-					
	Totals						
108	Did the organization have a binding written contract annuities described in question 107 above?	ın effect on August 17, 2006	, covering the	nterest, rents, ro	yalties, and	Yes	No X
Pleas Sign Here	Under penalties of perjury, I declare that I have examined this retrue, correct, and complete Declaration of preparer (other than	eturn, including accompanying schedul officer) is based on all information of v	es and statements, which preparer has a	and to the best of m, hand knowledge		lief, it is	
Paid Pre-	Preparer's signature Date Date Date Preparer's self-employed Proparer's Preparer's Pre						
	Firm's name (or yours if self-employed). > 9401 KEY WEST AVENUE						
Only	ZIP + 4 ROCKVILLE, MD 20850			Phone no ► (30	01) 948-4	400	

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FEDERAL STATEMENTS

ELECTRONIC INDUSTRY CITIZENSHIP COALITION. INC.

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STATEMENT 1 FORM 990 , PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE ELECTRONICS INDUSTRY CITIZENSHIP COALITION (EICC) AND THE MEMBER COMPANIES PROMOTE PROGRESSIVE CORPORATE SOCIAL RESPONSIBILITY PROGRAMS. THEIR MISSION IS TO IMPROVE WORKING CONDITIONS AND ENVIRONMENTAL STEWARDSHIP THROUGHOUT THE ELECTRONICS SUPPLY CHAIN. THIS GROUP SUPPORTS A COMMON "CODE OF CONDUCT" FOR ELECTRONICS COMPANIES - THE EICC CODE. THE CODE COVERS EXPECTATIONS FOR PERFORMANCE ACROSS A RANGE OF COMPANY PRACTICES, INCLUDING LABOR, HEALTH & SAFETY, ENVIRONMENTAL PRACTICES, ETHICS AND MANAGEMENT SYSTEMS AND IS RAPIDLY BECOMING THE INDUSTRY STANDARD FOR SOCIAL RESPONSIBILITY IN THE ELECTRONICS SECTOR.

STATEMENT 2 FORM 990, PART III, LINE A STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION

GRANTS AND PROGRAM SERVICE

ALLOCATIONS EXPENSES

SUPPLY CHAIN DECARBONIZATION (DCSC): EXAMINES THE LOGISTICS AND TRANSPORT SECTOR'S CARBON FOOTPRINT, AND THE PRINCIPAL OPPORTUNITIES FOR REDUCTION OF EMISSIONS. RESEARCHED AND CO-WRITTEN WITH ACCENTURE, THE REPORT ASSESSES THE LEGAL AND COMMERCIAL DRIVERS FOR SUPPLY CHAIN DECARBONIZATION. IT ESTABLISHES A FRAMEWORK FOR MEANINGFUL CUTS IN EMISSIONS ACROSS END-TO-END SUPPLY CHAINS AND, THROUGH SIMPLE SCORECARDS, ANALYZES THE RELATIVE IMPORTANCE OF THE MAIN OPPORTUNITIES FOR CHANGE.

INCLUDES FOREIGN GRANTS: NO

\$ 0. \$ 0.

STATEMENT 3 FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
JOHN GABRIEL IBM CORPORATION SOMERS, NY 10589	CHAIRMAN 0	\$ 0.	\$ 0.	\$ 0.
SARA BROADBENT SEAGATE TECHNOLOGY SCOTTS VALLEY, CA 95066	DIRECTOR 0	0.	0.	0.
KATHLEEN EDMOND, ESQ. BEST BUY COMPANY, INC. RICHFIELD, MN 55423	DIRECTOR 0	0.	0.	0.

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STATEMENT 3 (CONTINUED) FORM 990, PART V-A LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	
ERIC AUSTERMANN JABIL CIRCUIT INC. AUBURN HILLS, MI 48326	DIRECTOR 0	\$ 0.	\$ 0.	\$ 0.
KATE RIGGE, PH.D. STMICROELECTRONICS NV GENEVA, SWITZERLAND,	DIRECTOR 0	0.	0.	0.
BRIAN GLAZEBROOK CISCO SYSTEMS INC. SAN JOSE, CA 95134	DIRECTOR 0	0.	0.	0.
DANIELLE HARDER MICROSOFT CORPORATION REDMOND, WA 98052	DIRECTOR 0	0.	0.	0.
BRADLEY JOHN BENNETT INTEL CORPORATION HILLSBORO, OR 97124	DIRECTOR 0	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.