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Form **990**

Department of the Treasury

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

2010

OMB No 1545-0047

Open to Public
Inspection

Address change	B Che	the 2010	calendar year, or tax year begi	nning 01-01-2010 and ending 12-31-20	10	D Employe	r identification number
Name change	_		e C Name of organization EDISON ELECTRIC INSTITUTE IN	IC			
Number and street (or P O box if mail is not delivered to street address)		-	Doing Business As				
Terminated	_					E Telephon	ie number
Cay or town, state or country, and ZPP + 4 WORRINGTON, DC 200042696 F Name and address of principal officer THO MAS R KUHN 701 PENNSYLVANIA AVENW WASHINGTON, DC 200042696 Tax-exempt status Sol(g)(3) F 501(g) 6	_			if mail is not delivered to street address)	Room/suite	(202) 50	08-5000
### ASPIRATION, DC 200042696 F Name and address of principal officer THO MAS R KUHN 701 PENNSYLVANIA AVE NW WASHINGTON, DC 200042696	_		City or town, state or country, a	and ZIP + 4		G Gross rece	eipts \$ 167,547,750
F Name and address of principal officer THO MAS R KUHN 701 PENNSYLVANIA AVE NW WASHINGTON, DC 200042696 Tax-exempt status	_		WASHINGTON, DC 200042696	···			
THO MAS R KUHN 701 PERNSYLVANIA AVE NW WASHINGTON, DC 200042696 Tax-exempt status		·		principal officer	H(a) Is this a	group return for a	ffiliates 2 Ves V No
WASHINGTON, DC 200042696			THOMAS R KUHN		11(4) 15 (1115 4	r group recurrior a	illiates (Tes) No
Websit					1		
Website: ► WWW EEI ORG					_		
Part I Summary Briefly describe the organization is mission or most significant activities TO PROVIDE A FORUM FOR THE ELECTRIC UTILITY INDUSTRY 2 Check this box Fifthe organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 4 4 4 4 4 4 4 4 4	Tax	c-exempt sta	ıs 501(c)(3) 🗸 501(c)(6)	(insert no) 4947(a)(1) or 527			
Part Summary	w e	ebsite: 🕨	/WW EEI ORG				_
1 Briefly describe the organization's mission or most significant activities TO PROVIDE A FORUM FOR THE ELECTRIC UTILITY INDUSTRY 2 Check this box				ation Cother 🗠	L Year of for	mation 1933	M State of legal domicile V
TO PROVIDE A FORUM FOR THE ELECTRIC UTILITY INDUSTRY 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a)	Pai	iti Sı	mmary				
2 Check this box			_	-			
Net unrelated business revenue from Part VIII, column (C), line 12	9	<u>10 P</u>	OVIDE A FOROM FOR THE EL	LECTRIC OTTELLT INDOSTRI			
Net unrelated business revenue from Part VIII, column (C), line 12							
Net unrelated business revenue from Part VIII, column (C), line 12							
Net unrelated business revenue from Part VIII, column (C), line 12		2 Chec	this box 🔭 if the organization	n discontinued its operations or disposed	of more than 2	5% of its net	t assets
Net unrelated business revenue from Part VIII, column (C), line 12	'	3 Numb	er of voting members of the gov	erning body (Part VI, line 1a)		3	6
Net unrelated business revenue from Part VIII, column (C), line 12	{	4 Numb	er of independent voting membe	ers of the governing body (Part VI, line 1)	4	6
Net unrelated business revenue from Part VIII, column (C), line 12		5 Total	number of individuals employed	ın calendar year 2010 (Part V, line 2a)		5	20
Net unrelated business taxable income from Part VIII, column (C), line 12		6 Total	number of volunteers (estimate	ıfnecessary)		6	10
8 Contributions and grants (Part VIII, line 1h)	•	7a Total	ınrelated busıness revenue fror	m Part VIII, column (C), line 12		7 a	676,65
8 Contributions and grants (Part VIII, line 1h)		b Net u	related business taxable incom	ne from Form 990-T, line 34		7t	-275,53
9 Program service revenue (Part VIII, line 2g)					Prio	r Year	Current Year
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8 Cor	tributions and grants (Part VIII	[, line 1 h)		O	
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	를	9 Pro	gram service revenue (Part VII)	I, line 2g)		71,374,802	78,194,88
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9. 9.	10 Inv	estment income (Part VIII, coli	umn (A), lines 3, 4, and 7d)		3,932,936	3,703,21
12)	Ť	11 Oth	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0)
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			-		ne		0.1.000.00
14 Benefits paid to or for members (Part IX, column (A), line 4)							
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5- 10) 16a Professional fundraising fees (Part IX, column (A), line 11e)			, ,	, , , , , , , , , , , , , , , , , , , ,			
10) 16a Professional fundraising fees (Part IX, column (A), line 11e)					_	0	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 36,473,683 41,121,1 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 72,081,681 76,400,4 19 Revenue less expenses Subtract line 18 from line 12 3,226,057 5,497,6	88		ries, other compensation, empl	oyee benefits (Part IX, column (A), lines	5-	34,471,863	34,240,004
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 36,473,683 41,121,1 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 72,081,681 76,400,4 19 Revenue less expenses Subtract line 18 from line 12 3,226,057 5,497,6	ě	·	essional fundraising fees (Part	IX, column (A), line 11e))
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 36,473,683 41,121,1 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 72,081,681 76,400,4 19 Revenue less expenses Subtract line 18 from line 12 3,226,057 5,497,6	⊕						
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 72,081,681 76,400,4 19 Revenue less expenses Subtract line 18 from line 12 3,226,057 5,497,6	ם ן					36 473 683	41 121 10
19 Revenue less expenses Subtract line 18 from line 12 3,226,057 5,497,6					•		
Year Find of Year 20 Total assets (Part X, line 16)	,	25 1101	The less expenses subtrace in		Beginning	· ·	, ,
20 Total assets (Part X, line 16)	5 a					ear	
では、 21 Total liabilities (Part V. line 26) 70.850 034 70.850 03	Sec es					· ·	
21 Total habilities (Falt A, line 20)	Bafances					70,850,034	79,339,27
	and Balances	21 Tot					
_		21 Tot 22 Net	assets or fund balances Subtra			19,608,647	19,900,40
22 Net assets or fund balances Subtract line 21 from line 20	S GC S					90,458,681 70,850,034	· · ·
	Par nder nowl	21 Tot 22 Net t II Si penalties o	assets or fund balances Subtra	act line 21 from line 20		tatements, and	d to the best of my
2011-07-22	Par Inder	21 Tot 22 Net tII Si penalties o edge and be edge.	assets or fund balances Subtra gnature Block f perjury, I declare that I have exa lief, it is true, correct, and comple	act line 21 from line 20	er) is based on a	tatements, and	d to the best of my
2011 07 22	Par Inder Inowl	21 Tot 22 Net 111 Si penalties of edge and be edge.	assets or fund balances Subtragnature Block T perjury, I declare that I have exalief, it is true, correct, and comple	act line 21 from line 20	eer) is based on a	tatements, and all information 11-07-22	d to the best of my
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Signature of officer Date JOHN S SCHLENKER TREASURER/CFO Type or print name and title Print/Type preparer's name KAREN GRIES Preparer's signature KAREN GRIES Date Check if self-employed Figure PTIN	Par Inder Inowl Dign	21 Tot 22 Net 111 Si penalties of edge and be edge. * Print/7 prepal	assets or fund balances Subtra gnature Block f perjury, I declare that I have exa- lief, it is true, correct, and comple ***** gnature of officer OHN S SCHLENKER TREASURER/CFO Ope or print name and title type er's name KAREN GRIES	mined this return, including accompanying ete. Declaration of preparer (other than office)	20 Date	tatements, and all information 11-07-22 ate	d to the best of my n of which preparer has an
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Signature of officer JOHN S SCHLENKER TREASURER/CFO Type or print name and title Print/Type preparer's name KAREN GRIES Preparer's signature KAREN GRIES Preparer's signature KAREN GRIES Prim's name LARSONALLEN LLP Firm's address 2000 SOLITH OLINCY ST SUTTE 150	Par Inder Inowl Bign Here	21 Tot 22 Net 111 Si penalties of edge and be edge. Print/7 prepair Firm's	assets or fund balances Subtra gnature Block f perjury, I declare that I have examined, it is true, correct, and complete. ***** gnature of officer OHN S SCHLENKER TREASURER/CFO Type or print name and title type er's name KAREN GRIES name LARSONALLEN LLP	mined this return, including accompanying ete. Declaration of preparer (other than office) Preparer's signature KAREN GRIES	20 Date	tatements, and all information 11-07-22 ate	d to the best of my n of which preparer has an

Par	t III		Program Service A O contains a response	ccomplishments to any question in this l	Part III	
	Brief	ly describe the organ	<u> </u>			<u> </u>
EEI AUT	IS THE	ASSOCIATION OF	AMERICA'S SHAREH	STRY DATA TO ITS ME	TRIC UTILITIES THE INSTITUMBERS, CONGRESS, GOVERN	
2	Did th	ne organization unde rior Form 990 or 990	rtake any significant pr	ogram services during t	he year which were not listed on	┌ Yes ┌ No
	If "Ye	s," describe these n	ew services on Schedu	le O		
3	servi	ces?		significant changes in h	ow it conducts, any program	┌ Yes ┌ No
	If "Ye	s," describe these c	hanges on Schedule O			
4	Secti	on 501(c)(3) and 50	1(c)(4) organizations a		s three largest program service: trusts are required to report the ogram service reported	
4a	(Cod	e) (Expenses \$	ıncludıng grants o	of \$) (Revenue	\$)
	CLIM TRAN	ATE, CLEAN WATER, TOX ISPORTATION, RISK ASSE	ICS RÉLEASE INVENTORY, C	LEAN COAL TECHNOLOGIES, I IT, AND WASTE ACTIVITIES A	S COMPRISED OF A HOST OF ACTIVITIE NATURAL GAS, HYDROPOWER, OTHER F IS THE ASSOCIATION FOR SHAREHOLDE	RENEWABLE FUELS, RAIL
	(6.1) /5		(h	
4b	(Cod) (Expenses \$	including grants o		,
	NORT INCL ECON	TH AMERICAN ELECTRIC JDES ACTIVITIES ASSOCI	RELIABILITY CORPORATION ATED WITH THE IMPLEMENT GENERAL ENERGY POLICY AD	(NERC), AND THE NATIONAL TATION OF THE ENERGY POLI	DLVING THE FEDERAL ENERGY REGULAT ASSOCIATION OF REGULATORY COMMI CY ACT OF 2005 AND RELATED LITIGAT ON FOR SHAREHOLDER-OWNED ELECTE	SSIONERS (NARUC) IT ALSO ION, SUBSIDY ISSUES, MODELING,
4c	(Cod) (Expenses \$	including grants of	, ,	,
	STAN	DARDS BOARD (FASB) IS		S, AND STUDIES AS THE ASS	G WALL STREET OUTREACH, TAX ISSUE OCIATION FOR SHAREHOLDER-OWNED	
	O th	ar program carvicas	(Describe in Schedule	0.)		
-ru		en program services penses \$	•	grants of \$) (Revenue \$)
—— 4е		ıl program service ex		<u>-</u>	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,
	1011	p.og.a scriice ex	P			

Part IV Checklist of Required Schedules

			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		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		Νο
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	Yes	
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? <i>If</i> "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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		Νo
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		No
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		Νo
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 Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νo
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		Νo
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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 U S? If "Yes," complete Schedule F, Parts II and IV.	15		No
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 U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Νo
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		N o
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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-24d and complete Schedule K. If "No," go to line 25	24a		N o
b	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	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		N o
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		No
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		No
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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	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			
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		
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	37		N o
38	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	38	Yes	

Part V	Statements	Regarding	Other I	RS Filings	and Tax	Compliance

	rt V Statements Regarding Other IRS Filings and Tax Compliance			Page .
ı G	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			"
	1a 224	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
Ju	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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		Νο
Ь	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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
c_	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
6a	organization solicit any contributions that were not tax deductible?	ба		NO
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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?	7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	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	1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
Ū	contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
h	required?	7g		
••	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting 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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	4		
ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
4 -	year 12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	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 Enter the amount of reserves on hand	1		
_	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	ĺ	l No

b If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*.

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI										. F	7
---	--	--	--	--	--	--	--	--	--	-----	---

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax vear			
b	year			
U	Independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the		, 00	
J	year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		Νo
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			
	venue Code.)		Yes	No
10-	Does the organization have local chapters, branches, or affiliates?	10a	165	No
	-	10a		NO
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		No
h	Describe in Schedule O the process, if any, used by the organization to review this Form 990	114		140
J	Describe in Schedule of the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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	Yes	
	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		103	
	Trives to fine 150 or 150, 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		Νo
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
10	(3)s only) available for public inspection Indicate how you make these available Check all that apply Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization >
 JOHN S SCHLENKER
 701 PENNSYLVANIA AVE NW

WASHINGTON, DC 200042696 (202) 508-5540

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, and current key employees 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
- 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

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

(A) Name and Title	(B) Average hours	Posi t	tion (that a	(che		l I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) ANTHONY F EARLEY JR CHAIR	3 00	х		х				0	0	0
(2) RICHARD C KELLY VICE CHAIR/CHAIR	3 00	х						0	0	0
(3) THOMAS F FARRELL II VICE CHAIR	3 00	х		Х				0	0	0
(4) LEWIS HAY III VICE CHAIR	3 00	х		Х				0	0	0
(5) GREGORY ABEL DIRECTOR	1 00	х						0	0	0
(6) ANTHONY J ALEXANDER DIRECTOR	1 00	х						0	0	0
(7) PAUL M BARBAS DIRECTOR	1 00	х						0	0	0
(8) PHILIP BARNHARD IV DIRECTOR	1 00	х						0	0	0
(9) PAUL J BONAVIA DIRECTOR	1 00	х						0	0	0
(10) DONALD E BRANDT DIRECTOR	1 00	х						0	0	0
(11) KEVIN BURKE DIRECTOR	1 00	х						0	0	0
(12) MICHAEL J CHESSER DIRECTOR	1 00	х						0	0	0
(13) THEODORE F CRAVER JR DIRECTOR	1 00	х						0	0	0
(14) PETER A DARBEE DIRECTOR	1 00	х						0	0	0
(15) MELISSA DAVIS DIRECTOR	1 00	х						0	0	0
(16) PETER B DELANEY DIRECTOR	1 00	Х						0	0	0

Form 990 (2010) Page **8** Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (C) (D) (B) (E) (F) Name and Title Average Position (check all Reportable Reportable Estimated that apply) compensation hours compensation amount of other per from the from related compensation Highest compensated employee organızatıon (Worganizations week from the Institutional (W- 2/1099-Э O 2/1099-MISC) organization and ndividual trustee (describe director hours MISC) related employee for organizations mer related Trustee organizations ın Schedule 0) (17) JOSE M DELGADO 1 00 Χ 0 DIRECTOR (18) PETER J DONLEAVY 1 00 Χ 0 DIRECTOR (19) CHRISTOPHER L DUTTON 1 00 Χ 0 DIRECTOR (20) NIEL C ELLERBROOK 1 00 Х 0 DIRECTOR (21) DAVID R EMERY 1 00 Х 0 DIRECTOR (22) JOHN D ERICKSON 1 00 Χ 0 DIRECTOR (23) PAUL J EVANSON 1 00 Χ 0 0 **DIRECTOR** (24) PEGGY Y FOWLER 1 00 Χ 0 DIRECTOR (25) WILLIAM L GIPSON 0 1 00 Х 0 DIRECTOR (26) DAVID GOODIN 1 00 Χ 0 0 DIRECTOR (27) LON R GREENBERG 1 00 Χ 0 DIRECTOR (28) PAUL HANRAHAN 1 00 Χ 0 DIRECTOR (29) MICHAEL J HANSON Χ 0 DIRECTOR (30) WILLIAM D HARVEY Х 0 1 00 DIRECTOR (31) CURTIS L HEBERT JR 1 00 Χ 0 DIRECTOR (32) SHERRILL W HUDSON 0 1 00 Χ 0 DIRECTOR (33) RALPH IZZO 1 00 Χ 0 DIRECTOR (34) WILLIAM D JOHNSON 1 00 Х 0 0 DIRECTOR (35) DAVID W JOOS 1 00 Х 0 0 0 DIRECTOR (36) J LAMONT KEEN 1 00 Χ 0 DIRECTOR (37) THOMAS B KING 1 00 Х 0 DIRECTOR (38) GALE E KLAPPA Χ 0 DIRECTOR (39) STEVEN V LANT 1 00 Х 0 0 DIRECTOR (40) CONSTANCE H LAU 1 00 Χ 0 DIRECTOR (41) JAMES P LAURITO 1 00 Х 0 DIRECTOR (42) MICHAEL H MADISON 1 00 Χ 0 DIRECTOR (43) THOMAS J MAY 1 00 Х 0 0 DIRECTOR (44) DAVID M MCCLANAHAN 1 00 Х 0 0 0 DIRECTOR (45) TIM MCLEOD 1 00 Χ 0 DIRECTOR (46) JAMES H MILLER 1 00 Х 0 DIRECTOR (47) WILLIAM B MOORE 0 DIRECTOR (48) MICHAEL G MORRIS 1 00 Х 0 0 0 DIRECTOR (49) SCOTT L MORRIS 1 00 Χ 0 DIRECTOR (50) RICHARD A MUENCH 1 00 Х 0 0 DIRECTOR (51) EDWARD R MULLER 1 00 Χ 0 DIRECTOR (52) EILEEN O ODUM Х 0 1 00 0 **DIRECTOR** (53) JAMES S PIGNATELLI 1 00 0 Х DIRECTOR (54) JAMES J PIRO 1 00 Χ DIRECTOR (55) MARY G POWELL 1 00 Х 0 DIRECTOR (56) JOHN PROCARIO 0 DIRECTOR (57) GARY L RAINWATER 1 00 Χ 0 DIRECTOR (58) DAVID M RATCLIFFE 1 00 Χ 0 DIRECTOR (59) STEPHEN P REYNOLDS 1 00 Х DIRECTOR (60) JOSEPH M RIGBY 1 00 Χ 0 DIRECTOR (61) JAMES E ROGERS 1 00 Χ 0 DIRECTOR (62) JOHN W ROWE 1 00 Х 0 DIRECTOR (63) ROBERT W ROWE 1 00 Χ DIRECTOR (64) CHARLES A SCHROCK 1 00 0 Χ DIRECTOR (65) MAYO A SHATTUCK III 1 00 Χ 0 DIRECTOR (66) WILLIAM H SHEPPARD 0 1 00 Х DIRECTOR (67) DONALD J SHIPPAR 1 00 Χ 0 **DIRECTOR** (68) CHARLES W SHIVERY 1 00 Х 0 DIRECTOR (69) VICTOR A STAFFIERI 1 00 Х 0 DIRECTOR (70) JEFFRY E STERBA 1 00 Χ 0 DIRECTOR (71) JAMES P TORGERSON 1 00 Х 0 DIRECTOR (72) THOMAS R VOSS Χ 1 00 DIRECTOR (73) JOSEPH L WELCH 1 00 Х 0 DIRECTOR (74) BRUCE A WILLIAMSON 1 00 Χ 0 DIRECTOR (75) GARY J WOLTER 1 00 Х 0 DIRECTOR (76) DENNIS R WRAASE 1 00 Χ 0 DIRECTOR (77) MICHAEL W YACKIRA 1 00 Χ 0 DIRECTOR (78) JOHN F YOUNG 1 00 Х 0 DIRECTOR (79) ROBERT H YOUNG Х 1 00 0 DIRECTOR (80) THOMAS R KUHN 3,084,410 Х 45 00 922,483 PRESIDENT (81) DAVID K OWENS 45 00 Χ 796,385 84,636 **EXECUTIVE VICE PRESIDENT** (82) BRIAN WOLFF 45 00 Х 693,507 0 83,060 EXECUTIVE VICE PRESIDENT (83) LYNN H LEMASTER 45 00 Χ 653,213 73,748 SENIOR VP, POLICY (84) EDWIN R ANTHONY Х 285,738 56,999 45 00 VP, CORP AFFAIRS (85) EDWARD H COMER Χ 45 00 377,020 67,911 VP, GENERAL COUNSEL (86) JOHN J EASTON 45 00 Χ 312,786 57,656 VP, INT'L PROGRAMS (87) MARY D MILLER Х 192,488 45 00 324,219 VP, HUMAN RESOURCES (88) PATRIC D O'KEELEY Х 549,612 45 00 46,835 TREASURER/CFO (89) QUINLAN SHEA 66,092 45 00 Х 306,953 EXEC DIR, ENVIRONMENT (90) RON CLEMENTS 45 00 Χ SENIOR DIRECTOR, GOV AFFA (91) KATHRYN STECKELBERG Х 302,797 45 00 57,337 EXEC DIR, GOV'T RELATIONS (92) JAMES FAMA 45 00 Χ 301,271 69,819 **EXEC DIR, ENERGY DELIVERY** (93) RICHARD MCMAHON Χ 73,562 45 00 326,299 0 EXEC DIR, FINANCE/ENERGY S (94) M SADEGH RAZEGHI 44,852 45 00 Х 225,273 0 CIO (95) JOHN S SCHLENKER 45 00 Χ 217,748 63,649 CONTROLLER (96) MARSHALL BRIER 2 00 Х VP, POLICY (97) WALKER NOLAN 40 00 PAST EXEC VP, POLICY 1b Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) 8,757,231 0 1,961,127 d Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization \blacktriangleright 15 Yes Did the organization list any former officer, director or trustee, key employee, or highest compensated employee 3 Νo For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 Νo **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than

HUNTON & WILLIAMS 1900 K STREET WASHINGTON, DC 20006	CONSULTING	7,433,283
VENABLE LLP 575 SEVENTH STREET WASHINGTON, DC 20004	CONSULTING	3,301,688
SKADDEN ARPS 1440 NY AVENUE NW WASHINGTON, DC 20005	CONSULTING	829,728
OCE BUSINESS SERVICES 855 AVENUE OF THE AMERICAS NEW YORK, NY 10001	BUSINESS SERVICE CENTER	474,172
ICF RESOURCES INC 9300 LEE HIGHWAY FAIRFAX, VA 22031	CONSULTING	463,415
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►5) who received more than	
		Form 990 (2010)

(B)

Description of services

(C)

Compensation

\$100,000 of compensation from the organization

(A)

Name and business address

Form 9							Pa	ge 9
Part	V111	Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants similar amounts not included above Noncash contributions included in I	1c . 1d 1e ., and 1f e nes 1a-1f \$					
Program Service Revenue	c d e	MEMBERSHIP DUES MEETINGS PROGRAMS ADVERTISING PUBLICATIONS All other program service re	venue	900099 900099 900099 541800 511190		7,634,987 3,098,826	676,659	
<u>- দ</u>	3	Total. Add lines 2a-2f. Investment income (including and other similar amounts) Income from investment of tax-extra Royalties	ng dividends, interest empt bond proceeds	(II) Personal	78,194,885 3,641,163			3,641,163
	b d	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss)	(ı) Securities	(II) O ther				
	b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)			62,050			62,050
Other Revenue	b c 9a b c 10a b c	Less direct expenses . Net income or (loss) from ga Gross sales of inventory, les returns and allowances . Less cost of goods sold . Net income or (loss) from sa Miscellaneous Revenue A All other revenue Total. Add lines 11a-11d	line 1c) a b ndraising events	Business Code				
	12	Total revenue. See Instructi	ons		81,898,098	77,518,226		3,703,213

Form 990 (2010) Page 10								
Par	t IX Statement of Functional Expenses							
	Section 501(c)(3) and 501(c)(4) organizations mus			(B)				
	ll other organizations must complete column (A) but are not required to c		s (B), (C), and (B)	(D). (C)	(D)			
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses		Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,039,336						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22							
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	9,211,247						
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	17,481,266						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,434,508						
9	Other employee benefits	1,736,104						
10	Payroll taxes	1,376,879						
а	Fees for services (non-employees) Management	2,010,013						
ь	Legal	12,663,973						
	Accounting	83,828						
C		,						
d	Desfances for description of the second of t	2,569,842						
e	Professional fundraising services See Part IV, line 17	222 520						
f	Investment management fees	322,528						
g	Other	5,496,869						
12	Advertising and promotion	1,208,080						
13	Office expenses	3,602,276	 					
14	Information technology	1,186,586						
15	Royalties	2,160	+					
16	Occupancy	4,862,723						
17	Travel	1,965,834						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	5,385						
19	Conferences, conventions, and meetings	5,398,984						
20	Interest				_			
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	304,557						
23	Insurance	114,112						
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)							
а	MISCELLANEOUS	974,129						
ь	SUBSCRIPTIONS	320,148						
С	PERSONAL PROPERTY TAX	39,091						
d					_			
e								
f	All other expenses							
25	Total functional expenses. Add lines 1 through 24f	76,400,445						
26	Joint costs. Check here ► ☐ If following	70,100,443						
20	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							
	compined educational earnpaign and fundraising solicitation	I	1					

Part X Balance Sheet (A) (B) Beginning of year End of year 2,600 1 2,600 6.331.737 2 9.099.767 2 3 3 2,139,883 4 1,402,958 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 395.207 5 439,144 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 8 8 617,376 9 1,007,425 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete 3.171.643 10a Part VI of Schedule D 1,624,164 ь Less accumulated depreciation 10b 1,366,855 10c 1,547,479 85.740.304 11 79.605.023 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 90,458,681 16 99,239,677 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 6,374,781 17 7,463,447 17 Accounts payable and accrued expenses . 18 18 19 23,387,471 19 27.194.773 20 20 Liabilities 21 21 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 41,087,782 25 44,681,054 Other liabilities Complete Part X of Schedule D 70,850,034 26 26 79,339,274 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 19,608,647 27 19,900,403 Unrestricted net assets Temporarily restricted net assets 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 19,608,647 33 19,900,403 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 90.458.681 99,239,677

Pa	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)	1		81.8	398,09
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3	5,49		197,65
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,608,		508,64
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-5,2	205,89
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		19,9	900,40
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	୮	•
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

Software ID: Software Version:

EIN: 13-0659550

Name: EDISON ELECTRIC INSTITUTE INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		tion (hat a	che	')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
ANTHONY FEARLEY JR CHAIR	3 00	Х		х				0	0	0
RICHARD C KELLY VICE CHAIR/CHAIR	3 00	Х						0	0	0
THOMAS F FARRELL II VICE CHAIR	3 00	Х		х				0	0	0
LEWIS HAY III VICE CHAIR	3 00	Х		х				0	0	0
GREGORY ABEL DIRECTOR	1 00	Х						0	0	0
ANTHONY JALEXANDER DIRECTOR	1 00	Х						0	0	0
PAUL M BARBAS DIRECTOR	1 00	Х						0	0	0
PHILIP BARNHARD IV DIRECTOR	1 00	Х						0	0	0
PAUL J BONAVIA DIRECTOR	1 00	Х						0	0	0
DONALD E BRANDT DIRECTOR	1 00	Х						0	0	0
KEVIN BURKE DIRECTOR	1 00	Х						0	0	0
MICHAEL J CHESSER DIRECTOR	1 00	Х						0	0	0
THEODORE F CRAVER JR DIRECTOR	1 00	Х						0	0	0
PETER A DARBEE DIRECTOR	1 00	Х						0	0	0
MELISSA DAVIS DIRECTOR	1 00	Х						0	0	0
PETER B DELANEY DIRECTOR	1 00	Х						0	0	0
JOSE M DELGADO DIRECTOR	1 00	Х						0	0	0
PETER J DONLEAVY DIRECTOR	1 00	Х						0	0	0
CHRISTOPHER L DUTTON DIRECTOR	1 00	Х						0	0	0
NIEL C ELLERBROOK DIRECTOR	1 00	Х						0	0	0
DAVID R EMERY DIRECTOR	1 00	Х						0	0	0
JOHN D ERICKSON DIRECTOR	1 00	Х						0	0	0
PAUL J EVANSON DIRECTOR	1 00	Х						0	0	0
PEGGY Y FOWLER DIRECTOR	1 00	Х						0	0	0
WILLIAM L GIPSON DIRECTOR	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per	Posi t	tion (hat a	(che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
DAVID GOODIN DIRECTOR	1 00	x						О	0	0	
LON R GREENBERG DIRECTOR	1 00	х						0	0	0	
PAUL HANRAHAN DIRECTOR	1 00	х						0	0	0	
MICHAEL J HANSON DIRECTOR	1 00	Х						0	0	0	
WILLIAM D HARVEY DIRECTOR	1 00	×						0	0	0	
CURTIS L HEBERT JR DIRECTOR	1 00	х						0	0	0	
SHERRILL W HUDSON DIRECTOR	1 00	Х						0	0	0	
RALPH IZZO DIRECTOR	1 00	х						0	0	0	
WILLIAM D JOHNSON DIRECTOR	1 00	Х						0	0	0	
DAVID W JOOS DIRECTOR	1 00	×						0	0	0	
J LAMONT KEEN DIRECTOR	1 00	×						0	0	0	
THOMAS B KING DIRECTOR	1 00	×						0	0	0	
GALE E KLAPPA DIRECTOR	1 00	Х						0	0	0	
STEVEN V LANT DIRECTOR	1 00	Х						0	0	0	
CONSTANCE H LAU DIRECTOR	1 00	Х						0	0	0	
JAMES P LAURITO DIRECTOR	1 00	Х						0	0	0	
MICHAEL H MADISON DIRECTOR	1 00	Х						0	0	0	
THOMAS J MAY DIRECTOR	1 00	Х						0	0	0	
DAVID M MCCLANAHAN DIRECTOR	1 00	Х						0	0	0	
TIM MCLEOD DIRECTOR	1 00	Х						0	0	0	
JAMES H MILLER DIRECTOR	1 00	Х						0	0	0	
WILLIAM B MOORE DIRECTOR	1 00	Х						0	0	0	
MICHAEL G MORRIS DIRECTOR	1 00	Х						0	0	0	
SCOTT L MORRIS DIRECTOR	1 00	Х						0	0	0	
RICHARD A MUENCH DIRECTOR	1 00	×						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		tion (hat a	che	')	_	1	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
EDWARD R MULLER DIRECTOR	1 00	x						0	0	0
EILEEN O ODUM DIRECTOR	1 00	Х						0	0	0
JAMES S PIGNATELLI DIRECTOR	1 00	×						0	0	0
JAMES J PIRO DIRECTOR	1 00	х						0	0	0
MARY G POWELL DIRECTOR	1 00	Х						0	0	0
JOHN PROCARIO DIRECTOR	1 00	х						0	0	0
GARY L RAINWATER DIRECTOR	1 00	х						0	0	0
DAVID M RATCLIFFE DIRECTOR	1 00	х						0	0	0
STEPHEN P REYNOLDS DIRECTOR	1 00	Х						0	0	0
JOSEPH M RIGBY DIRECTOR	1 00	х						0	0	0
JAMES E ROGERS DIRECTOR	1 00	х						0	0	0
JOHN W ROWE DIRECTOR	1 00	х						0	0	0
ROBERT W ROWE DIRECTOR	1 00	х						0	0	0
CHARLES A SCHROCK DIRECTOR	1 00	х						0	0	0
MAYO A SHATTUCK III DIRECTOR	1 00	Х						0	0	0
WILLIAM H SHEPPARD DIRECTOR	1 00	х						0	0	0
DONALD J SHIPPAR DIRECTOR	1 00	х						0	0	0
CHARLES W SHIVERY DIRECTOR	1 00	х						0	0	0
VICTOR A STAFFIERI DIRECTOR	1 00	х						0	0	0
JEFFRY E STERBA DIRECTOR	1 00	х						0	0	0
JAMES P TORGERSON DIRECTOR	1 00	Х						0	0	0
THOMAS R VOSS DIRECTOR	1 00	Х						0	0	0
JOSEPH L WELCH DIRECTOR	1 00	Х						0	0	0
BRUCE A WILLIAMSON DIRECTOR	1 00	Х						0	0	0
GARY J WOLTER DIRECTOR	1 00	×						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours	Posi t	tion (hat a	(che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DENNIS R WRAASE DIRECTOR	1 00	Х						0	0	0
MICHAEL W YACKIRA DIRECTOR	1 00	Х						0	0	0
JOHN F YOUNG DIRECTOR	1 00	Х						0	0	0
ROBERT H YOUNG DIRECTOR	1 00	Х						0	0	0
THOMAS R KUHN PRESIDENT	45 00			х				3,084,410	0	922,483
DAVID K OWENS EXECUTIVE VICE PRESIDENT	45 00			х				796,385	0	84,636
BRIAN WOLFF EXECUTIVE VICE PRESIDENT	45 00			×				693,507	0	83,060
LYNN H LEMASTER SENIOR VP, POLICY	45 00			×				653,213	0	73,748
EDWIN R ANTHONY VP, CORP AFFAIRS	45 00			×				285,738	0	56,999
EDWARD H COMER VP, GENERAL COUNSEL	45 00			×				377,020	0	67,911
JOHN J EASTON VP, INT'L PROGRAMS	45 00			×				312,786	0	57,656
MARY D MILLER VP, HUMAN RESOURCES	45 00			×				324,219	0	192,488
PATRIC D O'KEELEY TREASURER/CFO	45 00			x				549,612	0	46,835
QUINLAN SHEA EXEC DIR, ENVIRONMENT	45 00				Х			306,953	0	66,092
RON CLEMENTS SENIOR DIRECTOR, GOV AFFA	45 00					х		0	0	0
KATHRYN STECKELBERG EXEC DIR, GOV'T RELATIONS	45 00					х		302,797	0	57,337
JAMES FAMA EXEC DIR, ENERGY DELIVERY	45 00					х		301,271	0	69,819
RICHARD MCMAHON EXEC DIR, FINANCE/ENERGY S	45 00					х		326,299	0	73,562
M SADEGH RAZEGHI CIO	45 00					х		225,273	0	44,852
JOHN S SCHLENKER CONTROLLER	45 00					Х		217,748	0	63,649
MARSHALL BRIER VP, POLICY	2 00						х	0	0	0
WALKER NOLAN PAST EXEC VP, POLICY	40 00						х	0	0	0

DLN: 93493203007611

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

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

OMB No 1545-0047

Open to Public Inspection

▼ No

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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

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 35a (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
EDISON ELECTRIC INSTITUTE INC	
	13-0659550

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

-	Frovide a description of the organization's direct and municipal political campaign activities in Fart IV				
2	Political expenditures	-	\$		429,997
3	Volunteer hours		_		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	•	\$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	►	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No
4a	Was a correction made?			☐ Yes	┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the organization is exempt under section 501(c) except section	n 50	1(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	►	\$		309,997
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527				
	exempt funtion activities	•	\$ _		120,000
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	F	\$		429,997

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) DEMOCRATIC GOVERNOR'S ASSOC	1401 K STREET NW SUITE 200 WASHINGTON, DC 20005	52-1304889	25,000	
(2) DEMOCRATIC ATTORNEYS GENERAL	1580 LINCOLN ST SUITE 1125 WASHINGTON,DC 20002	13-4220019	25,000	
(3) REPUBLICAN GOVERNERS ASSOC	1747 PENN AVE SUTE 250 WASHINGTON, DC 20006	11-3655877	15,000	
(4) REPUBLICAN STATE LEADERSHIP COMMITTEE	1800 DIAGNONAL ROAD ALEXANDRIA, VA 22314	05-0553252	50,000	
(5) REPUBLICAN MAYORS & LOCAL OFFICIALS	412 FIRST ST WASHINGTON, DC 20003	52-1976233	5,000	

Did the filing organization file Form 1120-POL for this year?

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns						
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	,000 plus 15% of the	excess over \$500,00	0			
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

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)).

	(creation under section ser(ii))			
		(a	1)	(b)
		Yes	No	A mount
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			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	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? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
ь	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			
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 section 501(c)(6).

			Yes	No
L	Were substantially all (90% or more) dues received nondeductible by members?	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	Yes	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	63,814,263
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	13,078,352
ь	Carryover from last year	2b	-3,925,020
С	Total	2c	9,153,332
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	8,876,329
4	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 expenditure next year?	4	277,003
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Ret urn Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES		THE ORGANIZATION SUPPORTED POLITICAL ORGANIZATIONS AND CANDIDATES FOR STATE AND LOCAL OFFICE WHERE LEGALLY PERMISSIBLE THE ORGANIZATION INCURRED SOLICITATION AND ADMINISTRATIVE EXPENSES FOR ITS SEPARATE SEGREGATED FUND

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493203007611

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury

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

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Internal Revenue Service **Employer identification number** Name of the organization EDISON ELECTRIC INSTITUTE INC 13-0659550 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨

9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes
	the organization's accounting for conservation easements
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 🕏

Does each conservation easement reported on line 2(d) above satisfy the requirements of section

- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

Revenues included in Form 990, Part VIII, line 1

□ Yes □ No

(ii) Assets included in Form 990, Part X

170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 relating to these items

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Pari	411 Organizations Maintaining Co	llections of Ar	t, His	stori	cal T	reasu	res, or C	the	<u>r Similar As</u>	ssets (<u>(continued)</u>
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	ny of tl	he fol	lowing	that ar	e a significa	ant u	se of its collec	tion	
а	Public exhibition		d	\vdash	Loan	orexcl	hange prog	rams			
ь	Scholarly research		e	\vdash	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and eval	ain ho	w the	v furth	artha c	raanizatior	n'c av	emnt nurnose	ın	
4	Part XIV	mections and expir	a111 110	w the	y iuitiii	er tile t	nganizatioi	15 6	tempt purpose	""	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	☐ Yes	□ No
Par	t IV Escrow and Custodial Arrang	ements. Compl	ete ıf	the	organ	ızatıor			es" to Form 9		, 110
	Part IV, line 9, or reported an an	nount on Form 9	90, P	art X	<u>, lıne</u>	21.					
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	forc	ontribu	utions	or other ass	etsi	not	┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follov	ving t	able		г				
							-		Aı	mount	
c	Beginning balance						-	1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lir	ne 21?	•						┌ Yes	☐ No
	If "Yes," explain the arrangement in Part XIV	•									
Pa	rt V Endowment Funds. Complete										
		(a)Current Year	(b) Prior	Year	(c)Tw	o Years Back	(d)	Three Years Back	(e)Four	Years Back
1a	Beginning of year balance							_			
Ь	Contributions							_			
С	Investment earnings or losses										
d	Grants or scholarships							_		<u> </u>	
e	Other expenditures for facilities and programs										
f	Administrative expenses							1			
g	End of year balance										
2	Provide the estimated percentage of the yea	r end halance held	as			<u> </u>					
a	Board designated or quasi-endowment	r ena barance nera	us								
ь	Permanent endowment										
	Term endowment ▶										
c 3a	Are there endowment funds not in the posses	ssion of the organiz	zation	that	are hel	d and a	dministere	d for	the		
	organization by									Ye	s No
	(i) unrelated organizations								За	(i)	
	(ii) related organizations								3a	(ii) <u> </u>	
Ь	If "Yes" to 3a(II), are the related organizatio	•							3	ь	
4	Describe in Part XIV the intended uses of th										
Par	t VI Investments—Land, Buildings	s, and Equipme	ent. S				art X, line I	10.			
	Description of investment				Cost o		(b)Cost or o basis (othe		(c) Accumulated depreciation	d (d)	Book value
1a	Land										
b	Buildings										
	Leasehold improvements									\top	
d	Equipment						1,890	0,035	1,447,5	91	442,444
e	Other						1,281	1,608	176,5	73	1,105,035
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>), line	10(c).)				\neg	1,547,479
	• • • • • •	· · · · · · · · · · · · · · · · · · ·								D (Form	990) 2010

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	d of valuation f-year market value
1)Fınancıal derivatives		
C)Closely-held equity interests		
ther		
(2) (2) 22)	•	
art VIII Investments—Program Related. Se	e Form 990, Part X, line	d of valuation
(a) Description of investment type	(b) Book value	f-year market value
	•	
otal. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, III		
(a) Descri		(b) Book value
	(5.)	
otal. (Column (b) should equal Form 990, Part X, col.(B) line : Part X Other Liabilities. See Form 990, Part X		
(a) Description of Liability	(b) A mount	
ederal Income Taxes		
OSTRETIREMENT BENEFIT OBLIGATION	8,370,708	
EFERRED COMPENSATION	31,460,179	
EFERRED RENT	2,699,081	
ENEFITS LIABILITIES	1,551,107	
THER CURRENT LIABILITIES	357,722	
ONG TERM LEASE OBLIGATION	242,257	
otal. (Column (b) should equal Form 990, Part X, col (B) line 25)	44,681,054	
Em 40 (ACC 740) Frankrika Im Brit VIV.		

'ali	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts
L	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
	Excess or (deficit) for the year Subtract line 2 from line 1	3
	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
,	Investment expenses	6
	Prior period adjustments	7
3		8
	Other (Describe in Part XIV)	
•	Total adjustments (net) Add lines 4 - 8	9
)	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10
	Reconciliation of Revenue per Audited Financial Statements With Revenue	
	Total revenue, gains, and other support per audited financial statements	1
	A mounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
Ь	Donated services and use of facilities	-
C	Recoveries of prior year grants	
d	Other (Describe in Part XIV)	_
e	Add lines 2a through 2d	2e
	Subtract line 2e from line 1	3
	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIV)	
C	Add lines 4a and 4b	4c
	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return
	Total expenses and losses per audited financial statements	1 1
	Amounts included on line 1 but not on Form 990, Part IX, line 25	-
а	Donated services and use of facilities	
b b	Prior year adjustments	-
c	Other losses	-
d	Other (Describe in Part XIV)	1
e	Add lines 2a through 2d	_ 2e
	Subtract line 2e from line 1	3
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
a L	· · · · · · · · · · · · · · · · · · ·	-
b	,	- I
С	Add lines 4a and 4b	4c
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5

Identifier Return Reference Explanation

additional information

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DLN: 93493203007611

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

to Part I

c Totals (add lines 3a and 3b)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Employer identification number

י דר	SON ELECTRIC INSTITUTE INC					
J 1 3	SON LELCTRIC INSTITUTE INC				13-0659550)
²a	rt I General Information			he United States. C		
	"Yes" to Form 990, Pa					
	For grantmakers. Does the	_			_	
	assistance, the grantees' elig	•	_	·		
	the grants or assistance?					. Yes No
	For grant makers. Describe in Pa United States	rt V the organiz	zatıon's proceduı	res for monitoring the us	e of grant funds outsıde	: the
	Activites per Region (Use Part V	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e q ,	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	
	EUROPE	0	0	PROGRAM SERVICES	MEETINGS WITHIN THE REGION	317,480
	CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	MEETINGS WITHIN THE REGION	1,390
	EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	MEETINGS WITHIN THE REGION	13,544
	NORTH AMERICA	0	0	PROGRAM SERVICES	MEETINGS WITHIN THE REGION	6,407
	RUSSIA AND NEWLY	0	0	PROGRAM SERVICES		750
	INDEPENDENT STATES				THE REGION	
	Sub-total		0			339,571
t	Total from continuation sheets	I	1	1	I	C

339,571

Part	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete If the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000											
	a) Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)			
2	Enter total nun tax-exempt by	hber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	ecognized as chari ovided a section 50:	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	 as . ▶				
3	tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter											

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>. </u>		!		
			<u>. </u>			1	
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
					!		
			1		,		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	⊽	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	r	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	V	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

information. Identifier	ReturnReference	Explanation
racitimer	Retarmerence	Explanation

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DLN: 93493203007611 OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspect ion

Employer identification number

EDISON ELECTRIC INSTITUTE INC						13-0659550	
Part I General Informatio	n on Grants and	d Assistance				•	
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization 	rard the grants or as ation's procedures fo	sistance? or monitoring the use o	f grant funds in the Unite	d States			√ Yes
Part II Grants and Other A Form 990, Part IV, line duplicated if additional	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Addıtıonal Data Table							
2 Enter total number of section 50							
3 Enter total number of other orga	nizations					<u> </u>	

Part III	Grants and Other Assistance to Individuals in the United States. C	Complete if the organization	answered "Yes" to	o Form 990,	Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.				

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 WHEN GRANT FUNDS ARE AWARDED, EEI MAY REQUEST THE AMOUNTS BE
MONITORING GRANTS		RESTRICTED FOR A SPECIFIC PURPOSE GRANTEES MANY TIMES WILL REPORT BACK TO EEI THE SPECIFIC USE
IN THE U S		OF THE FUNDS AND VARIOUS OUTCOMES HOWEVER, THIS IS NOT A REQUIREMENT FOR EACH GRANT AWARDED

Software ID: **Software Version:**

EIN: 13-0659550

Name: EDISON ELECTRIC INSTITUTE INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AABEPO BOX 92346 WASHINGTON, DC 20090	84-0782569	501(C)(3)	10,000				EVENT SPONSORSHIP
ACCF - CENTER FOR POLICY RESEARCH1750 K STREET 400 WASHINGTON, DC 20006	52-1091172	501(C)(3)	15,000				CORPORATE CONTRIBUTION
ALLIANCE TO SAVE ENERGY1850 M STREET NW WASHINGTON, DC 20006	52-1082991	501(C)(3)	21,000				EVENT SPONSORSHIP
ALLIANCE TO SAVE ENERGY1850 M STREET NW WASHINGTON, DC 20006	52-1759134	501(C)(3)	10,000				PROGRAM SUPPORT
ASPEN INSTITUTEPO BOX 222 QUEENSTOWN, MD 21658	84-0399006	501(C)(3)	10,000				PROGRAM SUPPORT
CAMPAIGN FOR HOME ENERGY ASSISTANCE1615 L STREET NW WASHINGTON, DC 20036	52-1243510	501(C)(3)	15,000				CORPORATE RESPONSIBILITY
CENTER FOR ENERGY WORKFORCE DEVELOPMENT701 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	20-4504014	501(C)(3)	105,000	227,943	воок	IN KIND CONTRIBUTION OF SALARIES & OVERHEAD	PROGRAM SUPPORT
CONGRESSIONAL BASEBALL GAME1918 18TH ST WASHINGTON, DC 20009	52-6063003	501(C)(3)	7,500				CORPORATE RESPONSIBILITY
CONGRESSIONAL BLACK CAUCUS FOUNDATION 1720 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036	52-1160561	501(C)(4)	10,000				EVENT SPONSHORSHIP
CONGRESSIONAL BLACK CAUCUS INSTITUTE455 MASSACHUSETTS AVENUE NW SUITE 150-355 WASHINGTON, DC 20001	52-2270607	501(C)(4)	10,000				EVENT SPONSORSHIP
GEORGE W BUSH PRESIDENTIAL CENTERPO BOX 600610 DALLAS,TX 75206	20-4119317	501(C)(3)	10,000				CORPORATE RESPONSIBILITY
HARVARD UNIVERSITY JOHN F KENNEDY79 JOHN F KENNEDY STREET CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	25,000				PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KEYSTONE CENTER1628 SAINTS JOHN RD KEYSTONE, CO 80435	84-0688506	501(C)(3)	10,000				PROGRAM SUPPORT
KEYSTONE CENTER1628 SAINTS JOHN RD KEYSTONE,CO 80435	84-0688506	501(C)(3)	10,000				EVENT SPONSHORSHIP
LEADERSHIP CONFERENCE ON CIVIL AND HUMAN RIGHTS1629 K STREET NW 10TH FLOOR WASHINGTON, DC 20006	52-9789800	501(C)(4)	10,000				EVENT SPONSHORSHIP
NATIONAL CONFERENCE OF BLACK MAYORS101 MARIETTA ST ATLANTA,GA 30303	23-7407671	501(C)(3)	10,000				EVENT SPONSHORSHIP
NATIONAL CONFERENCE OF STATE LEGISLATURE 7700 EAST FIRST PLACE DENVER,CO 80230	84-0772595	501(C)(3)	20,833				EVENT SPONSHORSHIP
NATIONAL MULTIPLE SCLEROSIS SOCIETY1800 M STREET WASHINGTON, DC 22036	53-0237585	501(C)(3)	12,000				EVENT SPONSHORSHIP
NATIONAL ENERGY RESOURCES ORGANIZATION1707 PRINCE STREET SUITE 5 ALEXANDRIA,VA 22314	91-1850125	501(C)(3)	6,150				EVENT SPONSHORSHIP
POLLINATOR PARTNERSHIP423 WASHINGTON ST 5TH FLOOR SAN FRANCISCO,CA 941112339	94-3283967	501(C)(3)	10,000				EVENT SPONSHORSHIP
ROOSEVELT INSTITUTE 520 LEXINGTON AVENUE 18TH FLOOR NEW YORK, NY 10022	23-7213592	501(C)(3)	10,000				EVENT SPONSHORSHIP
TASTE OF THE SOUTHPO BOX 2826 WASHINGTON, DC 20013	53-1343458	501(C)(3)	15,000				CORPORATE RESPONSIBILITY
THIRD WAY1025 CONNECTICUT AVE NW WASHINGTON,DC 20036	20-1734070	501(C)(4)	25,000				PROGRAM SUPPORT
THOMAS ALVA EDISON FOUNDATION701 PENNSYULVANIA AVE WASHINGTON, DC 20036	52-2106274	501(C)(3)		69,976	воок	IN KIND CONTRIBUTION	PROGRAM SUPPORT

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

DLN: 93493203007611

OMB No 1545-0047

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Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization EDISON ELECTRIC INSTITUTE INC **Employer identification number**

	15-0059550			
Pa	Tt I Questions Regarding Compensation			
			Yes	Νο
1a	Check the appropiate 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			
	Tax idemnification and gross-up payments Fax idemnification and gross-up payments Fax idemnification fees Fax idemnification and gross-up payments Fax idemnification and gross-up payments			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
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	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
3	organization's CEO/Executive Director Check all that apply			
	▼ Compensation committee ▼ Written employment contract			
	☑ Independent compensation consultant ☑ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
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 from the organization or a related organization?	4a		Νo
Ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only 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		
b	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		
b	Any related organization?	6b		
	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 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 accured pursuant to a contract that was			
	subject to the initial contract exception described in Regs-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 Regulations section 53 4958-6(c)?	9		

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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	fW-2 and/or 1099-MI	SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) THOMAS R KUHN	(ı) (ıı)	795,545 0	446,824 0	1,842,041	900,190	22,293 0	4,006,893	
(2) DAVID K OWENS	(ı) (ıı)	489,581 0	250,000 0	56,804	75,251	9,385 0	881,021	
(3) BRIAN WOLFF	(ı) (ıı)	488,247 0	204,000	1,260	72,981	10,079 0	776,567	
(4) LYNN H LEMASTER	(ı) (ıı)	374,403 0	232,400	46,410	58,784 0	14,964 0	726,961	
(5) EDWIN R ANTHONY	(ı) (ıı)	182,937 0	72,000 0	30,801	42,809	14,190 0	342,737	
(6) EDWARD H COMER	(ı) (ıı)	275,216 0	96,000 0	5,804	48,535	19,376 0	444,931	
(7) JOHN J EASTON	(ı) (ıı)	202,357	74,000 0	36,429	44,008	13,648 0	370,442	
(8) MARY D MILLER	(ı) (ıı)	244,272 0	76,000 0	3,947	187,451	5,037 0	516,707	
(9) PATRIC D O'KEELEY	(ı) (ıı)	184,123 0	337,000 0	28,489	44,518	2,317 0	596,447	
(10) QUINLAN SHEA	(ı) (ıı)	213,006 0	76,000 0	17,947	52,466	13,626 0	373,045	
(11) KATHRYN STECKELBERG	(ı) (ıı)	221,501	80,000	1,296	48,661	8,676 0	360,134	
(12) JAMES FAMA	(ı) (ıı)	209,543	74,000 0	17,728	50,922	18,897 0	371,090	
(13) RICHARD MCMAHON	(ı) (ıı)	209,763	100,000	16,536	54,665	18,897 0	399,861	
(14) M SADEGH RAZEGHI	(ı) (ıı)	169,557 0	33,000	22,716	41,293	3,559 0	270,125	
(15) JOHN S SCHLENKER	(ı) (ıı)	183,651 0	20,000	14,097	45,144	18,505 0	281,397	
(16)			1			1		

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	1 A	PART 1, QUESTION 1A - TRAVEL FOR COMPANIONS EDWIN ANTHONY \$5,740 INCLUDED IN INCOME JOHN EASTON \$5,824 INCLUDED IN INCOME PART I, QUESTION 1A - HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES THOMAS KUHN \$1,380 INCLUDED IN INCOME RICHARD MCMAHON \$791 INCLUDED IN INCOME
	4B	THE EDISON ELECTRIC INSTITUTE PROVIDES A NON-QUALIFIED PLAN FOR ELIGIBLE MANAGEMENT EMPLOYEES WHOSE BENEFITS ARE REDUCED BY IRS REGULATIONS UNDER THE EMPLOYER'S RETIREMENT INCOME PLAN OR COOPERATIVE SAVINGS PLAN THOMAS R KUHN \$1,888,432 DAVID K OWENS \$31,200 BRIAN WOLF \$26,940 LYNN H LEMASTER \$17,760 EDWIN R ANTHONY \$2,283 EDWARD H COMER \$8,040 JOHN J EASTON \$3,540 PATRIC D O'KELLEY \$1,800 QUINLAN SHEA \$3,720 KATHRYN STECKELBERG \$3,420 JAMES FAMA \$3,600 RICHARD MCMAHON \$5,160 MARY MILLER \$150,000

Schedule J (Form 990) 2010

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DLN: 93493203007611

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule L (Form 990 or 990-EZ)

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

Name of the organization **Employer identification number** EDISON ELECTRIC INSTITUTE INC Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to (e) In Approved (g)Written or from the (a) Name of interested person and (c)Original default? by board or agreement? (d)Balance due organization? purpose principal amount committee? Τо From Yes No Yes No Yes No (1) THOMAS KUHN SPLIT DOLLAR LIFE INSURANCE POLICY WITH CEO Χ 0 439,144 Νo Yes Yes 439,144 Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person (a) Name of interested person (c)A mount of grant or type of assistance and the organization

Part TV Bus	iness Transact	tions Involving T	nterested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	ii aliswerea Tes Oli	Torin 550, raic 14, in	1C 200, 200, 01 20C.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier Re	et urn Reference	Explanation
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Schedule L (Form 990 or 990-EZ) 2010

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DLN: 93493203007611

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010

Open to Public Inspection

Name of the organization EDISON ELECTRIC INSTITUTE INC

 ${\bf Employer\ identification\ number}$

13-0659550

	Return eference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE ORGANIZATION HAS THREE VOTING CLASSES OF MEMBERSHIP OPERATING COMPANY MEMBERS - INVESTOR-OWNED OPERATING ELECTRIC CORORATIONS ENGAGED IN THE GENERATION, TRANSMISSION, OR DISTRIBUTION OF ELECTRICTY TO THE PUBLIC IN THE US OR ITS POSSESSIONS EETS US SHAREHOLDER-OWNED ELECTRIC COMPANY MEMBERS SERVE 95% OF THE ULTIMATE CUSTOMERS IN THIS SEGMENT OF THE INDUSTRY AND REPRESENT APPROXIMATELY 70% OF THE US ELECTRIC POWER INDUSTRY HOLDING COMPANY MEMBERS - BEING CORPORATIONS IN THE US OR ITS POSSESSIONS WHICH BY VIRTUE OF OWNERSHIP OF SECURITIES IN INVESTOR-OWNED CORPORATIONS ARE INTERESTED IN ADVANCING THE BUSINESS OF OPERATING ELECTRICAL COMPANIES IN RELATION TO THE SALE OF ELECTRICITY TO THE ULTIMATE CONSUMER SUBSIDIARY COMPANY MEMBERS - BEING SUBSIDIARY COMPANIES OF OPERATING COMPANY OR HOLDING COMPANY MEMBERS, SHALL BE ELIGIBLE FOR SEPARATE MEMBERSHIP PARTICIPATION ON STANDING COMMITTEES AND IN OTHER ACTIVITIES OF THE ORGANIZATION SHALL BE DEFINED BY AND DETERMINED FROM TIME TO TIME BY THE BOARD THE ORGANIZATION HAS THREE NON-VOTING CLASSES OF MEMBERSHIP INTERNATIONAL AFFILIATES - BEI'S INTERNATIONAL AFFILIATES PROGRAM PROVIDES THE CRITICAL LINK THAT BRINGS TOGETHER ELECTRIC COMPANIES AROUND THE WORLD WITH THE US ELECTRIC POWER INDUSTRY. THIS SPECIAL PROGRAM OFFERS ELECTRIC COMPANIES OUTSIDE THE US THE OPPORTUNITY TO BECOME EEI MEMBERS REGARDLESS OF THEIR OWNERSHIP FORM THROUGH ITS EXPANDED INTERNATIONAL INVOLVEMENT, EEI BROADENS THE VALUE OF SHARED EXPERTISE AND EXPERIENCE ON ISSUES OF CONCERN AND INTEREST TO ELECTRIC COMPANIES AROUND THE WORLD ASSOCIATES - EEI ASSOCIATE MEMBERSHIP IS DESIGNED FOR FIRMS THAT HAVE AN INTEREST IN ADVANCING THE DEVELOPMENT OF THE ELECTRIC POWER INDUSTRY. THESE FIRMS MAY PROVIDE GOODS AND SERVICES TO THE INDUSTRY, BUT MAY NOT BE ENGAGED IN THE GENERATION, TRANSMISSION, DISTRIBUTION, BROKERAGE, OR SALE OF ELECTRICITY ASSOCIATE MEMBERSHIP HELPS FIRMS TO BETTER KNOW AND UNDERSTAND THE INDUSTRY, THE PEOPLE, AND THE ISSUES HONORARY MEMBERS - MEMBERS WHO, ON ACCOUNT OF THEIR STANDING OR

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE DIRECTORS ARE ELECTED AT THE ANNUAL MEETING BY VOTING CLASS MEMBERS OF THE ORGANIZATION EITHER IN-PERSON OR BY PROXY THERE ARE THREE CLASSES AMONG THE DIRECTORS SO THAT ELECTION AT THE ANNUAL MEETING IN ANY GIVEN YEAR CONSTITUTES APPROXIMATELY ONE-THIRD OF THE MEMBERSHIP OF THE BOARD

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		THE MEMBERSHIP OF THE ORGANIZATION DOES APPROVE BY LAW AMENDMENTS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		DUE TO THE SIZE OF THE GOVERNING BODY AND MAGNITUDE AND COMPLEXITY OF THE FORM 990, THE RETURN FOR EDISON ELECTRIC INSTITUTE IS REVIEWED BY THE ORGANIZATION'S FIRST VICE CHAIR/BUDGET CHAIR IN ADVANCE OF FILING THE RETURN EEI'S FIRST VICE CHAIR REPORTS HIS FINDINGS TO THE BOARD

Identifier Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION HAS WRITTEN CONFLICT OF INTEREST POLICIES FOR ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES EEI'S CODE OF BUSINESS CONDUCT HAS BEEN DISTRIBUTED TO ALL EMPLOYEES AND IS ON THE ORGANIZATION'S INTRANET SITE THIS DOCUMENT INCLUDES, IN PART, EEI'S CORE VALUES, OPERATING PRINCIPLES, CONFLICT OF INTEREST POLICY AND WHISTLEBLOWER POLICY, WHICH INCLUDES A CONFIDENTIAL 800 TELEPHONE NUMBER PERIODIC REMINDERS ARE GIVEN EEI HAS A WRITTEN DIRECTOR'S CONFLICT OF INTEREST POLICY, APPLICABLE TO ALL MEMBERS OF ITS BOARD OF DIRECTORS, WHICH WAS FORMALLY ADOPTED BY THE ORGANIZATION'S BOARD PERIODIC REMINDERS ARE GIVEN THE ORGANIZATION ALSO HAS A CORPORATE COMPLIANCE OFFICER, A POLICY AND PROCEDURE FOR REPORTING VIOLATIONS OF THE CODE OF BUSINESS CONDUCT AS WELL AS CONCERNS ABOUT THE USE OF EEI'S CORPORATE RESOURCES AND FINANCIAL REPORTING AND A VENDOR CODE OF CONDUCT POLICY THERE HAS NOT BEEN A VIOLATION OF THE CONFLICT OF INTEREST POLICIES, ALTHOUGH WE STAND READY TO ENFORCE THE POLICIES IN APPROPRIATE CIRCUMSTANCES

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION OF THE ORGANIZATION'S CEO IS BASED ON RESULTS FROM COMPENSATION SURVEYS AND A REVIEW BY AN INDEPENDENT CONSULTANT ON AN ANNUAL BASIS THE CEO'S COMPENSATION IS REVIEWED BY THE ORGANIZATION'S COMPENSATION COMMITTEE AND APPROVED BY THE BOARD THE CEO HAS A WRITTEN EMPLOYMENT CONTRACT THE COMPENSATION OF THE ORGANIZATION'S OFFICERS AND KEY EMPLOYEES IS BASED ON RESULTS FROM COMPENSATION SURVEYS AND A REVIEW BY AN INDEPENDENT COMPENSATION CONSULTANT ON AN ANNUAL BASIS OFFICER COMPENSATION IS REVIEWED BY THE ORGANIZATION'S COMPENSATION COMMITTEE AND APPROVED BY THE EXECUTIVE COMMITTEE

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S ARTICLES OF INCORPORATION ARE A PUBLIC DOCUMENT AND ARE AVAILABLE ON THE VIRGINIA SECRETARY OF STATE WEB SITE THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC, HOWEVER THE BALANCE SHEET AND INCOME STATEMENT CAN BE FOUND ON THE FORM 990 WHICH IS MADE AVAILABLE TO THE PUBLIC ON VARIOUS WEB SITES AND UPON REQUEST

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND	FORM 990, PART XI,	OTHER COMPREHENSIVE LOSS -5,205,897 TOTAL TO FORM 990, PART XI,
BALANCES	LINE 5	LINE 5 -5,205,897

ldentifier	Return Reference	Explanation
EXPLANATION FOR HOURS WORKED	FORM 990, PART VII	THOMAS R KUHN DEVOTES APPROXIMATELY 48 HOURS PER WEEK AS FOLLOWS EDISON ELECTRIC INSTITUTE, INC 45 HOURS CENTER FOR WORKFORCE DEVELOPMENT 1 HOUR NATIONAL LAMPAC 1 HOUR THOMAS ALVA EDISON FOUNDATION 1 HOUR PATRIC D O'KELLEY DEVOTES APPROXIMATELY 48 HOURS PER WEEK AS FOLLOWS EDISON ELECTRIC INSTITUTE, INC 45 HOURS CENTER FOR WORKFORCE DEVELOPMENT 1 HOUR NATIONAL LAMPAC 1 HOUR THOMAS ALVA EDISON FOUNDATION 1 HOUR MARY D MILLER DEVOTES APPROXIMATELY 48 HOURS PER WEEK AS FOLLOWS EDISON ELECTRIC INSTITUTE, INC 45 HOURS CENTER FOR WORKFORCE DEVELOPMENT 1 HOURS EDISON ELECTRIC INSTITUTE, INC VEBA 1 HOUR NATIONAL LAMPAC 1 HOUR

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

DLN: 93493203007611

Schedule R (Form 990) 2010

Employer identification number

2010

Open to Public Inspection

SCHEDULE R (Form 990)

Name of the organization EDISON ELECTRIC INSTITUTE INC **Related Organizations and Unrelated Partnerships**

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990.
 ► See separate instructions.

					13-0659550			
Part I Identification of Disregarded Entities (Co	omplete	ıf the organızatıon a	answered "Yes" o	n Form 990, Part				
(a) Name, address, and EIN of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizations dur	ganizat	ions (Complete ıf t tax year.)	he organization ai	nswered "Yes" or	Form 990, Part I	V, line 34 becaus	e it had	one
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity		g) 12(b)(1 rolled ization
							Yes	No
(1) THOMAS ALVA EDISON FOUNDATION								
701 PENNSYLVANIA AVE NW	SCIENTIF	IC/EDUCATION	DC	501(C)(3)	N/A	N/A		No
WASHINGTON, DC 20004 52-2106274		,		(-/(-/	.,,			
(2) CENTER FOR ENERGY WORKFORCE DEVELOPMENT								
701 PENNSYLVANIA AVE NW	EDUCATION	ON	DE	501(C)(3)	N/A	N/A		No
WASHINGTON, DC 20004 20-4504014								
							1	
								<u> </u>

Cat No 50135Y

(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(g) f end-of-year assets	(h Disprop allocat	ortionate	(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	(j Gener mana partr	al or ging	(k) Percentage ownership
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	'es" on	Form	990,	Part IV,
Name, address, an	(a) d EIN of related organız	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,	Share o	(f) f total income	Shai end-o	j) e of f-year ets		(h) Percentage ownership
				1	1		1		1					

Schedule R (Form 990) 2010		Pε	age .
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36)		
Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	N
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		N
b Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c Gift, grant, or capital contribution from other organization(s)	1c		N
d Loans or loan guarantees to or for other organization(s)	1d		N
e Loans or loan guarantees by other organization(s)	1e		N
f Sale of assets to other organization(s)	1f	-	N
g Purchase of assets from other organization(s)	1g		N
h Exchange of assets	1h	1	N
i Lease of facilities, equipment, or other assets to other organization(s)	1 i		N
j Lease of facilities, equipment, or other assets from other organization(s)	1j	_	N
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		N
I Performance of services or membership or fundraising solicitations by other organization(s)	11		N
m Sharing of facilities, equipment, mailing lists, or other assets	1m	1	N
n Sharing of paid employees	1n	Yes	
		\perp	
• Reimbursement paid to other organization for expenses	10		N
p Reimbursement paid by other organization for expenses	1р	Yes	
q O ther transfer of cash or property to other organization(s)	1q	Yes	

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	

r O ther transfer of cash or property from other organization(s)

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) THOMAS ALVA EDISON FOUNDATION	Q	1,390,949	
(2) THOMAS ALVA EDISON FOUNDATION	Р	473,693	
(3) CENTER FOR ENERGY WORKFORCE DEVELOPMENT	Р	65,593	
(4) CENTER FOR ENERGY WORKFORCE DEVELOPMENT	Q	201,374	
(5) CENTER FOR ENERGY WORKFORCE DEVELOPMENT	В	332,943	
(6)			

No

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on 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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		ortionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(I Gene mana part	ag ing tner?
			Yes	No		Yes	No		Yes	No
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

ı	Ident if ier	Return Reference	Explanation

Schedule R (Form 990) 2010