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Form 990



Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

EDISON ELECTRIC INSTITUTE INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

701 PENNSYLVANIA AVE NW

Room/suite

City or town, state or country, and ZIP + 4

WASHINGTON, DC 200042696

F Name and address of principal officer

THOMAS R KUHN  
701 PENNSYLVANIA AVE NW  
WASHINGTON,DC 200042696

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☐ 501(c)(3) ☒ 501(c) ( 6 ) ☐ (insert no ) ☐ 4947(a)(1) or ☐ 527

J Website:

WWW EEI ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1933

M State of legal domicile

VA

Part I

Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO PROVIDE A FORUM FOR THE ELECTRIC UTILITY INDUSTRY		
Revenue	2 Check this box <input type="checkbox"/> 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)	3	71
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	71
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	214
	6 Total number of volunteers (estimate if necessary)	6	100
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	731,498
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	-215,388
	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
		0	0
		78,194,885	80,031,179
		3,703,213	3,971,588
		0	0
Expenses	9 Program service revenue (Part VIII, line 2g)		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	81,898,098	84,002,767
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,039,336	1,307,394
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	34,240,004	35,742,587
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
Net Assets or Fund Balances	b Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	41,121,105	40,404,152
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	76,400,445	77,454,133
	19 Revenue less expenses Subtract line 18 from line 12	5,497,653	6,548,634
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
		99,239,677	101,575,280
		79,339,274	85,621,820
		19,900,403	15,953,460
	21 Total liabilities (Part X, line 26)		
	22 Net assets or fund balances Subtract line 21 from line 20		

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

\*\*\*\*\*

Signature of officer

2012-11-15

Date

JOHN S SCHLENKER TREASURER/CFO

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

KAREN GRIES

Date

Check if self-employed

☐

Preparer's taxpayer identification number (see instructions)

P00078514

Firm's name (or yours if self-employed), address, and ZIP + 4

CLIFTONLARSONALLEN LLP  
4250 N FAIRFAX DRIVE SUITE 1020  
ARLINGTON, VA 22203

EIN

41-0746749

Phone no

(571) 227-9500

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1

Briefly describe the organization's mission

EDISON ELECTRIC INSTITUTE INC IS THE ASSOCIATION OF AMERICA'S SHAREHOLDER-OWNED ELECTRIC UTILITIES THE INSTITUTE PROVIDES AUTHORITATIVE ANALYSIS AND CRITICAL INDUSTRY DATA TO ITS MEMBERS, CONGRESS, GOVERNMENT AGENCIES, THE FINANCIAL COMMUNITY, AND OTHER INFLUENTIAL AUDIENCES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

EDISON ELECTRIC INSTITUTE'S (EEI) ENVIRONMENT/ENERGY RESOURCES PROGRAM IS COMPRISED OF A HOST OF ACTIVITIES INVOLVING CLEAN AIR, GLOBAL CLIMATE, CLEAN WATER, CLEAN COAL TECHNOLOGIES, NATURAL GAS, HYDROPOWER, OTHER RENEWABLE FUELS, RAIL TRANSPORTATION, RISK ASSESSMENT, RISK MANAGEMENT, AND WASTE ACTIVITIES AS THE ASSOCIATION FOR SHAREHOLDER-OWNED ELECTRIC UTILITIES, THESE PROGRAMS AND ACTIVITIES RELATE TO THE EXEMPT PURPOSE OF EDISON ELECTRIC INSTITUTE, INC

4b

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

EEI'S INDUSTRY STRUCTURE PROGRAM IS COMPRISED OF A HOST OF ACTIVITIES INVOLVING THE FEDERAL ENERGY REGULATORY COMMISSION (FERC), THE NORTH AMERICAN ELECTRIC RELIABILITY CORPORATION (NERC), AND THE NATIONAL ASSOCIATION OF REGULATORY COMMISSIONERS (NARUC) IT ALSO INCLUDES ACTIVITIES ASSOCIATED WITH THE IMPLEMENTATION OF THE ENERGY POLICY ACT OF 2005 AND RELATED LITIGATION, SUBSIDY ISSUES, MODELING, ECONOMIC RESEARCH, AND GENERAL ENERGY POLICY ADVOCACY AS THE ASSOCIATION FOR SHAREHOLDER-OWNED ELECTRIC UTILITIES, THESE PROGRAMS AND ACTIVITIES RELATE TO THE EXEMPT PURPOSE OF EDISON ELECTRIC INSTITUTE INC

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

EEI'S FINANCE AND TAX PROGRAM IS COMPRISED OF A HOST OF ACTIVITIES INVOLVING WALL STREET OUTREACH, TAX ISSUES, FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUES, FINANCIAL ACTIVITIES, AND STUDIES AS THE ASSOCIATION FOR SHAREHOLDER-OWNED ELECTRIC UTILITIES, THESE PROGRAMS AND ACTIVITIES RELATE TO THE EXEMPT PURPOSE OF EDISON ELECTRIC INSTITUTE INC

4d

Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e

Total program service expenses

\$

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 . . . . .		No
2	Is the organization required to complete Schedule B, Schedule of Contributors(see instructions)? . . . .		No
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	Yes	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .		
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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		No
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		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	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.		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.		No
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.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	Yes	
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.	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII		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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States? . . . .		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I . . . . .	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, Part II and IV . . . .		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, Part III and IV . . . .		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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .		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 . . . . .		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements . . . . .		

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22		No
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? <i>If "Yes," complete Schedule J</i> . . . . .	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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a		No
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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		
b	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
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 owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29		No
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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

<b>Part V</b> <b>Statements Regarding Other IRS Filings and Tax Compliance</b>			
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>			
		<b>Yes</b>	<b>No</b>
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	<b>1a</b>	232
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	<b>1b</b>	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	Yes
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	<b>2a</b>	214
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	<b>2b</b>	Yes
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	Yes
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	<b>3b</b>	Yes
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	<b>4a</b>	No
<b>b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	No
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	<b>6a</b>	No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>7a</b>	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders.	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	<b>13a</b>	
<b>b</b>	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	<b>13b</b>	
<b>c</b>	Enter the aggregate amount of reserves on hand.	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	No
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	<b>14b</b>	

Part VI

**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 ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . . . .		
1a	71		
b	Enter the number of voting members included in line 1a, above, who are independent . . . . .	1b	71
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	No
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	No
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	Did the organization have members or stockholders? . . . . .	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	7a	Yes
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .		
a	The governing body? . . . . .	8a	Yes
b	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	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates? . . . . .	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	11a	No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	12c	Yes
13	Did the organization have a written whistleblower policy? . . . . .	13	Yes
14	Did 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? . . . . .		
a	The organization's CEO, Executive Director, or top management official . . . . .	15a	Yes
b	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) . . . . .		
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	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	16b	

Section C. Disclosure

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)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made 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

Check if Schedule O contains a response to any question in this Part VII . . . . .

**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 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 organizations compensated any current or former officer, director, or trustee

[illegible]



## Part VII

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	13,519,537	0	2,544,456

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 20

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	3 Yes	
4	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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	5	No

## Section B. Independent Contractors

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
HUNTON & WILLIAMS 1900 K STREET WASHINGTON, DC 20006	CONSULTING	8,780,353
VENABLE LLP 575 SEVENTH STREET WASHINGTON, DC 20004	CONSULTING	2,543,419
OCE BUSINESS SERVICES 855 AVENUE OF THE AMERICAS NEW YORK, NY 10001	BUSINESS SERVICE CENTER	589,460
WINSTON & STRAWN LLP 1700 K ST WASHINGTON, DC 20006	CONSULTING	516,310
ICF RESOURCES INC 9300 LEE HIGHWAY FAIRFAX, VA 22031	CONSULTING	465,056
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization <b>5</b>		

Part VIII

Statement of Revenue

				(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	1a	Federated campaigns . . .	1a					
	b	Membership dues . . . . .	1b					
	c	Fundraising events . . . . .	1c					
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f . . . . .						
Program Service Revenue			Business Code					
	2a	MEMBERSHIP DUES	900099	68,642,616	68,642,616			
	b	MEETINGS	900099	7,741,389	7,741,389			
	c	PROGRAMS	900099	2,716,633	2,716,633			
	d	ADVERTISING	541800	731,498	731,498			
	e	PUBLICATIONS	511190	199,043	199,043			
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .		80,031,179				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .		4,051,732			4,051,732	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties . . . . .						
	6a	(i) Real		(ii) Personal				
		Gross rents						
		b Less rental expenses						
		c Rental income or (loss)						
	d	Net rental income or (loss) . . . . .						
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory	75,901,099					
		b Less cost or other basis and sales expenses	75,981,243					
		c Gain or (loss)	-80,144					
	d	Net gain or (loss) . . . . .		-80,144			-80,144	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a					
	b	Less direct expenses . . . . .	b					
	c	Net income or (loss) from fundraising events . .						
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a					
	b	Less direct expenses . . . . .	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances . . . . .	a					
	b	Less cost of goods sold . . . . .	b					
	c	Net income or (loss) from sales of inventory . .						
	Miscellaneous Revenue		Business Code					
	11a							
	b							
	c							
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .							
12	Total revenue. See Instructions . . . . .		84,002,767	79,299,681	731,498	3,971,588		

Part IXStatement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,307,394			
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees . . . . .	14,610,504			
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	13,723,356			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	3,605,014			
9	Other employee benefits . . . . .	2,358,023			
10	Payroll taxes . . . . .	1,445,690			
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .	12,729,818			
c	Accounting . . . . .	92,968			
d	Lobbying . . . . .	2,511,536			
e	Professional fundraising See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .	358,520			
g	Other . . . . .	4,541,060			
12	Advertising and promotion . . . . .	1,092,830			
13	Office expenses . . . . .	3,168,272			
14	Information technology . . . . .	1,463,387			
15	Royalties . . . . .	1,969			
16	Occupancy . . . . .	4,680,715			
17	Travel . . . . .	1,944,184			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	10,330			
19	Conferences, conventions, and meetings . . . . .	6,086,728			
20	Interest . . . . .				
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .	472,268			
23	Insurance . . . . .				
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 )				
a	MISCELLANEOUS	771,988			
b	SUBSCRIPTIONS	445,746			
c	PERSONAL PROPERTY TAX	31,833			
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	77,454,133			
26	Joint costs. Check here <input type="checkbox"/> if following 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				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			2,600	1	2,600
	2	Savings and temporary cash investments . . . . .			9,099,767	2	4,928,791
	3	Pledges and grants receivable, net . . . . .				3	
	4	Accounts receivable, net . . . . .			1,402,958	4	1,832,899
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			439,144	5	485,851
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .			1,007,425	9	915,684
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D . . . . .	10a	3,680,484			
	b	Less: accumulated depreciation . . . . .	10b	1,951,220	1,547,479	10c	1,729,264
	11	Investments—publicly traded securities . . . . .			85,740,304	11	91,164,473
	12	Investments—other securities. See Part IV, line 11 . . . . .				12	
	13	Investments—program-related. See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets. See Part IV, line 11 . . . . .			0	15	515,718
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .			99,239,677	16	101,575,280
Liabilities	17	Accounts payable and accrued expenses . . . . .			7,463,447	17	6,611,543
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .			27,194,773	19	26,824,282
	20	Tax-exempt bond liabilities . . . . .				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .				22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .				23	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .			44,681,054	25	52,185,995
	26	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .			79,339,274	26	85,621,820
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>						
	27	Unrestricted net assets . . . . .			19,900,403	27	15,953,460
	28	Temporarily restricted net assets . . . . .				28	
	29	Permanently restricted net assets . . . . .				29	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	<b>Total net assets or fund balances</b> . . . . .			19,900,403	33	15,953,460
	34	<b>Total liabilities and net assets/fund balances</b> . . . . .			99,239,677	34	101,575,280

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	84,002,767
2	Total expenses (must equal Part IX, column (A), line 25)	2	77,454,133
3	Revenue less expenses Subtract line 2 from line 1	3	6,548,634
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,900,403
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-10,495,577
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	15,953,460

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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 in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> 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 the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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

2011

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

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

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

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

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$ 623,145
3	Volunteer hours	

Part 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
b	If "Yes," describe in Part IV		

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$	548,145
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$	75,000
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$	623,145
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
5	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) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION	1580 LINCOLN ST SUITE 1125 WASHINGTON,DC 20002	13-4220019	25,000	
(2) REPUBLICAN STATE LEADERSHIP COMMITTEE	1800 DIAGNOL ROAD ALEXANDRIA,VA 22314	05-0553252	50,000	

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check
- ☐
- if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check
- ☐
- if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a If zero or less, enter -0-														
i	Subtract line 1f from line 1c If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c 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)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? 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)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
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
1	Were substantially all (90% or more) dues received nondeductible by members?	1	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	No
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	66,037,569
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).		
a	Current year	2a	12,326,086
b	Carryover from last year	2b	277,003
c	Total	2c	12,603,089
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	11,780,458
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	822,631
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

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.

Identifier	Return Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	PART I-A, LINE 1	THE ORGANIZATION SUPPORTED POLITICAL ORGANIZATIONS AND CANDIDATES FOR STATE AND LOCAL OFFICE WHERE LEGALLY PERMISSIBLE



SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
EDISON ELECTRIC INSTITUTE INC

Employer identification number  
13-0659550

Part I 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
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	
6	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	
	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

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

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes

☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes

☐ No

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

Part 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.

1a

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

b

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

▶ \$ \_\_\_\_\_

(ii)

Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance . . . . .				
b	Contributions . . . . .				
c	Investment earnings or losses . . . . .				
d	Grants or scholarships . . . . .				
e	Other expenditures for facilities and programs . . . . .				
f	Administrative expenses . . . . .				
g	End of year balance . . . . .				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations . . . . .

(ii)

related organizations . . . . .

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .		39,798	3,899	35,899
d Equipment . . . . .		2,111,988	1,675,476	436,512
e Other . . . . .		1,528,698	271,845	1,256,853
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				1,729,264



Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements . . . . .	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments . . . . .	2a
b	Donated services and use of facilities . . . . .	2b
c	Recoveries of prior year grants . . . . .	2c
d	Other (Describe in Part XIV) . . . . .	2d
e	Add lines 2a through 2d . . . . .	2e
3	Subtract line 2e from line 1 . . . . .	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a
b	Other (Describe in Part XIV) . . . . .	4b
c	Add lines 4a and 4b . . . . .	4c
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements . . . . .	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities . . . . .	2a
b	Prior year adjustments . . . . .	2b
c	Other losses . . . . .	2c
d	Other (Describe in Part XIV) . . . . .	2d
e	Add lines 2a through 2d . . . . .	2e
3	Subtract line 2e from line 1 . . . . .	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a
b	Other (Describe in Part XIV) . . . . .	4b
c	Add lines 4a and 4b . . . . .	4c
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	EDISON ELECTRIC INSTITUTE INC AND THE FOUNDATION HAVE EVALUATED THEIR TAX POSITIONS AND DETERMINED THAT THEIR POSITIONS ARE MORE- LIKELY-THAN-NOT TO BE SUSTAINED ON EXAMINATION EDISON ELECTRIC INSTITUTE INC AND THE FOUNDATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES THE TAX RETURNS FOR THE FISCAL YEARS ENDED 2008 THROUGH 2010 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES



[illegible]

**3** Enter total number of other organizations or entities . . . . . ►

## Part III

[illegible]

**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)*

☐

Yes

☒

No
- 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)*

☐

Yes

☒

No
- 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)*

☐

Yes

☒

No
- 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)*

☐

Yes

☒

No
- 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)*

☐

Yes

☒

No
- 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).*

☐

Yes

☒

No



## Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

[illegible]

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
EDISON ELECTRIC INSTITUTE INC

Employer identification number  
13-0659550

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

38

3

Enter total number of other organizations listed in the line 1 table . . . . . ▶

11

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 WHEN GRANT FUNDS ARE AWARDED, EEI MAY REQUEST THE AMOUNTS BE RESTRICTED FOR A SPECIFIC PURPOSE GRANTEES MANY TIMES WILL REPORT BACK TO EEI THE SPECIFIC USE 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) Amount of cash grant	(e) Amount 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	501C3	25,000				EVENT SPONSORSHIP
ACCF-CTR FOR POLICY RESEARCH 1750 K STREET 400 WASHINGTON,DC 20006	52-1091172	501C3	15,000				CONTRIBUTIONS / MEMBERSHIPS

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE TO SAVE ENERGY1850 M STREET NW WASHINGTON,DC 20006	52-1082991	501C3	5,000				EVENT SPONSORSHIP
ASAECENTER FOR ASSOCIATION LEADERSHIP1575 I STREET NW WASHINGTON,DC 20005	53-0026940	501C6	10,500				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASPEN INSTITUTE PO BOX 222 QUEENSTOWN, MD 21658	84-0399006	501C3	7,400				CONTRIBUTIONS / MEMBERSHIPS
BUILDING AND CONSTRUCTION TRADES DEPARTE 815 16TH STREET NW SUITE 600 WASHINGTON, DC 20006	53-0025755	501C5	15,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMPAIGN FOR HOME ENERGY ASSISTANCE1615 L STREET NW WASHINGTON, DC 20036	52-1243510	501C3	15,000				CORPORATE RESPONSIBILITY
CAPITAL AREA REACH PROGRAM PO BOX 77213 WASHINGTON, DC 20013	26-4088542	501C3	5,000				CORPORATE RESPONSIBILITY

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR AUTOMOTIVE RESEARCH1000 VICTORS WAY SUITE 200 ANN ARBOR, MI 48108	01-0779978	501C3	5,000				EVENT SPONSORSHIP
CENTER FOR ENERGY WORKFORCE DEVELOPMENT701 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	20-4504014	501C3	105,000				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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COALITION FOR A FISCALLY SOUND AMERICA888 SIXTEENTH STREET NW WASHINGTON, DC 20006	45-3770954	501C4	25,000				CONTRIBUTIONS / MEMBERSHIPS
CONGRESSIONAL BLACK CAUCUS FOUNDATION1720 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	52-1160561	501C4	10,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGRESSIONAL BLACK CAUCUS INSTITUTE455 MASSACHUSETTS AVE NW SUITE 150-355 WASHINGTON, DC 20001	52- 2270607	501C4	10,000				EVENT SPONSORSHIP
CONSORTIUM OF CATHOLIC ACAD 5001 EASTERN AVENUE SUITE 207 HYATTSVILLE, MD 20782	52- 2050972	501C3	5,000				CORPORATE RESPONSIBILITY

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDISON INNOVATION FOUNDATION1 RIVERFRONT PLAZA 3RD FLOOR NEWARK,NJ 07102	22-3442892	501C3	5,000				CONTRIBUTIONS / MEMBERSHIPS
ELECTRIC DRIVE TRANSPORTATION ASSOCIATIO1101 VERMONT AVENUE NW WASHINGTON,DC 20005	52-1665058	501C6	12,500				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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ELECTRICAL SAFETY FOUNDATION INT'L 1300 NORTH 17TH STREET SUITE 1752 ROSSLYN, VA 22209	52-1892239	501C3	5,000				PROGRAM SUPPORT
FAITH AND POLITICS INSTITUTE 110 MARYLAND AVENUE NE SUITE 504 WASHINGTON, DC 20002	52-1759052	501C3	5,000				EVENT SPONSORSHIP

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
GEORGE WBUSH PRESIDENTIAL CENTERPO BOX 600610 DALLAS,TX 75206	20- 4119317	501C3	15,000				CORPORATE RESPONSIBILITY
HAWKS ALOFT INC PO BOX 10028 ALBUQUERQUE,NM 87184	85- 0418661	501C3	5,000				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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOINT CENTER FOR POLITICAL AND ECONOMIC STUDIES1090 VERMONT AVENUE NW SUITE 1100 WASHINGTON, DC 20005	52-1069070	501C3	15,000				EVENT SPONSORSHIP
KEYSTONE CENTER 1628 SAINTS JOHN RD KEYSTONE, CO 80435	84-0688506	501C3	10,500				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEADERSHIP CONFERENCE ON CIVIL AND HUMAN RIGHTS1629 K STREET NW 10TH FLOOR WASHINGTON, DC 20006	52-9789800	501C4	10,000				PROGRAM SUPPORT
LEADERSHIP GREATER WASHINGTON INC 2101 L STREET NW WASHINGTON, DC 20037	52-1552960	501C3	5,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL BLACK CHAMBER OF COMMERCE1350 CONNECTICUT AVENUE NW SUITE 405 WASHINGTON,DC 20036	35-1889294	501C3	15,000				EVENT SPONSORSHIP
NATIONAL CONFERENCE OF STATE LEGISLATURE7700 EAST FIRST PLACE DENVER,CO 80230	84-0772595	501C3	12,473				EVENT SPONSORSHIP



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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL FUEL FUNDS NETWORK 1010 VERMONT AVENUE NW SUITE 718 WASHINGTON, DC 20005	52-1559709	501C3	5,000				PROGRAM SUPPORT
NATIONAL LABOR COLLEGE10000 NEW HAMPSHIRE AVENUE SILVER SPRING, MD 20903	52-0895834	501C3	5,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL LAMPAC 701 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	26-2620296	501C3	49,500				PROGRAM SUPPORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY1800 M STREET WASHINGTON, DC 22036	53-0237585	501C3	26,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL ORGANIZATION OF BLACK ELECTED LEGISLATIVE WOMENPO BOX 7217 DENVER, CO 80207	95-4546966	501C3	15,000				PROGRAM SUPPORT
NATIONAL POLICY ALLIANCE805 15TH STREET NW 2 FLR WASHINGTON, DC 20005	45-3204563		7,500				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PHI COMMUNITY FOUNDATION701 NINTH STREET NW EP9420 WASHINGTON,DC 20068	51-0367729	501C3	5,000				EVENT SPONSORSHIP
POINTS OF LIGHT INSTITUTE600 MEANS STREET SUITE 210 ATLANTA,GA 30318	65-0206641	501C3	5,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PREVENT CANCER FOUNDATION1600 DUKE STREET 500 ALEXANDRIA,VA 22314	52-1429544	501C3	10,000				EVENT SPONSORSHIP
RESOURCES FOR THE FUTURE1616 P STREET NW WASHINGTON,DC 20036	53-0220900	501C3	10,000				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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROOSEVELT INSTITUTE520 LEXINGTON AVE 18TH FLOOR NEW YORK, NY 10022	23-7213592	501C3	10,000				PROGRAM SUPPORT
SCE'S RIVERGRADE VICTIMS FUND 1803 WALNUT GROVE AVENUE ROSEMEAD, CA 91770	95-1240335		5,000				CORPORATE RESPONSIBILITY

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SO OTHERS MIGHT EAT71 O STREET NW WASHINGTON, DC 20001	23-7098123	501C3	5,000				EVENT SPONSORSHIP
SOUTHERN STATES ENERGY BOARD 6325 AMHERST COURT NORCROSS, GA 30092	58-0864888	501C1	7,500				EVENT SPONSORSHIP

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
TASTE OF THE SOUTHPO BOX 2826 WASHINGTON, DC 20013	53-1343458	501C3	10,000				EVENT SPONSORSHIP
THOMAS ALVA EDISON FOUNDATION701 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	52-2106274	501C3	65,604				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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES ENERGY ASSOCIATION1300 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	13-6219869	501C3	5,000				EVENT SPONSORSHIP
UNITED WAY NATIONAL CAPITAL 95 M STREET SW WASHINGTON, DC 20024	53-0234290	501C3	5,000				CORPORATE RESPONSIBILITY

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
US NAVY MEMORIAL FOUNDATION701 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	52-1104476	501C3	5,500				EVENT SPONSORSHIP
USHCC1424 K STREET NW SUITE 401 WASHINGTON, DC 20005	52-1754621	501C6	10,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UTILITIES TELECOM COUNCIL1901 PENNSYLVANIA AVE NW WASHINGTON, DC 20006	52-6042453	501C6	5,000				EVENT SPONSORSHIP
CONGRESSIONAL BASEBALL GAME 1918 18TH STREET WASHINGTON DC 20009 CHEVY CHASE, MD 20815	52-6063003	501C3	10,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTERN GOVERNORS' ASSOCIATION1600 BROADWAY SUITE 1700 DENVER, CO 80202	84-0747227	SECTION 170	10,000				PROGRAM SUPPORT
WESTERN LAMPAC 321 16TH AVENUE SOUTH SEATTLE, WA 98144	20-2432543	501C6	12,000				EVENT SPONSORSHIP

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN'S COUNCIL ON ENERGY ANDPO BOX 33211 WASHINGTON,DC 20033	52-1258690	501C3	5,000				EVENT SPONSORSHIP

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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  
13-0659550

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision 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 organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
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		
a	Receive a severance payment or change-of-control payment?	4a	No
b	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	No
	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		
a	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		
a	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 accrued 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	

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.

[illegible]

**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.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	PART 1, QUESTION 1A - TRAVEL FOR COMPANIONS THOMAS KUHN \$492 INCLUDED IN INCOME JOHN EASTON \$1,178 INCLUDED IN INCOME PART I, QUESTION 1A - HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES THOMAS KUHN \$1,380 INCLUDED IN INCOME RICHARD MCMAHON \$860 INCLUDED IN INCOME
	PART I, LINE 4B	THE EDISON ELECTRIC INSTITUTE PROVIDES A NON-QUALIFIED PLAN FOR ELIGIBLE MANAGEMENT EMPLOYEES WHOSE BENEFITS ARE REDUCED BY IRS REGULATIONS THOMAS R KUHN \$2,448,566 DAVID K OWENS \$593,920 BRIAN WOLF \$69,076 LYNN H LEMASTER \$141,290 EDWIN R ANTHONY \$165,427 EDWARD H COMER \$74,828 JOHN J EASTON \$27,799 PATRIC D O'KELLEY \$24,650 QUINLAN SHEA \$34,657 KATHRYN STECKELBERG \$45,498 JAMES FAMA \$37,625 RICHARD MCMAHON \$53,358 MARY MILLER \$62,030 JOHN SCHLENKER \$3,370 RICHARD TEMPCHIN \$22,790



**Software ID:**  
**Software Version:**  
**EIN:** 13-0659550  
**Name:** EDISON ELECTRIC INSTITUTE INC

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
THOMAS KUHN	(i) (ii)	821,583 0	644,853 0	5,270,191 0	48,902 0	24,646 0	6,810,175 0	2,544,000 0
DAVID OWENS	(i) (ii)	504,473 0	268,000 0	28,539 0	642,822 0	11,235 0	1,455,069 0	0 0
LYNN LEMASTER	(i) (ii)	13,773 0	184,000 0	219,824 0	183,670 0	1,419 0	602,686 0	0 0
BRIAN WOLFF	(i) (ii)	503,473 0	225,000 0	2,824 0	119,978 0	11,988 0	863,263 0	0 0
EDWIN ANTHONY	(i) (ii)	40,249 0	148,000 0	437,402 0	203,689 0	3,205 0	832,545 0	118,435 0
EDWARD COMER	(i) (ii)	281,864 0	99,000 0	8,509 0	123,730 0	21,678 0	534,781 0	0 0
MARY MILLER	(i) (ii)	265,759 0	100,000 0	15,565 0	110,932 0	5,392 0	497,648 0	0 0
PATRIC O'KELLEY	(i) (ii)	13,473 0	69,000 0	71,521 0	47,343 0	208 0	201,545 0	0 0
JOHN SCHLENKER	(i) (ii)	191,345 0	35,000 0	15,689 0	58,266 0	18,814 0	319,114 0	0 0
QUINLAN SHEA	(i) (ii)	232,191 0	90,000 0	20,449 0	88,926 0	15,569 0	447,135 0	0 0
RICHARD MCMAHON	(i) (ii)	230,172 0	90,000 0	17,605 0	108,427 0	21,184 0	467,388 0	0 0
JAMES FAMA	(i) (ii)	227,442 0	85,000 0	18,004 0	89,984 0	21,158 0	441,588 0	0 0
KATHRYN STECKELBERG	(i) (ii)	238,393 0	82,000 0	1,995 0	99,635 0	9,331 0	431,354 0	0 0
JOHN EASTON	(i) (ii)	206,201 0	76,000 0	35,502 0	76,701 0	13,617 0	408,021 0	0 0
BRIAN MCCORMACK	(i) (ii)	229,296 0	75,000 0	1,429 0	21,800 0	8,690 0	336,215 0	0 0
RICHARD TEMPCHIN	(i) (ii)	178,402 0	66,000 0	20,104 0	78,224 0	20,995 0	363,725 0	0 0
SADEGH RAZEGHI	(i) (ii)	169,977 0	32,900 0	22,565 0	50,319 0	2,531 0	278,292 0	0 0
JAMES ROEWER	(i) (ii)	144,925 0	43,400 0	17,478 0	48,143 0	20,874 0	274,820 0	0 0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
J BRUCE BROWN	(i)	143,968	28,000	23,469	43,661	3,365	242,463	0
	(ii)	0	0	0	0	0	0	0
JAMES OWEN	(i)	164,650	15,000	13,111	44,993	18,414	256,168	0
	(ii)	0	0	0	0	0	0	0

Schedule L  
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
EDISON ELECTRIC INSTITUTE INC

Employer identification number  
13-0659550

Part I

Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1) THOMAS KUHN SPLIT DOLLAR LIFE INSURANCE POLICY WITH CEO		X	0	485,851		No	Yes		Yes	
Total . . . . . ▶	\$ 485,851									

Part III

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

**Part IV**

**Business Transactions Involving Interested Persons.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

**Part V**

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

Identifier	Return Reference	Explanation
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**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.**

OMB No 1545-0047

**2011****Open to Public  
Inspection**Name of the organization  
EDISON ELECTRIC INSTITUTE INC**Employer identification number**

13-0659550

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 1	THE BOARD OF DIRECTORS, AFTER EACH ANNUAL ELECTION OF DIRECTORS AND BY THE RESOLUTION ADOPTED BY A MAJORITY OF THE ENTIRE BOARD, MAY DESIGNATE FROM ITS OWN MEMBERSHIP AN EXECUTIVE COMMITTEE OF EIGHTEEN INCLUDING THE CHAIRMAN AND VICE CHAIRMEN IN ADDITION TO THOSE DESIGNATED TO SERVE ON THE EXECUTIVE COMMITTEE, FORMER CHAIRMEN OF THE INSTITUTE WHO CONTINUE AS CHAIRMAN OR CHIEF EXECUTIVE OFFICER OF A CLASS A INSTITUTE MEMBER SHALL SERVE AS EX OFFICIO, NON-VOTING MEMBERS OF THE COMMITTEE. THE EXECUTIVE COMMITTEE MAY EXERCISE ALL THE POWERS OF THE BOARD OF DIRECTORS BETWEEN MEETINGS OF THE BOARD EXCEPT 1 APPROVAL OR RECOMMENDATION TO MEMBERS OF ACTION THAT IS REQUIRED TO BE APPROVED BY MEMBERS UNDER STATUTE, 2 THE FILLING OF VACANCIES IN THE BOARD OF DIRECTORS OR IN ANY COMMITTEE THEREOF, 3 THE FIXING OF COMPENSATION OF THE DIRECTORS FOR SERVING ON THE BOARD OR ON ANY COMMITTEE THEREOF, 4 THE AMENDMENT OR REPEAL OF THE BYLAWS OR THE ADOPTION OF NEW BYLAWS, 5 THE AMENDMENT OR REPEAL OF ANY RESOLUTION OF THE BOARD WHICH BY ITS TERMS SHALL NOT BE SO AMENDABLE OR REPEALABLE AND AS OTHERWISE REQUIRED BY RESOLUTION OF THE BOARD OF DIRECTORS. THE CHAIRMAN SHALL PRESIDE AT MEETINGS OF THE EXECUTIVE COMMITTEE. VACANCIES IN THE MEMBERSHIP OF THE COMMITTEE SHALL BE FILLED BY THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE SHALL KEEP REGULAR MINUTES OF THE PROCEEDINGS AND REPORT THE SAME TO THE BOARD WHEN REQUIRED.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	<p>THE ORGANIZATION HAS THREE VOTING CLASSES OF MEMBERSHIP: OPERATING COMPANY MEMBERS - INVESTOR-OWNED OPERATING ELECTRIC CORPORATIONS ENGAGED IN THE GENERATION, TRANSMISSION, OR DISTRIBUTION OF ELECTRICITY TO THE PUBLIC IN THE US OR ITS POSSESSIONS; EEI'S 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 - EDISON ELECTRIC INSTITUTE'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 - EDISON ELECTRIC INSTITUTE INC. 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 QUALIFICATIONS, IN THE OPINION OF THE BOARD AND BY ITS ELECTION, ARE ENTITLED TO SUCH HONOR.</p>

Identifier	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

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



Identifier	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 INC IS REVIEWED BY THE ORGANIZATION'S OUTSIDE CPA FIRM AND REPORTED BY THE ENGAGEMENT PARTNER TO THE INSTITUTE'S EXECUTIVE COMMITTEE IN ADVANCE OF FILING

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. EDISON ELECTRIC INSTITUTE INC '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. EDISON ELECTRIC INSTITUTE, INC. 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 EDISON ELECTRIC INSTITUTE INC '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.

Identifier	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.

Identifier	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.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -294,497 OTHER COMPREHENSIVE LOSS -10,201,080 TOTAL TO FORM 990, PART XI, LINE 5 -10,495,577

Identifier	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 0 5 HOUR THOMAS ALVA EDISON FOUNDATION 1 HOUR JOHN S SCHLENKER DEVOTES APPROXIMATELY 48 HOURS PER WEEK AS FOLLOWS EDISON ELECTRIC INSTITUTE, INC 45 HOURS CENTER FOR WORKFORCE DEVELOPMENT 1 HOUR NATIONAL LAMPAC 0 5 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

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ 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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
EDISON ELECTRIC INSTITUTE INC

Employer identification number  
13-0659550

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(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 (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(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) Section 512(b)(13) controlled organization	
						Yes	No
(1) THOMAS ALVA EDISON FOUNDATION  701 PENNSYLVANIA AVE NW  WASHINGTON, DC 20004 52-2106274	SCIENTIFIC/EDUCATION	DC	501(C)(3)	N/A	N/A		No
(2) CENTER FOR ENERGY WORKFORCE DEVELOPMENT  701 PENNSYLVANIA AVE NW  WASHINGTON, DC 20004 20-4504014	EDUCATION	DE	501(C)(3)	N/A	N/A		No

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, 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) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership



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

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

Yes

Yes

Yes

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

(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	997,187	
(2) THOMAS ALVA EDISON FOUNDATION	P	503,742	
(3) CENTER FOR ENERGY WORKFORCE DEVELOPMENT	P	115,044	
(4) CENTER FOR ENERGY WORKFORCE DEVELOPMENT	Q	84,833	
(5)			
(6)			

Schedule R (Form 990) 2011

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.

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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Additional Data

Software ID:

Software Version:

EIN: 13-0659550

Name: EDISON ELECTRIC INSTITUTE INC

Form 990, Special Condition Description:

Special Condition Description
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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 week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD C KELLY CHAIR	3 00	X						0	0	0
THOMAS F FARRELL II VICE CHAIR/CHAIR	3 00	X						0	0	0
LEWIS HAY III VICE CHAIR	3 00	X						0	0	0
MICHAEL WYACKIRA VICE CHAIR	3 00	X						0	0	0
WILIAM D JOHNSON VICE CHAIR	3 00	X						0	0	0
ANDRES GLUSKI DIRECTOR	1 00	X						0	0	0
TIM MCLEOD DIRECTOR	1 00	X						0	0	0
ALAN R HODNIK DIRECTOR	1 00	X						0	0	0
PAUL J EVANSON DIRECTOR	1 00	X						0	0	0
WILLIAM D HARVEY DIRECTOR	1 00	X						0	0	0
THOMAS R VOSS DIRECTOR	1 00	X						0	0	0
MICHAEL G MORRIS DIRECTOR	1 00	X						0	0	0
NICHOLAS K AKINS DIRECTOR	1 00	X						0	0	0
JOHN C PROCARIO DIRECTOR	1 00	X						0	0	0
SCOTT L MORRIS DIRECTOR	1 00	X						0	0	0
DAVID R EMERY DIRECTOR	1 00	X						0	0	0
DAVID M MCCLANAHAN DIRECTOR	1 00	X						0	0	0
LAWRENCE J REILLY DIRECTOR	1 00	X						0	0	0
ROBERT H YOUNG DIRECTOR	1 00	X						0	0	0
STEVEN V LANT DIRECTOR	1 00	X						0	0	0
MICHAEL H MADISON DIRECTOR	1 00	X						0	0	0
BRUCE A WILLIAMSON DIRECTOR	1 00	X						0	0	0
JOHN G RUSSELL DIRECTOR	1 00	X						0	0	0
KEVIN BURKE DIRECTOR	1 00	X						0	0	0
MAYO A SHATTUCK III DIRECTOR	1 00	X						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 week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PAUL M BARBAS DIRECTOR	1 00	X						0	0	0
GERARD M ANDERSON DIRECTOR	1 00	X						0	0	0
JAMES E ROGERS DIRECTOR	1 00	X						0	0	0
RICHARD RIAZZI DIRECTOR	1 00	X						0	0	0
THEODORE F CRAVER JR DIRECTOR	1 00	X						0	0	0
DAVID W STEVENS DIRECTOR	1 00	X						0	0	0
WILLIAM H SHEPPARD DIRECTOR	1 00	X						0	0	0
ROBERT JS HANF DIRECTOR	1 00	X						0	0	0
GERRY CHASSE DIRECTOR	1 00	X						0	0	0
BRADLEY P BEECHER DIRECTOR	1 00	X						0	0	0
WILLIAM L GIPSON DIRECTOR	1 00	X						0	0	0
JOHN F YOUNG DIRECTOR	1 00	X						0	0	0
ROD WEST DIRECTOR	1 00	X						0	0	0
CHRISTOPHER CRANE DIRECTOR	1 00	X						0	0	0
JOHN W ROWE DIRECTOR	1 00	X						0	0	0
ANTHONY J ALEXANDER DIRECTOR	1 00	X						0	0	0
EDWARD R MULLER DIRECTOR	1 00	X						0	0	0
MICHAEL J CHESSER DIRECTOR	1 00	X						0	0	0
MARY G POWELL DIRECTOR	1 00	X						0	0	0
CONSTANCE LAU DIRECTOR	1 00	X						0	0	0
ROBERT D KUMP DIRECTOR	1 00	X						0	0	0
J LAMONT KEEN DIRECTOR	1 00	X						0	0	0
CHARLES A SCHROCK DIRECTOR	1 00	X						0	0	0
JOSEPH L WELCH DIRECTOR	1 00	X						0	0	0
GARY J WOLTER DIRECTOR	1 00	X						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 week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GREGORY E ABEL DIRECTOR	1 00	X						0	0	0
DAVID L GOODIN DIRECTOR	1 00	X						0	0	0
PHILIP BARNHARD IV DIRECTOR	1 00	X						0	0	0
THOMAS B KING DIRECTOR	1 00	X						0	0	0
JIMMY STATON DIRECTOR	1 00	X						0	0	0
CHARLES W SHIVERY DIRECTOR	1 00	X						0	0	0
ROBERT C ROWE DIRECTOR	1 00	X						0	0	0
THOMAS J MAY DIRECTOR	1 00	X						0	0	0
PETER B DELANEY DIRECTOR	1 00	X						0	0	0
JOHN D ERICKSON DIRECTOR	1 00	X						0	0	0
EDWARD J MCINTYRE DIRECTOR	1 00	X						0	0	0
JOSEPH M RIGBY DIRECTOR	1 00	X						0	0	0
PETER A DARBEE DIRECTOR	1 00	X						0	0	0
CHRISTOPHER P JOHNS DIRECTOR	1 00	X						0	0	0
DONALD E BRANDT DIRECTOR	1 00	X						0	0	0
PATRICIA K VINCENT-COLLAWN DIRECTOR	1 00	X						0	0	0
JAMES J PIRO DIRECTOR	1 00	X						0	0	0
JAMES H MILLER DIRECTOR	1 00	X						0	0	0
RALPH IZZO DIRECTOR	1 00	X						0	0	0
KIMBERLY J HARRIS DIRECTOR	1 00	X						0	0	0
STEPHEN P REYNOLDS DIRECTOR	1 00	X						0	0	0
THOMAS A FANNING DIRECTOR	1 00	X						0	0	0
MAURICE T KLEFEKER DIRECTOR	1 00	X						0	0	0
JOHN B RAMIL DIRECTOR	1 00	X						0	0	0
LON R GREENBERG DIRECTOR	1 00	X						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 week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES P TORGERSON DIRECTOR	1 00	X						0	0	0
PAUL J BONAVIDA DIRECTOR	1 00	X						0	0	0
ROBERT G SCHOENBERGER DIRECTOR	1 00	X						0	0	0
CARL L CHAPMAN DIRECTOR	1 00	X						0	0	0
CHRISTOPHER L DUTTON DIRECTOR	1 00	X						0	0	0
WILLIAM B MOORE DIRECTOR	1 00	X						0	0	0
MARK A RUELLE DIRECTOR	1 00	X						0	0	0
GALE E KLAPPA DIRECTOR	1 00	X						0	0	0
MATTHEW W SUNSERI DIRECTOR	1 00	X						0	0	0
BENJAMIN GS FOWKE III DIRECTOR	1 00	X						0	0	0
THOMAS KUHN PRESIDENT	45 00			X				6,736,627	0	73,548
DAVID OWENS EXECUTIVE VICE PRESIDENT	45 00			X				801,012	0	654,057
LYNN LEMASTER SENIOR VP POLICY	45 00			X				417,597	0	185,089
BRIAN WOLFF EXECUTIVE VICE PRESIDENT	45 00			X				731,297	0	131,966
EDWIN ANTHONY VP CORP AFFAIRS	45 00			X				625,651	0	206,894
EDWARD COMER VP, GENERAL COUNSEL	45 00			X				389,373	0	145,408
MARY MILLER VP, HUMAN RESOURCES	45 00			X				381,324	0	116,324
PATRIC O'KELLEY TREASURER/CFO	45 00			X				153,994	0	47,551
JOHN SCHLENKER TREASURER/CFO	45 00			X				242,034	0	77,080
QUINLAN SHEA EXEC DIR, ENVIRONMENT	45 00			X				342,640	0	104,495
RICHARD MCMAHON EXE DIR, FINANCE/ENERGY S	45 00			X				337,777	0	129,611
JAMES FAMA EXEC DIR, ENERGY DELIVERY	45 00			X				330,446	0	111,142
KATHRYN STECKELBERG EXEC DIR, GOV'T RELATIONS	45 00			X				322,388	0	108,966
JOHN EASTON VP INT'L PROGRAMS	45 00			X				317,703	0	90,318
BRIAN MCCORMACK VP POLITICAL & EXTERNAL AFFAIRS	45 00			X				305,725	0	30,490

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

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD TEMPCHIN EXEC DIR, RETAIL ENERGY SERVICES	45 00					X		264,506	0	99,219
SADEGH RAZEGHI CIO	45 00					X		225,442	0	52,850
JAMES ROEWER DIR, USWAG	45 00					X		205,803	0	69,017
J BRUCE BROWN DEPUTY GEN COUNSEL, CORP AFFAIRS	45 00					X		195,437	0	47,026
JAMES OWEN EXEC DIR, MEMBER REL & MTG SERVICES	45 00					X		192,761	0	63,407