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DLN: 93493319041352

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2011

OMB No 1545-0047

Open to Public

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

Open to Public Inspection

Internal Revenu		lendar year, or tax year beginning 01-			,		Inspection
B Check if a		C Name of organization VERMONT ENERGY INVESTMENT CORPORA			D Emplo	yer ide	entification number
Address o	change		11101	_	03-03		
Name ch	nange	Doing Business As			E Teleph		
Initial ret	turn	Number and street (or P O box if mail is n	ot delivered to street address) Room/su	ite	(802)		
Terminate	ted	128 LAKESIDE AVENUE NO 401			G Gross re	eceipts	\$ 68,675,006
Amended	d return	City or town, state or country, and ZIP + 4 BURLINGTON, VT 054014894	•				
Applicatio	on pending	Bandinaran, VI astariast					
		F Name and address of principal SCOTT JOHNSTONE	officer	H(a) Is the		retur	
		128 LAKESIDE AVENUE NO 401		affilia	tes/		⊤Yes 🔽 No
		BURLINGTON,VT 054014894		H(b) Are al			
Tax-exe	mpt status	▼ 501(c)(3)	no)		o," attach p exempt		(see instructions)
		TP //WWW VEIC ORG/	, , , , , , , , , , , , , , , , , , , ,	H(C) 9100	pexempt	ion nu	inder F
				1			
K Form of o Part I	_	Corporation Trust Association O	ther 🟲	L Year of fo	mation 19	86 N	State of legal domicile VT
			nost significant activities				
1		escribe the organization's mission or r NT ENERGY INVESTMENT CORPORA		CE THE ECO	NOMIC, S	SOCIA	ALAND
	ENVIRO	NMENTAL COSTS OF ENERGY CON	SUMPTION THROUGH THE PRO	MOTION OF	COST-E	FFEC.	TIVE ENERGY
		NCY AND RENEWABLE ENERGY TEC					
ୁ		'S FIRST STATEWIDE ENERGY EFFI SERVICES AND PLANNING AND EV		ALSO PROVI	DES RESI	DENI	IAL AND BUSINESS
<u> </u>			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Governance							
<u>ت</u> ع	Chack th	ıs box ► if the organization disconti	unuad its aparations or disposed s	of more than 2	E% of its	not a	- c atc
الم		of voting members of the governing bo			5 % OF ILS	3	7
		of independent voting members of the			ŀ	4	7
ਰੀ ਹੈ। ਹੈ		mber of individuals employed in calend			5	280	
-		nber of volunteers (estimate if necess				6	
		related business revenue from Part VI	• •		•		
		lated business taxable income from Fo			ŀ	7b	C
			·	Prio	r Year	T	Current Year
8	Contril	outions and grants (Part VIII, line 1h)		1,810,3	397	8,637,774
<u>a</u> 9		m service revenue (Part VIII, line 2g			43,919,	_	59,441,444
9 10	Invest	ment income (Part VIII, column (A), l		3,1	173	39,712	
[±] 11	Other	revenue (Part VIII, column (A), lines		556,0	76	556,076	
12	Total r	•	46,288,782		68,675,006		
13		and similar amounts paid (Part IX, co			21,0	-	00,073,000
14		s paid to or for members (Part IX, col				0	0
15		s, other compensation, employee ben					
98 16a 16a b	5-10)				17,062,8		22,663,512
∯ 16a	Profes	sional fundraising fees (Part IX, colun	nn (A), line 11e)			0	0
표 ㅂ		ndraising expenses (Part IX, column (D), line 2				_	
17		expenses (Part IX, column (A), lines :			29,005,		44,005,870
18		expenses Add lines 13–17 (must equ			46,089,6		66,669,382
19	Reveni	ue less expenses Subtract line 18 fro	om line 12	 	199,1		2,005,624
රීම් සිට්				Beginning Y	j of Currei ear	nt	End of Year
Not Assets or Fund Balances 20	Total a	ssets (Part X, line 16)			14,720,4	102	14,769,787
문 21		iabilities (Part X, line 26)			11,113,4		9,177,215
第 章 ₂₂	Net as	sets or fund balances Subtract line 2	1 from line 20		3,606,9	916	5,592,572
Part II	Sign	ature Block					
		rjury, I declare that I have examined this					
knowleage knowledge		, it is true, correct, and complete. Decla	ration of preparer (other than office	r) is based on a	ali intorma	tion o	rwnich preparer nas any
	****				12-11-13		
Sign	Signa	ture of officer		Da	ite		
Here		T JOHNSTONE EXECUTIVE DIRECTOR or print name and title					
	I Type	or print name and title			Τ_		
	Preparer signature			Check if elf-	Preparer's		yer identification number)
Paid	1 -	•	ϵ	employed 🕨 🦵	P0105956		
⊬reparer's	Firm's na	nme (or yours ALEXANDER ARONSON FINN	ING & CO PC		EIN ▶ 04	-25717	80
Use Only	address,	and ZIP + 4 21 EAST MAIN STREET					
		WESTBORO MA 01581			Phone no	• • (5	08) 366-9100

	(,					r age =
Par	HII		f Program Serv ile O contains a res		lishments Jestion in this Part III		.
1	Brief	ly describe the or	ganızatıon's mıssıor	1			
						COSTS OF ENERGY CONS ERGY TECHNOLOGIES	UMPTION THROUGH THE
2	Did th	he organization un rior Form 990 or 9	idertake any signific 990-EZ?	ant program se	ervices during the yea	r which were not listed on	▽ Yes ̄ No
	If "Ye	s," describe these	e new services on S	chedule O			
3			ease conducting, or		nt changes in how it co	onducts, any program	┌ Yes ┌ No
	If "Ye	es," describe these	e changes on Sched	ule O			
4	exper	nses Section 501	.(c)(3) and 501(c)(4	l) organizations	and section 4947(a)	nree largest program service ((1) trusts are required to re ch program service reported	eport the amount of
4a	(Code	e) (Expenses \$	35,884,529	ıncludıng grants of \$) (Revenue \$	44,590,534)
	ACHI SAVIN INSTA TONS	EVÉ ANNUAL ENERGY NGS NOT ONLY HELPE ALLED IN 2010 WILL R S EFFICIENCY VERMOI	SAVINGS OF APPROXIMAD VERMONTERS SAVE MESULT IN LIFETIME REC	ATELY 111,000 ME ONEY, AND THEY A OUCTIONS OF CARE N EXCELLENT VALU	GAWATT HOURS PROVIDIN ALSO HELP THE ENVIRONM BON DIOXIDE EMMISSIONS	43,416 HOMES AND BUSINESSES G MORE THAN 2% OF VERMONT'S ENT FOR INSTANCE, THE ENERGY , A KEY CONTRIBUTOR TO GLOBA STS OF OTHER SOURCES OF ENER	S ENERGY NEEDS THESE ENERGY Y EFFICIENCY MEASURES L CLIMATE CHANGE OF 805,000
4b	(Code	e) (Expenses \$	7,270,138	ıncludıng grants of \$) (Revenue \$	9,467,780)
	DISTI IMPR	RICT GOALS FOR THE OVING THE ENERGY E	ESE INITIATIVES ARE TO	REDUCE ELECTRICOME HOUSING CF	C AND GAS ENERGY USE B	EIC'S INDUSTRY LEADING PROGR Y 1% PER YEAR, INVESTING 30% NG GREEN JOBS, AND ASSURING	
4c	(Code	e) (Expenses \$	8,923,030	ıncludıng grants of \$) (Revenue \$	2,084,524)
	TO C					PROVIDES NATIONAL AND INTERN ER CLIENTS, FOR ENERGY EFFICI	NATIONAL CONSULTING SERVICES ENCY AND RENEWABLE ENERGY
	(Code	e) (Expenses \$	2,759,503	ıncludıng grants of \$) (Revenue \$	3,854,682)
						INDIVIDUALS AND BUSINESSES INTERMS THAT IMPROVE ELECTRICAL	N LOWERING THEIR POWER BILLS L EFFICIENCY
	Othe	er program servic	es (Describe in Sch	nedule O)			
		penses \$,	cluding grants o	of\$) (Revenue \$	3,854,682)
4e	Tota	al program service	expenses > \$	54,837,20	0		

Part IV	Checklist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		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.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	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.	11f	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	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	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? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	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? If "Yes," complete Schedule L, Part I	25a		No
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? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part	ı		
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	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? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance
Part V	Statements Regarding Other 1K5 rilings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
_				
	1a 1,535			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		100	
-	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No_
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	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)?	4a		No
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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		
•	organization solicit any contributions that were not tax deductible?	- Ju		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
,	were not tax deductible?	6b		
_	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
а	services provided to the payor?	/a		NO
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	_ [
	file Form 8282?	7c		<u> No</u>
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N o
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N o
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	, 9		
	Form 1098-C?	7h		
1	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. DId			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
1	Sponsoring organizations maintaining donor advised funds.	8		
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	,			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. 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	13a		
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			
С	Enter the aggregate amount of reserves on hand 13c			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Vec " has it filed a Form 730 to report these payments? If "Me " provide an evalenation in Cabadula O	14b		-110

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.

Se	ection 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								
b	Enter the number of voting members included in line 1a, above, who are independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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									
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5		No No					
6	Did the organization have members or stockholders?	6		No					
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		No					
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		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	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								
	ection B. Policies (This Section B requests information about policies not required by the Internal								
Re	evenue Code.)								
10-	Did the commented have level shouten househor anothly are 2	10-	Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		No					
Б	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?								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes						
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?								
а	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							
Se	ection C. Disclosure								
17	List the States with which a copy of this Form 990 is required to be filed▶VT , OH , NJ								

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.

Own website 🔽 Another's website 🔽 Upon request

(802)658-6060

- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization SCOTT COMEAU

 128 LAKESIDE AVENUE

 BURLINGTON, VT 05402

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organiz	•	lated or	ganız	atio	ns c	ompei	nsat	ed any current or fo	rmer officer, direct	or, or trustee	
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and	
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations	
(1) CHARLES STONE TREASURER	1 00	х		х				0	0	0	
(2) SUE COAKLEY VICE-PRESIDENT	1 00	х		х				0	0	0	
(3) JOHN GILROY DIRECTOR	1 00	х						0	0	0	
(4) RICHARD COWART DIRECTOR	1 00	х						0	0	0	
(5) MICHAEL DWORKIN DIRECTOR	1 00	х						0	0	0	
(6) GUS SEELIG PRESIDENT	1 00	х		Х				0	0	0	
(7) CHARLES SMITH DIRECTOR	1 00	х						0	0	0	
(8) SCOTT JOHNSTONE EXECUTIVE DIRECTOR	42 00			Х				139,219	0	18,141	
(9) LINDA GIBSON DIRECTOR OF ADMINISTRATION	40 00			Х				116,426	0	9,712	
(10) BETH SACHS CO-FOUNDER	1 00			Х				83,742	0	8,179	
(11) DAVID CAWLEY CHIEF OPERATING OFFICER	38 00					Х		130,537	0	9,344	
(12) SCUDDER PARKER DIRECTOR OF CONSULTING	40 00					х		124,306	0	7,254	
(13) DAVID BARASH DIRECTOR OF BUSINESS DEVELOPMENT	40 00					х		119,483	0	2,458	
(14) DANIEL QUINLAN MANAGING CONSULTANT	40 00					х		117,765	0	6,998	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (describe (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							Repo compe froi organiz	(D) ortable ensation m the ation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of other compensation from the organization and		
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organiza		
												+			
												\downarrow			
												\dashv			
												\dashv			
												+			
												\perp			
												\dashv			
												1			
1b	Sub-Total						•	>							
c	Total from continuation sheets							•		004 470		_		50.005	
d 	Total (add lines 1b and 1c) . Total number of individuals (incl						above) who	receive	831,478 d more tha	ın	0		62,086	
	\$100,000 of reportable compen	sation from the	organız	atıon	► 17										
3	Did the organization list any form on line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Sch</i>								or highes	t compens	ated employee	3	Yes	No No	
4	For any individual listed on line 1 organization and related organization individual											4	Yes		
5	Did any person listed on line 1a services rendered to the organiz								_		or individual for •	5		No	
Se	ection B. Independent Con	tractors													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio ear									ng with				
ENED		(A) ne and business ad	dress							Desci	(B) ription of services		(C Comper		
40 W/ WEST	GY FEDERATION INC ASHINGTON STREET BOROUGH, MA 01581									ENERGY EFF	TC CONSULT		5	,324,555	
PO BO	SCH ENGINEERING INC IX 845327 DN, MA 02284									ENERGY EFF	IC IMPLEM		3	,079,206	
OPTIMAL ENERGY INC 14 SCHOOL STREET SUTIRE 203-C BRISTOL, VT 05443 ENERGY EFFIC CONSULT									864,730						
2560 BOULI	RIL NETWORKS INC 55TH STREET DER, CO 80301									ENERGY EFF	IC CONSULT			596,018	
5427	LDWELL & ASSOCIATES INC 14TH STREET NW INGTON, DC 20011									ENERGY EFF	IC IMPLEM			529,106	
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►29															

Form 99	•	,						Page 9
Part \	<u> </u>	Statement of Rev	enue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
# \$ # s	1a	Federated campaigns	1a					
흔	ь	Membership dues .	1b					
ŝ,ς ∰	c	Fundraising events .	1c					
<u>ਬ</u> ੁ≅	d	Related organizations	1d					
ξĒ	e	Government grants (contril	butions) 1e	6,646,110				
ntio er s	f	All other contributions, gifts similar amounts not include	s, grants, and 1f ed above	1,991,664				
€€	g	Noncash contributions	s included in					
Contributions, gifts, grants and other similar amounts	h	lines 1a-1f \$ Total. Add lines 1a-1f		▶	8,637,774			
<u> </u>	"	Total. Add lilles 1a-11		· · ·	0,037,771			
II e	2a	ENERGY EFFICIENCY UTIL		Business Code	42.2EE 700	42 255 700		
Program Serwoe Revenue	b P	DC SEU		561000 561000	42,255,799 9,467,780	42,255,799 9,467,780		
		EFFICIENCY SMART		561000	3,854,682	3,854,682		
r vic	d	ENERGY SERVICES AND RE		541700	2,084,524	2,084,524		
Ž,	e	ENERGY EFFICIENCY UTIL		561000	1,778,659	1,778,659		
gram.	f	All other program serv	vice revenue		, ,	, ,		
<u>နိ</u>	_	Total. Add lines 2a-2	<u> </u>	<u>.</u>	FO 441 444			
	g 3	Investment income (ii			59,441,444			
		and other similar amo			39,712			39,712
	4	Income from investment of	f tax-exempt bond p	proceeds 🕨				
	5	Royalties						
			(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
		expenses Rental income						
	c .	or (loss)						
	d	Net rental income or (Securities	(II) Other				
	7a	Gross amount	Securities	(ii) o tilei				
		from sales of assets other						
	ь	than inventory Less cost or						
		other basis and sales expenses						
	c	Gain or (loss)						
	d	,		· · · · · •				
Φ	8a	Gross income from fur events (not including	ndraising					
Other Revenue		\$of contributions report See Part IV, line 18						
thе	ь	Less direct expenses						
0	C	Net income or (loss) f	i	events 🟲				
	9a	Gross income from ga See Part IV, line 19						
	ь	Less direct expenses	L					
	C 102	Net income or (loss) f		rities •				
	10a	Gross sales of inventoreturns and allowance						
	ь	Less cost of goods so						
	С	Net income or (loss) f						
	11a	Miscellaneous Reve	nue	Business Code 900099	556,076	556,076	0	
	ь	OTHER INCOME		300033	230,070	550,070		
	c							
	d	All other revenue .	 					
	e	Total. Add lines 11a-	L		556,076			
	12	Total revenue. See In:	structions	. •	68,675,006	59,997,520	0	39,712

Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

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 (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 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 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 247,675 122,031 125,644 key employees . . . 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 18,437,725 11,177,682 7,260,043 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 610,885 649,521 38,636 2,159,857 2,025,125 134,732 Other employee benefits 1,168,734 1,134,958 33,776 10 Fees for services (non-employees) 11 Management 30,791 30,791 Legal Accounting 40,904 40,904 2,345 2,345 Lobbying Professional fundraising See Part IV, line 17 . . Investment management fees g Advertising and promotion . . . 12 Office expenses 2,027,654 1,626,246 13 401,408 399,764 399,764 14 Information technology 15 Royalties . . 16 1,075,051 1,075,051 917,324 91,278 17 826,046 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 19 Conferences, conventions, and meetings 774,418 643,736 130,682 52,098 52,098 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 962,463 962,463 23 131,731 131,731 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) INCENTIVE PAYMENTS AND 23,969,471 23,969,471 SUBCONTRACTORS/CONSULTA 10,915,402 10,273,447 641,955 MATERIALS AND PRODUCT C 1,502,271 1,502,271 OTHER EXPENSES 1,096,837 873,204 d 223,633 е All other expenses 107,346 107,346 25 Total functional expenses. Add lines 1 through 24f 66,669,382 54,837,200 11,832,182 0 Joint costs. Check here ► 🗆 If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a

Part X **Balance Sheet** (A) (B) Beginning of year End of year 648, 162 73,751 1 1 49.335 27,448 2 2 3 12,408,130 10.038.387 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 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 6 50,000 7 50,000 9.857 23.275 8 2.556,712 9 177.635 9 Prepaid expenses and deferred charges 10a 5,032,228 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 793,646 **10c** 10b 3,574,672 b Less accumulated depreciation 1,457,556 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 570,219 15 556,076 15 14,720,402 14,769,787 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 11,057,317 17 8,342,365 17 Accounts payable and accrued expenses . 18 18 90.773 19 56,169 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties 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 744,077 25 D 26 26 11,113,486 9,177,215 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 3,606,916 27 5,592,572 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 3.606.916 33 5.592.572 34 Total liabilities and net assets/fund balances 14.720.402 14,769,787

Pal	Check if Schedule O contains a response to any question in this Part XI			. I	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		68.6	575,006
2	Total expenses (must equal Part IX, column (A), line 25)	2			69,382
3	Revenue less expenses Subtract line 2 from line 1	3		2,0	05,624
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3,6	06,916
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	-19,968
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		5,5	592,572
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			ァ	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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	.	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	▼ Separate basis				
За	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?	:	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re	equired	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

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

Inspection **Employer identification number**

Name of the organization VERMONT ENERGY INVESTMENT CORPORATION 03-0304418

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All org	ganızatıons	must comp	olete this p	art.) See ın	structions	
The c	rganı	zatıon ıs	not a privat	te foundation becaus	eitis (Forl	ınes 1 throu	gh 11, check	only one bo	x)		
1	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).										
2	\sqcap	A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Schedu	ıle E)				
3	\sqcap	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descri	bed in sectio	n 170(b)(1)	(A)(iii).		
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state									
5	Г	An oras	anization op	erated for the benefi	t of a college	or universit	tv owned or o	perated by a	government	al unit desci	 ribed in
-	•	_	· ·	A)(iv). (Complete P	_		.,	p -	g - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
6	Г			local government o	•	al unit desc	rıbed ın secti	on 170(b)(1)(A)(v).		
7	Γ	An orga describ	anization the	at normally receives	a substantia					om the gene	ral public
٥	_			(A)(vi) (Complete P described in sectio i		Al(vil (Con	anlata Bart II	1			
8 9	<u> </u>			at normally receives					uitions mam	harchin faac	and aross
•	1.	_		ities related to its e	` '		• •		•	•	•
				oss investment inco							
		-	-	ganızatıon after June				· ·		.ux, nom bu	Sincosco
10	Г			ganized and operated							
11	,			ganized and operated						carry out t	he purposes of
	·	one or the box	more public	ly supported organiz bes the type of supp b Type I	ations descri porting organi	ibed in secti i <u>za</u> tion and c	on 509(a)(1)	or section 5 s 11e throug	509(a)(2) Se gh 11h	e section 5 0	
e	Γ			ox, I certify that the							
			nan 10unuati n 509(a)(2)	on managers and ot	nei tilali one	or more pub	nicry support	eu organizat	ions describe	a ili section	509(a)(1)01
f		If the o	rganization	received a written d	etermination	from the IR:	S that it is a	Гуре I, Туре	: II or Type I	II supportın	g organizatio <u>n,</u>
			this box	2006 has the argan		tod any aift	or contributi	an fram any	of the		l
g			ng persons?	2006, has the organ	ization accep	ited any gnt	or contributi	on nom any	or the		
				rectly or indirectly c	ontrols, eithe	er alone or to	ogether with	persons des	crıbed ın (ıı)		Yes No
		and (111) below, the	governing body of th	ne the suppor	ted organiza	ation?			11g((i)
		(ii) a fa	mily member	er of a person descrı	bed in (i) abo	ve?				11g(ii)
		(iii) a 3	35% control	lled entity of a perso	n described i	n (ı) or (ıı) a	bove?			11g(iii)
h		Provide	the followi	ng information about	the supporte	ed organizati	ion(s)				
				/::: >					<u> </u>		T
(ii) Name of supported organization (see (iii) Type of organization (described on lines 1- 9 above or IRC section (see					(vii) A mount of support?						
instructions)) Yes No Yes No Yes No											
T-4-1	1										
Total	1		I	l	I	I	1	I	I	I	I

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	Part II. If the organi	zation rails to q	uality under the	e tests listed be	low, please co	mpiete Pa	art 11.)			
	ction A. Public Support ndaryear (or fiscal year beginning	1								
Care	in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	11	(f) Total		
1	Gifts, grants, contributions, and									
	membership fees received (Do	412,354	1,161,542	979,305	1,810,397	8.6	37,774	13,001,372		
	not include any "unusual	112,551	1,101,312	373,303	1,010,037	0,0	3,,,,	13,001,372		
_	grants ")						-+			
2	Gross receipts from admissions, merchandise sold or services									
	performed, or facilities furnished									
	in any activity that is related to	11,436,077	37,602,792	32,467,550	43,919,136	59,4	41,444	184,866,999		
	the organization's tax-exempt									
	purpose									
3	Gross receipts from activities									
	that are not an unrelated trade or									
_	business under section 513						-+			
4	Tax revenues levied for the organization's benefit and either									
	paid to or expended on its									
	behalf									
5	The value of services or facilities									
	furnished by a governmental unit									
	to the organization without									
	charge									
6	Total. Add lines 1 through 5	11,848,431	38,764,334	33,446,855	45,729,533	68,0	79,218	197,868,371		
7a	Amounts included on lines 1, 2,							0		
	and 3 received from disqualified persons							U		
h	Amounts included on lines 2 and						_			
U	3 received from other than									
	disqualified persons that exceed					F2 7	27 027	52,727,027		
	the greater of \$5,000 or 1% of				32,727,	52,727,027		32,727,027		32,727,027
	the amount on line 13 for the									
	year									
	Add lines 7a and 7b					52,7	27,027	52,727,027		
8	Public Support (Subtract line 7c							145,141,344		
50	from line 6)									
	ndar year (or fiscal year									
Care	beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(f) Total		
9	A mounts from line 6	11,848,431	38,764,334	33,446,855	45,729,533	68,0	79,218	197,868,371		
10a	Gross income from interest,									
	dividends, payments received									
	on securities loans, rents,	11,039	7,279	8,172	3,173		39,712	69,375		
	royalties and income from									
	sımılar sources									
b	Unrelated business taxable									
	income (less section 511 taxes) from businesses									
	acquired after June 30, 1975									
С	Add lines 10a and 10b	11,039	7,279	8,172	3,173		39,712	69,375		
11	Net income from unrelated	·	,	<u> </u>	,			· · · · · · · · · · · · · · · · · · ·		
	business activities not included									
	ın lıne 10b, whether or not the									
	business is regularly carried on									
12	Other income Do not include									
	gain or loss from the sale of					5.	56,076	556,076		
	capital assets (Explain in Part IV)									
13	Total support (Add lines 9, 10c,									
13	11 and 12)	11,859,470	38,771,613	33,455,027	45,732,706	68,6	75,006	198,493,822		
14	First Five Years If the Form 990 is	for the organizati	on's first, second,	third, fourth, or f	ifth tax year as a	501(c)(3)	organı	zation,		
	check this box and stop here	_					_	·►□		
	ction C. Computation of Pub					<u> </u>				
15	Public Support Percentage for 201	1 (lıne 8 column (f) divided by line	13 column (f))		15		73 120 %		
16	Public support percentage from 20	10 Schedule A, P	art III, line 15			16		99 580 %		
Se	ction D. Computation of Inv	estment Inco	me Percentac	ne						
17	Investment income percentage for				(f))	17		0 030 %		
18	Investment income percentage froi	•				18		0 040 %		
	33 1/3% support tests—2011. If th				line 15 is a second		ر ا			
		e organization did	гног спеск тре во	x on tine 14. and	Time to is more t	Liiaii 33 1/3	own and	TITLE 1 / IS DOT		

33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

Additional Data

Software ID: Software Version:

EIN: 03-0304418

Name: VERMONT ENERGY INVESTMENT CORPORATION

3,854,682)

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services

(Code

) (Expenses \$ 2,759,503 including grants of \$) (Revenue \$

EFFICIENCY SMART - EFFICIENCY SMART IS AN ENERGY EFFICIENCY PROGRAM THAT ASSISTS INDIVIDUALS AND BUSINESSES IN LOWERING THEIR POWER BILLS BY PROVIDING TECHNICAL ASSISTANCE AND FINANCIAL INCENTIVES FOR EOUIPMENT AND SYSTEMS THAT IMPROVE ELECTRICAL EFFICIENCY DLN: 93493319041352

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

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

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

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

◆ 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 org	janization	
VERMONT	ENERGY	INVESTMENT	CORPORATION

Employer identification number

03-0304418

Part I-A	Complete if	the organization i	<u>s exempt under se</u>	ction 501(c) o	or is a section 527	⁷ organization.

- in opposition to candidates for public office in Part IV Political expenditures
- 3 Volunteer hours

art I-B	<u>Complete if</u>	the organization	<u>ı is exempt unde</u>	<u>er section 501(c)(3).</u>	

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- 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?
- Was a correction made? ☐ Yes
 - If "Yes," describe in Part IV

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

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year? ┌ Yes 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

(e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none. enter -0-

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia 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 If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not 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 \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) 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? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) 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.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. Soon over \$1,000,000 Fig. Soon ov			expenses, and share of excess lob	bying expenditures)		_	•	
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Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all 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) 20 Lobbying ceiling amount								
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Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

Tiedule C (F	Jill 990 01 990-L2/2011			Page
Part II-B	Complete if the organization is exempt under section $501(c)(3)$ and has (election under section $501(h)$).	NOT fi	led Fo	rm 5768
		(a	1)	(b)

		(a	3)	(D)
		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			
а	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
C	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		2,34
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			2,34
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912		•	
_	If "Yes," enter the amount of any tay incurred by organization managers under section 4912			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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

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".

-	Dues, assessments and similar amounts from members	-	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
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	
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

DLN: 93493319041352

OMB No 1545-0047

Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number VERMONT ENERGY INVESTMENT CORPORATION 03-0304418 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶_ Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year -Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

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

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

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

Schedule D (Form 990) 2011 Cat No 52283D

Part	311 Organizations Maintaining Co	llections of Art	t, His	<u>stori</u>	cal Tr	easu	ires, or C	the	<u>r Similar As</u>	sets (continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	ny of th	he fol	lowing t	that ar	e a signific	ant u	se of its collect	ion	
а	Public exhibition		d	\sqcap	Loan	orexc	hange prog	rams			
ь	Scholarly research		e	\vdash	Other	-					
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain hoi	w tha	v furthe	rthe c	organization	1'C AV	emnt nurnose i	n	
7	Part XIV						_			11	
5	During the year, did the organization solicition assets to be sold to raise funds rather than t									☐ Yes	□ No
Par	t IV Escrow and Custodial Arrang	ements. Compl	ete ıf	the	organ	ızatıor					1 110
	Part IV, line 9, or reported an an Is the organization an agent, trustee, custoo						or other ass	ets		_	
	included on Form 990, Part X?									Yes	No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follov	ving t	able		г	1			
							-		An	nount	
С	Beginning balance						-	1c			
d	Additions during the year						-	1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	ne 21?	,						☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	1									
Pai	rt V Endowment Funds. Complete										
		(a)Current Year	(Ь) Prior	Year	(c) Tw	o Years Back	(d)	Three Years Back	(e) Four '	Years Back
1a	Beginning of year balance							+			
Ь	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 yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
С	Term endowment ▶										
3a	Are there endowment funds not in the posse	ssion of the organiz	zatıon	thata	are held	d and a	dministere	d for	the		
	organization by									Yes	No
	(i) unrelated organizations							•	3a(
	(ii) related organizations							•	3a(
	If "Yes" to 3a(II), are the related organizatio	•						•	<u>3</u> 1)	
4	Describe in Part XIV the intended uses of th					10					
Fell	t VI Land, Buildings, and Equipme	ent. See Form 95	90, Pa				l				
	Description of property) Cost or is (inves		(b)Cost or o basis (oth		(c) Accumulated depreciation	(d) E	Book value
1a	Land										
b I	Buildings										
c l	Leasehold improvements						2,034	1,381	1,765,08	10	269,301
d I	Equipment						78!	5,306	351,99	5	433,311
е (Other						2,212	2,541	1,457,59	17	754,944
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B), line	10(c).)				►		1,457,556
	·								Schedule D	(Form	990) 2011

Part VII Investments—Other Securities. See	Form 990, Part X, line 1.	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	. ,	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990. Part X. col (B) line 12)		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. See		12
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
		(2)
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		<u> </u>
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability		
	(b) A mount	
Federal Income Taxes		
CAPITAL LEASE OBLIGATIONS	744,077	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	744,077	
		pization's financial statements that reports the

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	68,675,006
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	66,669,382
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,005,624
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	-19,968
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-19,968
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	1,985,656
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	68,675,006
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	C
3	Subtract line 2e from line 1	3	68,675,006
4	A mounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	C
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	68,675,006
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Ret	
1	Total expenses and losses per audited financial statements	1	66,669,382
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
С	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	C
3	Subtract line 2e from line 1	3	66,669,382
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	1	
С	Add lines 4a and 4b	4c	C
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	66,669,382
Pa	rt 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		VEIC FOLLOWS THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES STANDARD WHICH REQUIRES VEIC TO REPORT UNCERTAIN TAX POSITIONS, RELATED INTEREST AND PENALTIES, AND TO ADJUST ITS ASSETS AND LIABILITIES RELATED TO UNRECOGNIZED TAX BENEFITS AND ACCRUED INTEREST AND PENALTIES ACCORDINGLY AS OF DECEMBER 31, 2011, VEIC DETERMINED THAT THERE ARE NO MATERIAL UNRECOGNIZED TAX BENEFITS TO REPORT INFORMATION RETURNS FILED FOR 2010, 2009 AND 2008 REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE AND VERMONT STATE JURISDICTIONS VEIC DOES NOT EXPECT THAT THE AMOUNTS OF UNRECOGNIZED TAX BENEFITS WILL CHANGE SIGNIFICANTLY WITHIN THE NEXT TWELVE MONTHS
		PART XII LINE 2D - PRIOR PERIOD ADJUSTMENT FOR REVENUE RECOGNIZED IN 2011 INSTEAD OF 2010

DLN: 93493319041352

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23.

Open to Public

iterial Neverlue Service	Attach to Form 990. F See separate instructions.		Inspection
Name of the organization VERMONT ENERGY INVESTMENT CORPORATION		Employer identif	ication number
		03-0304418	
Part I Questions Regarding Co	ompensation		

		,		163	NO
1a	Check the appropriate box(es) if the organization provided any of 990, Part VII, Section A, line 1a Complete Part III to provide				
	First-class or charter travel	ousing allowance or residence for personal use			
	☐ Travel for companions ☐ Pa	syments for business use of personal residence			
	Tax idemnification and gross-up payments	ealth or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Pe	ersonal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization reimbursement orprovision of all the expenses described above		1b		
2	Did the organization require substantiation prior to reimbursing officers, directors, trustees, and the CEO/Executive Director, i		2		
3	Indicate which, if any, of the following the organization uses to organization's CEO/Executive Director Check all that apply	establish the compensation of the			
		ritten employment contract			
		ompensation survey or study			
	Form 990 of other organizations	oproval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, S or a related organization	ection A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?		4a		No
ь	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?				Νο
С	Participate in, or receive payment from, an equity-based comp	· · · · · · · · · · · · · · · · · · ·	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the a	.			
	Only 501(c)(3) and 501(c)(4) organizations only must complete	e lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, discompensation contingent on the revenues of	the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		No
	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 compensation contingent on the net earnings of	the organization pay or accrue any			
а	The organization?		6a		No
b	Any related organization?		6b		No
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, di payments not described in lines 5 and 6? If "Yes," describe in		7		No
8	Were any amounts reported in Form 990, Part VII, paid or accusing subject to the initial contract exception described in Regs second Part III		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable section 53 4958-6(c)?	e presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base (ii) Bonus & (iii) Other		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior	
		(i) Base compensation	incentive compensation	reportable compensation	compensation			Form 990 or Form 990-EZ
(1) SCOTT JOHNSTONE	(I) (II)	139,219 0	0 0	0 0	7,431 0	10,710 0	157,360 0	0 0

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
	3	THE BOARD OF DIRECTORS DETERMINED THE EXECUTIVE DIRECTOR'S SALARY THE BOARD WAS ADVISED BY THE CONSULTANT/SEARCH FIRM (ISAACSON MILLER) WHO HELPED THEM HIRE THIS POSITION THEY ALSO CONSIDERED EXECUTIVE SALARIES FOR OTHER VERMONT NON-PROFIT AND GOVERNMENT INSTITUTIONS

Schedule J (Form 990) 2011

OMB No 1545-0047

2011

Open to Public Inspection

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.

Name of the organization VERMONT ENERGY INVESTMENT CORPORATION

Employer identification number

03-0304418

Identifier	Return	Explanation
	Reference	·
NEW PROGRAM SERVICES	FORM 990, PART III, LINE 2	DC SEU OFFERS INTEGRATED PERFORMANCE BASED IMPLEMENTATION SERVICES, BASED ON VEIC'S INDUSTRY LEADING PROGRAMS, ADAPTED FOR SUCCESS IN THE DISTRICT GOALS FOR THESE INITIATIVES ARE TO REDUCE ELECTRIC AND GAS ENERGY USE BY 1% PER YEAR, INVESTING 30% OF PROGRAM FUNDING IN IMPROVING THE ENERGY EFFICIENCY OF LOW-INCOME HOUSING CREATING AND DOCUMENTING GREEN JOBS, AND ASSURING THAT MORE THAN 50% OF CONTRACTED FUNDS ARE WITH LOCAL DC BASED BUSINESSSES
	FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE REVIEWS THE 990 AND THEN PRESENTS A SUMMARY TO THE GOVERNING BOARD FOR APPROVAL
	FORM 990, PART VI, SECTION B, LINE 12C	VEIC REQUIRES AN ANNUAL SIGN OFF FROM DIRECTORS DISCLOSING INTERESTS THAT COULD GIVE RISE TO CONFLICT OF INTEREST THE CONFLICT OF INTEREST STATEMENTS ARE SUBMITTED FOR REVIEW TO VEIC AS SOON AS A POTENTIAL CONFLICT OF INTEREST EXISTS, A BOARD MEMBER MUST FULLY DISCLOSE THE NATURE OF THE INTEREST AND WITHDRAW FROM VOTING ON THE MATTER
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS DETERMINED THE EXECUTIVE DIRECTOR'S SALARY THE BOARD WAS ADVISED BY THE CONSULTANT/SEARCH FIRM (ISAACSON MILLER) WHO HELPED THEM HIRE THIS POSITION THEY ALSO CONSIDERED EXECUTIVE SALARIES FOR OTHER VERMONT NON-PROFIT AND GOVERMENT INSTITUTIONS THE EXECUTIVE DIRECTOR MAKES DECISIONS REGARDING ALL KEY EMPLOYEE COMPENSATION (EXCLUDING EXECUTIVE DIRECTOR COMPENSATION WHICH IS DETERMINED BY THE BOARD)
	FORM 990, PART VI, SECTION C, LINE 19	VEIC CURRENTLY DOES NOT HAVE A PROCESS THAT MAKES THESE DOCUMENTS AVAILABLE TO THE PUBLIC HOWEVER, VEIC WOULD PROVIDE THESE DOCUMENTS TO ANY MEMBER OF THE PUBLIC WHO REQUESTS TO SEE THEM
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	PRIOR PERIOD ADJUSTMENTS -19,968
		FORM 990 PART XII LINE 2C VEIC HAS AN AUDIT COMMITTEE WHICH ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND ALSO IS RESPONSIBLE FOR SELECTION OF VEIC'S INDEPENDENT ACCOUNTANT