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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)	OMB No 1545-0047 2009 Open to Public Inspection
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009				
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NATIONAL OILHEAT RESEARCH ALLIANCE		D Employer identification number 54-2024246
		Doing Business As		E Telephone number (703) 340-1642
		Number and street (or P O box if mail is not delivered to street address) 600 CAMERON STREET No 206	Room/suite	G Gross receipts \$ 12,163,472
		City or town, state or country, and ZIP + 4 ALEXANDRIA, VA 22314		
	F Name and address of principal officer JOHN HUBER 600 CAMERON STREET No 206 ALEXANDRIA, VA 22314		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) (6) (Insert no) ☐ 4947(a)(1) or ☐ 527				
J Website: WWW.NORA-OILHEAT.ORG				
K Form of organization ☐ Corporation ☐ Trust ☒ Association ☐ Other		L Year of formation 2001	M State of legal domicile DC	

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities <u>TO PROMOTE THE INTERESTS OF PERSONS INVOLVED IN THE SALE AND DISTRIBUTION OF OILHEAT</u> 		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a) 3 <u>5</u>		
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 <u>5</u>		
	5 Total number of employees (Part V, line 2a) 5 <u></u>		
	6 Total number of volunteers (estimate if necessary) 6 <u></u>		
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a <u></u>		
	b Net unrelated business taxable income from Form 990-T, line 34 7b <u></u>		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	12,625,644	12,009,068
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	114,408	6,068
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		13,127
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,740,052	12,028,263
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	9,123,651	9,610,877
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	351,022	343,519
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>0</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	3,248,695	2,477,938
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	12,723,368	12,432,334
	19 Revenue less expenses Subtract line 18 from line 12	16,684	-404,071
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	8,639,465	9,664,249
	21 Total liabilities (Part X, line 26)	6,732,254	8,160,011
	22 Net assets or fund balances Subtract line 21 from line 20	1,907,211	1,504,238

Part II Signature Block	
Sign Here	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
	***** Signature of officer 2010-11-11 Date
	JOHN HUBER PRESIDENT Type or print name and title
Paid Preparer's Use Only	Preparer's signature Mark D Myers Date Check if self-employed ☒ Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ROSSLANGAN & MCKENDREE LLP 7900 WESTPARK DR STE T420 MCLEAN, VA 22102 EIN
	Phone no (703) 893-2660

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization's mission

TO PROMOTE THE COMMON BUSINESS INTERESTS OF PERSONS INVOLVED IN THE WHOLESALE AND RETAIL SALE AND DISTRIBUTION OF OILHEAT THROUGHOUT THE UNITED STATES BY ENHANCING SAFETY, TRAINING, RESEARCH AND DEVELOPMENT BY CONSUMER EDUCATION ABOUT OILHEAT AND THE OILHEAT INDUSTRY

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 exempt purpose achievements for each of the organization's three largest program services 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 \$ 9,610,877 including grants of \$ 9,610,877) (Revenue \$)

STATE GRANTS ALLOWS STATES TO DO CONSUMER EDUCATION PRODUCTION, EDUCATION AND TRAINING, AND/OR RESEARCH AND DEVELOPMENT

4b

(Code) (Expenses \$ 777,114 including grants of \$) (Revenue \$)

PROVIDE FOR RESEARCH, DEVELOPMENT, AND DEMONSTRATION OF CLEAN AND EFFICIENT OILHEAT UTILIZATION EQUIPMENT NORA HAS FUNDED A STUDY AT BROOKHAVEN NATIONAL LAB TO BETTER UNDERSTAND FUEL QUALITY ISSUES NORA ALSO SPONSORS RESEARCH TO IMPROVE HEATING EQUIPMENT EFFICIENCY

4c

(Code) (Expenses \$ 910,000 including grants of \$) (Revenue \$)

NORA PROVIDES AND DISTRIBUTES MATERIALS TO EDUCATE THE PUBLIC ABOUT THE ADVANTAGES OF OILHEAT THESE INCLUDE BROCHURES AND RADIO AND TELEVISION COMMERCIALS

4d

Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses \$ 300,000 including grants of \$) (Revenue \$)

4e

Total program service expenses

\$ 11,597,991

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)? <i>If "Yes," complete Schedule A</i>	1	No
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	4	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10	No
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i> 	11	Yes
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 	12	Yes
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	<i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> 	12A	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
14b	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b	No
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 ? <i>If "Yes," complete Schedule F, Part II</i>	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III</i>	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	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? <i>If "Yes," complete Schedule G, Part II</i>	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20	No

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	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <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		No
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 of the organization (or a family member) 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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. 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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

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.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . . .	1a	52	
b	Enter the number of voting members that are independent . . .	1b	52	
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 organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b		No
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	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		No
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		No
14	Does the organization have a written document retention and destruction policy?	14		No
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		No
	If "Yes" to line a or b, 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	Yes	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		No

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 make these available. Check all that apply. ☒ Own website ☒ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of 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 ▶ The Organization 600 CAMERON STREET No 206 ALEXANDRIA, VA 22314 (703) 340-1642

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

Form **990** (2009)

1b	Total	239,700	0	34,863
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
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>	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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		
	(A) Name and business address	(B) Description of services	(C) Compensation
	PATTON BOGGS LLP 2550 M STREET NW WASHINGTON, DC 20037	LEGAL SERVICES	146,141
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization1		

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	ASSESSMENTS REVENUE	900,099	12,008,689	12,008,689		
	b	TRAINING WORKSHOPS	900,099	379	379		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		12,009,068			
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		6,068		
4		Income from investment of tax-exempt bond proceeds . . .					
5		Royalties					
6a		(i) Real					
		(ii) Personal					
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		(i) Securities					
		(ii) Other					
b		Less cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss)					
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18					
		a					
b	Less direct expenses						
c	Net income or (loss) from fundraising events . . .						
9a	Gross income from gaming activities See Part IV, line 19						
	a						
b	Less direct expenses						
c	Net income or (loss) from gaming activities . . .						
10a	Gross sales of inventory, less returns and allowances						
	a						
b	Less cost of goods sold						
c	Net income or (loss) from sales of inventory . . .		13,127	13,127			
Miscellaneous Revenue		Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See Instructions		12,028,263	12,022,195	0	6,068	

Part IX Statement 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).

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 U S See Part IV, line 21	9,610,877			
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	274,563			
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	46,544			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,327			
9	Other employee benefits	3,980			
10	Payroll taxes	15,105			
11	Fees for services (non-employees)				
a	Management				
b	Legal	146,305			
c	Accounting	160,930			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	1,187,225			
12	Advertising and promotion	750,000			
13	Office expenses	137,846			
14	Information technology	2,946			
15	Royalties				
16	Occupancy	26,025			
17	Travel	13,883			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	30,546			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,600			
23	Insurance	20,632			
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a					
b					
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	12,432,334			
26	Joint costs. Check here ☐ if following SOP 98-2 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			4,577,198	1	68,620
	2	Savings and temporary cash investments				2	6,038,609
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			3,970,736	4	3,499,066
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	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			88,740	8	55,665
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D	10a	15,368			
	b	Less accumulated depreciation	10b	13,079	2,791	10c	2,289
	11	Investments—publicly traded securities				11	
	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				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			8,639,465	16	9,664,249
Liabilities	17	Accounts payable and accrued expenses			101,454	17	77,327
	18	Grants payable			1,602,450	18	1,945,238
	19	Deferred revenue				19	
	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. Complete Part X of Schedule D			5,028,350	25	6,137,446
	26	Total liabilities. Add lines 17 through 25			6,732,254	26	8,160,011
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			1,907,211	27	1,504,238
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	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	Total net assets or fund balances			1,907,211	33	1,504,238
	34	Total liabilities and net assets/fund balances			8,639,465	34	9,664,249

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		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 consolidated basis, separate basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 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 . . .		

Additional Data

Software ID:
Software Version:
EIN: 54-2024246
Name: NATIONAL OILHEAT RESEARCH ALLIANCE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code	) (Expenses \$	300,000 including grants of \$	) (Revenue \$
DEVELOP PROGRAMS TO ENHANCE CONSUMER AND EMPLOYEE SAFETY AND TRAINING ACTIVITIES INCLUDE THE PUBLICATION OF TECHNICAL TRAINING MANUALS AND TRAINING VIDEOS NORA ALSO HAS CONDUCTED SEMINARS AND DONATED EQUIPMENT TO VOCATIONAL SCHOOLS			

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			
BRETT ADAMS DIRECTOR	1 00	X						0	0	0
NANCY ALLEN DIRECTOR	1 00	X						0	0	0
BILL ANDERSON DIRECTOR	1 00	X						0	0	0
MIKE ANTON DIRECTOR	1 00	X						0	0	0
SAM BELL DIRECTOR	1 00	X						0	0	0
TOM BERRY DIRECTOR	1 00	X						0	0	0
BOB BLANCHARD DIRECTOR	1 00	X						0	0	0
BOB BOLTZ CHAIRMAN	1 00	X		X				0	0	0
MOLLY BRADY DIRECTOR	1 00	X						0	0	0
WALTER BRICKOWSKI DIRECTOR	1 00	X						0	0	0
JIM BUHRMASTER DIRECTOR	1 00	X						0	0	0
DONNIE BURCH DIRECTOR	1 00	X						0	0	0
DR THOMAS BUTCHER DIRECTOR	1 00	X						0	0	0
PETER CARINI FIRST VICE CHAIRMAN	1 00	X		X				0	0	0
SEAN COTA SECOND VICE CHAIRMAN	1 00	X		X				0	0	0
MIKE COX DIRECTOR	1 00	X						0	0	0
TOM DEVINE DIRECTOR	1 00	X						0	0	0
PETER DOUGLAS DIRECTOR	1 00	X						0	0	0
BOB DURHAM DIRECTOR	1 00	X						0	0	0
BRAD FULTON DIRECTOR	1 00	X						0	0	0
LOUISE GIGUERE LEBLANC DIRECTOR	1 00	X						0	0	0
DAVID GLENDON DIRECTOR	1 00	X						0	0	0
CHRIS KEYSER DIRECTOR	1 00	X						0	0	0
BARRY KNOX DIRECTOR	1 00	X						0	0	0
BRIAN E KOTTCAMP 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			
WILL LAWES SECRETARY	1 00	X		X				0	0	0
DARREN LEDOUX DIRECTOR	1 00	X						0	0	0
LORI BERG DIRECTOR	1 00	X						0	0	0
DAVE MARTIN DIRECTOR	1 00	X						0	0	0
BILL MCKIBBIN DIRECTOR	1 00	X						0	0	0
MIKE NEISH DIRECTOR	1 00	X						0	0	0
TED NOONAN DIRECTOR	1 00	X						0	0	0
JOHN PETERS DIRECTOR	1 00	X						0	0	0
MARK PETRUNIS DIRECTOR	1 00	X						0	0	0
MICHAEL ROMITA DIRECTOR	1 00	X						0	0	0
DAVID SCHILDWACHTER DIRECTOR	1 00	X						0	0	0
ERIC S SLIFKA DIRECTOR	1 00	X						0	0	0
CHARLES STAFFORD DIRECTOR	1 00	X						0	0	0
SHANE SWEET DIRECTOR	1 00	X						0	0	0
STEVE CLARK DIRECTOR	1 00	X						0	0	0
TOM TUBMAN DIRECTOR	1 00	X						0	0	0
MR KIM ULLMAN DIRECTOR	1 00	X						0	0	0
ROB VAN VARICK DIRECTOR	1 00	X						0	0	0
GENE WALDMAN DIRECTOR	1 00	X						0	0	0
JEFF WITHAM DIRECTOR	1 00	X						0	0	0
JACK WOODFIN DIRECTOR	1 00	X						0	0	0
JIM WOODRUFF DIRECTOR	1 00	X						0	0	0
ROBERT WOODRUFF JR DIRECTOR	1 00	X						0	0	0
NANCY KISTER DIRECTOR	1 00	X						0	0	0
JULIE GILL 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			
RALPH ADAMS DIRECTOR	1 00	X					0	0	0
KEITH WRISLEY DIRECTOR	1 00	X					0	0	0
JOHN HUBER PRESIDENT	40 00			X			239,700	0	34,863

SCHEDULE D
(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL OILHEAT RESEARCH ALLIANCE

Employer identification number
54-2024246

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?	☐ Yes ☐ No
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	☐ Yes ☐ No

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

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

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

3a(i)

☐

☐

(ii)

related organizations

3a(ii)

☐

☐

b

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

3b

☐

☐

4

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

Part VI

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

Description of investment	(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			
d	Equipment	15,368	13,079	2,289
e	Other			0
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				2,289

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)	112,028,263
2	Total expenses (Form 990, Part IX, column (A), line 25)	212,432,334
3	Excess or (deficit) for the year Subtract line 2 from line 1	3-404,071
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)	81,098
9	Total adjustments (net) Add lines 4 - 8	91,098
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10-402,973

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	112,163,472
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e	0
3	Subtract line 2e from line 13	312,163,472
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 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c	-135,209
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)5	512,028,263

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	112,566,445
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	
e	Add lines 2a through 2d2e	0
3	Subtract line 2e from line 13	312,566,445
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 7b4a	
b	Other (Describe in Part XIV)4b	
c	Add lines 4a and 4b4c	-134,111
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)5	512,432,334

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
		FASB ASC 740 PRESCRIBES A COMPREHENSIVE MODEL FOR HOW AN ORGANIZATION SHOULD MEASURE, RECOGNIZE, PRESENT AND DISCLOSE IN ITS FINANCIAL STATEMENTS UNCERTAIN TAX POSITIONS. THE ALLIANCE HAS TAKEN IN ITS TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION BY MAJOR TAX JURISDICTIONS OR EXPECTS TO TAKE ON A TAX RETURN. THE ALLIANCE ADOPTED FASB ASC 740 AS OF JANUARY 1, 2009 AND, THEREFORE, RECOGNIZED THE BENEFITS FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY THE TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH POSITIONS ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. NORA'S OPEN AUDIT PERIODS ARE 2006-2009. THERE WAS NO IMPACT TO THE ALLIANCE'S FINANCIAL STATEMENTS AS A RESULT OF THE IMPLEMENTATION OF FASB ASC 740. BOOK AND TAX DEPRECIATION DIFFERENCE \$1,098.

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

2009

Open to Public
Inspection

Name of the organization
NATIONAL OILHEAT RESEARCH ALLIANCE

Employer identification number
54-2024246

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							

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.

[illegible]

Software ID:

Software Version:

EIN: 54-2024246

Name: NATIONAL OILHEAT RESEARCH ALLIANCE

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
INDEPENDENT CONNECTICUT PETROLEUM ASSOC10 ALCAP RIDGE CROMWELL,CT 06416		501(C)(3)	599,886				CONSUMER EDUCATION, RESEARCH & DEVELOPMENT, EDUCATION & TRAINING
IDAHO PETROLEUM MARKETERS & CONVENIENCEPO BOX 984 BOISE,ID 83701		501(C)(6)	6,274				EDUCATION & TRAINING
INDIANA PETROLEUM MARKETERS & CONVENIENCE115 WEST WASHINGTON STREET 1690 INDIANAPOLIS,IN 46204		501(C)(6)	8,848				CONSUMER EDUCATION, EDUCATION & TRAINING
KENTUCKY PETROLEUM MARKETERS ASSOC622 SHELBY STREET FRANKFORT, KY 406013460		501(C)(6)	91,519				CONSUMER EDUCATION, EDUCATION & TRAINING
MASSACHUSETTS OILHEAT COUNCIL118 CEDAR STREET 2 WELLSELEY,MA 024813596		501(C)(6)	773,520				CONSUMER EDUCATION, EDUCATION & TRAINING
MID-ATLANTIC PETROLEUM DISTRIBUTORS ASSOC550 M RITCHIE HIGHWAY PMB 283 SEVERNA PARK,MD 21146		501(C)(6)	172,996				CONSUMER EDUCATION, EDUCATION & TRAINING
MAINE OIL DEALERS ASSOC25 GREENWOOD ROAD BRUNSWICK,ME 040117336		501(C)(6)	365,770				CONSUMER EDUCATION, EDUCATION & TRAINING
MICHIGAN PETROLEUM ASSOC7521 WESTSHIRE DRIVE 200 LANSING,MI 489171105		501(C)(6)	142,582				CONSUMER EDUCATION, EDUCATION & TRAINING
NORTH CAROLINA PETROLEUM & CONVENIENCE MARKETERS ASSOC7300 GLENWOOD AVENUE RALEIGH,NC 27612		501(C)(6)	202,856				CONSUMER EDUCATION, EDUCATION & TRAINING
OILHEAT COUNCIL OF NEW HAMPSHIRE5 ANDRESKI DRIVE FREMONT,NH 030443020		501(C)(6)	309,487				CONSUMER EDUCATION, EDUCATION & TRAINING

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
FUEL MERCHANTS ASSOC OF NEW JERSEY66 MORRIS AVENUE 1B SPRINGFIELD,NJ 070811450		501(C)(6)	541,454				CONSUMER EDUCATION, EDUCATION & TRAINING
NEW YORK OIL HEATING ASSOC183 MADISON AVE SUITE 1403 NEW YORK,NY 10016		501(C)(6)	384,308				CONSUMER EDUCATION, EDUCATION & TRAINING
OIL HEAT COMFORT CORP 200 PARKWAY DRIVE 202 HAUPPAUGE,NY 11788		501(C)(6)	301,263				CONSUMER EDUCATION, EDUCATION & TRAINING
OILHEAT INSTITUTE OF WESTERN NEW YORK80 WOLF ROAD 308 ALBANY,NY 122052608		501(C)(6)	75,375				CONSUMER EDUCATION, EDUCATION & TRAINING
OILHEAT INSTITUTE OF EASTERN NEW YORK80 WOLF ROAD 308 ALBANY,NY 122052608		501(C)(6)	217,689				CONSUMER EDUCATION, EDUCATION & TRAINING
EMPIRE STATE PETROLEUM ASSOC80 WOLF ROAD 308 ALBANY,NY 122052608		501(C)(6)	43,380				CONSUMER EDUCATION
HUDSON VALLEY OIL HEAT COUNCILPO BOX 2550 NEWBURGH,NY 12550		501(C)(6)	142,240				CONSUMER EDUCATION, EDUCATION & TRAINING
OIL FUEL INSTITUE OF CENTRAL NEW YORK74 WEST MAIN STREET SIDNEY,NY 13838		501(C)(6)	125,755				CONSUMER EDUCATION, EDUCATION & TRAINING
OHIO PETROLEUM MARKETERS & CONVENIENCE STORE ASSOC4242 TULLER ROAD B DUBLIN,OH 430175458		501(C)(6)	86,981				CONSUMER EDUCATION
OREGON PETROLEUM ASSOC707 SW WASHINGTON STREET 927 PORTLAND,OR 972053532		501(C)(6)	2,192				CONSUMER EDUCATION

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
PENNSYLVANIA PETROLEUM MARKETERS & CONVENIENCE STORE ASSOC810 SOUTH EISENHOWER BLVD 22 MIDDLETOWN,PA 17057		501(C)(6)	470,939				CONSUMER EDUCATION, EDUCATION & TRAINING
OIL HEAT INSTITUTE OF RHODE ISLAND873 WARWICK AVENUE WARWICK,RI 028883645		501(C)(6)	142,655				CONSUMER EDUCATION, EDUCATION & TRAINING
SOUTH CAROLINA PETROLEUM MARKETERS ASSOCIATIONPO BOX 64 COLUMBIA,SC 29202		501(C)(6)	41,297				CONSUMER EDUCATION, EDUCATION & TRAINING
VERMONT FUEL DEALERS ASSOC250 MAIN STREET 301 MONTPELIER,VT 056024257		501(C)(6)	83,143				CONSUMER EDUCATION, EDUCATION & TRAINING
WASHINGTON OIL MARKETERS ASSOCPO BOX 1650 PORT ORCHARD,WA 98366		501(C)(6)	22,656				CONSUMER EDUCATION
WISCONSIN PETROLEUM MARKETERS & CONVENIENCE STORE ASSOC121 SOUTH PINCKNEY STREET 300 MADISON,WI 53703		501(C)(6)	125,339				CONSUMER EDUCATION, EDUCATION & TRAINING

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

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
NATIONAL OILHEAT RESEARCH ALLIANCE

Employer identification number
54-2024246

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 ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
1b 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		
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?		
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 ☒ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☐ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
4a Receive a severance payment or change-of-control payment?		No
4b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
4c Participate in, or receive payment from, an equity-based compensation arrangement?		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?		
b Any related organization?		
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?		
b Any related organization?		
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		
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		
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?		

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

[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
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SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization NATIONAL OILHEAT RESEARCH ALLIANCE	Employer identification number 54-2024246
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Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR PRIOR TO FILING IT IS NOT PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO ISSUANCE
Form 990, Part VI, Section B, line 12c		THE ORGANIZATION ENGAGES A CPA FIRM TO REVIEW AND PROCESS ALL PAYABLE TRANSACTIONS FOR ANY POTENTIAL CONFLICTS OF INTEREST THE EXECUTIVE DIRECTOR ALSO MONITORS COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY
Form 990, Part VI, Section B, line 15a		COMPENSATION IS DETERMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS
Form 990, Part VI, Section C, line 19		THE ORGANIZATION'S DOCUMENTS ARE AVAILABLE TO THE PUBLIC ON IT'S WEBSITE AND GUIDESTAR.ORG
FORM 990, PART XI, LINE 2C		THE ORGANIZATION'S FINANCE COMMITTEE OVERSEES THE AUDIT THE FINANCE COMMITTEE'S ROLE IN OVERSEEING THE AUDIT HAS NOT CHANGED FROM THE PRIOR YEAR

Form

4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2009

Attachment
Sequence No 67

Name(s) shown on return NATIONAL OILHEAT RESEARCH ALLIANCE	Business or activity to which this form relates Form 990 Page 10	Identifying number 54-2024246
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount See the instructions for a higher limit for certain businesses	1	250,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost	
6			
7 Listed property Enter the amount from line 29	7		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9 Tentative deduction Enter the smaller of line 5 or line 8	9		
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10		
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11		
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 .	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	1,600

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	1,600
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?						Yes No			24b If "Yes," is the evidence written?			Yes No		
(a) Type of property (list vehicles first)		(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention		(h) Depreciation/ deduction		(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25						
26 Property used more than 50% in a qualified business use														
			%											
			%											
			%											
27 Property used 50% or less in a qualified business use														
			%				S/L -							
			%				S/L -							
			%				S/L -							
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1								28						
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1										29				

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)			(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year														
32 Total other personal(noncommuting) miles driven														
33 Total miles driven during the year Add lines 30 through 32														
34 Was the vehicle available for personal use during off-duty hours?			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?														
36 Is another vehicle available for personal use?														

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?											Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners												
39 Do you treat all use of vehicles by employees as personal use?												
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?												
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)												
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles												

Part VI Amortization

(a) Description of costs		(b) Date amortization begins	(c) Amortizable amount		(d) Code section	(e) A mortization period or percentage		(f) A mortization for this year	
42 A mortization of costs that begins during your 2009 tax year (see instructions)									
43 A mortization of costs that began before your 2009 tax year							43		
44 Total. Add amounts in column (f) See the instructions for where to report							44		