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DLN: 93493222008846

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 private foundations)

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2015

Open to Public Inspection

<del>_</del>	For th	ne 2015	calendar year, or tax year beginni	ng 01-01-2015 , and ending 12-31-20	015					
		applicab	C Name of organization			D Emplo	yer ident	ification number		
		change	Electric Power Research Institute In	С		23-7	23-7175375			
$\Gamma_{N}$	lame ch	hange	% EPRI FINANCE DIVISION Doing business as				1,33,3			
	nıtıal re	turn								
, F	inal			mail is not delivered to street address) Room/	suite	E Teleph	one numbe	er		
		erminated	3420 Hillview Avenue			(650)	855-20	00		
ΓA	mende	d return		intry, and ZIP or foreign postal code						
Га	pplicati	on pendı	Palo Alto, CA 94304 ng			<b>G</b> Gross	receipts \$ 7	746,858,381 		
			<b>F</b> Name and address of pri	ncıpal officer	H(a) 14	s this a group	return fo	or		
			Michael W Howard		I	ubordinates?		⊢Yes <b>√</b> No		
			3420 Hillview Avenue Palo Alto, CA 94304		1	re all subord	ınates	□Yes □No		
			,			icluded? f "No " attach	nalist (s	see instructions)		
ΙŢ	Гах-ехе	empt stat	us 🔽 501(c)(3) 🦵 501(c)( ) 🖪 (	insert no )	1	Group exemp				
	Websi	te:► v	vww epri com		7 ` `	stoup exemp	ion nam	5C1 F		
				Tour h	1					
	orm of c		on 🔽 Corporation 🗆 Trust 🗀 Association	on   Other <b>F</b>	<b>L</b> Year	of formation 19	972   <b>M</b> S	tate of legal domicile DC		
P			<u>-</u>							
			describe the organization's mission nedule O	n or most significant activities						
æ										
Ĕ.	.									
Governance	,	Chack	this boy by if the organization di	scontinued its operations or disposed	of more tha	n 25% of its	net acce	ate.		
Š	*	CHECK	tills box Fig. II the organization di	scontinued its operations of disposed	or more tha	111 23 70 01 165	net asse	:15		
	3	Numbe	er of voting members of the govern	ing body (Part VI, line 1a)			з	35		
8	4	Numbe	er of independent voting members	of the governing body (Part VI, line 11	b)		4	34		
툳	5	Total	number of individuals employed in	calendar year 2015 (Part V, line 2a)			5	969		
Activities &	6	Total	number of volunteers (estimate if r	necessary)		[	6	40		
•	7a	Totalı	ınrelated busıness revenue from P	art VIII, column (C), line 12		[	7a	48,917,677		
	b	Net unr	elated business taxable income fr	om Form 990-T, line 34			7b	-311,861		
						Prior Year		Current Year		
-	8		trıbutıons and grants (Part VIII, I		0	0				
Revenue	9	Pro	gram service revenue (Part VIII, l		383,281,	829	400,914,147			
3	10		· · · · · · · · · · · · · · · · · · ·	n (A), lines 3, 4, and 7d)		1,492,		1,252,891		
ш.	11		, , , , , , , , , , , , , , , , , , , ,	, lines 5, 6d, 8c, 9c, 10c, and 11e)		4,387,	270	4,821,020		
	12	Tot 12)	=	l (must equal Part VIII, column (A), li	ine	389,161,	833	406,988,058		
	13			t IX, column (A), lines 1-3)	_	1,791,	041	1,266,322		
	14			IX, column (A), line 4)			0	0		
	15			ee benefits (Part IX, column (A), lines	-	141 255	430	1 4 7 2 1 0 4 0 7		
\$		5 – 1		, , , , , ,		141,355,	420	147,318,487		
क्	<b>16</b> a	a Pro	fessional fundraising fees (Part IX	(, column (A), line 11e)			0	0		
Expenses	b	Tota	l fundraısıng expenses (Part IX, column (I	D), line 25) ▶ 0						
_	17			lines 11a-11d, 11f-24e)		229,129,	006	235,516,093		
	18			ust equal Part IX, column (A), line 25)		372,275,	_	384,100,902		
	19	Rev	enue less expenses Subtract line	18 from line 12	-	16,886,	366	22,887,156		
ზწ დღ					Beginni	ng of Current	Year	End of Year		
Not Assets or Fend Balances	20	Tot	al assets (Part X, line 16)			335,467,	448	353,339,197		
2.4 2.4	21		al liabilities (Part X, line 26)			209,013,		204,354,290		
2 2 2	22			tline 21 from line 20		126,454,	_	148,984,907		
Pä	art II	Sig	gnature Block				· ·			
my prep	knowl parer l	edge ar has any	nd belief, it is true, correct, and co knowledge *****	amined this return, including accompamplete Declaration of preparer (other		) is based on 2016-08-08				
Sig		[ [	gnature of officer			Date				
He	re		AMELA J KEEFE SVP CFO & Treasurer  ype or print name and title							
			Print/Type preparer's name	Preparer's signature	Date	Charle T :	PTIN			
Pa	id		rosemarie brown	rosemarie brown	34.0	Check if self-employed	P012780	77		
		or.	Firm's name FGRANT THORNTON LL	P		Firm's EIN ►	1			
L.	epar	<u>61</u>	Firm's address - 101 CALIFORNIA STRE	ET SUITE 2700		Phone no (415	5) 986-390	0		

SAN FRANCISCO, CA 94111
May the IRS discuss this return with the preparer shown above? (see instructions)

**Use Only** 

. ✓ Yes ┌ No

Par	t III		of Program Se				r age <b>-</b>
					o any line in this Part I	II	<u> </u>
1		•	organization's miss	ion			
SEE	SCHED	ULE O					
2	the pr	or Form 990 or	990-EZ?		ervices during the year	which were not listed on	⊤Yes ▼No
			se new services oi				
3	servic	es?			nt changes in how it coi	nducts, any program	⊤Yes ▼No
	If "Ye	s," describe the	se changes on Sch	nedule O			
4	expen	ses Section 50		)(4) organization:	s are required to report	ree largest program services, the amount of grants and allo	
4a	(Code		) (Expenses \$	293,029,566	including grants of \$	1,266,322 ) (Revenue \$	402,737,473 )
	See Se	chedule O					
4b	(Code		) (Expenses \$		ıncludıng grants of \$	) (Revenue \$	)
70	(0000	•	, (Expenses $\phi$		medaning grants or \$	) (Nevenue 4	,
	/C		\ /F			) /D====== #	· · · · · · · · · · · · · · · · · · ·
<b>4</b> c	(Code	:	) (Expenses \$		including grants of \$	) (Revenue \$	)
			/D : -				
4d		r program servi enses \$	ces (Describe in S	chedule O ) ncluding grants o	f¢	) (Revenue \$	١
_					·	) (Nevenue \$	)
4e	iota	l program servic	æ expenses ►	293,029,566	1		

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Par	t 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	NO
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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? If "Yes," complete Schedule C, Part I	3		No
	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 I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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 for escrow or custodial account liability, 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 "Yes," complete Schedule D, Part V</i> 😼	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			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	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	Yes	
	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
	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
е	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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
	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
	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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	206		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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
	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
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,  Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
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
	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, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, 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	Yes	
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 11b and 19?	38	Yes	

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Pai	<b>Statements Regarding Other IRS Filings and Tax Compliance</b> Check if Schedule O contains a response or note to any line in this Part V			
	check it believed to contains a response of flote to any line in this fart V 1 1 1 1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 3	372		
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	969		
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 (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule $O$	3b	Yes	
	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	Yes	
b	If "Yes," enter the name of the foreign country ►JA, SP, UK, EI, CA, KS  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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 as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or g were not tax deductible?	ifts 6b		
7	,			NI -
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods an services provided to the payor?			No
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	<b>—</b>		
•	file Form 8282?	7c		Νo
d	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		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	. 7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 required?	as <b>7g</b>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	a <b>7h</b>		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any tim	e		
	during the year?	8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12   10a			
	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  10b			
	facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions fadditional information the organization must report on Schedule O	or <b>13a</b>		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments 21f "No " provide an explanation in Schedule 0	14h		

	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  1a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 34			
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		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
ь	more members of the governing body?	7a 7b	Yes Yes	
R	or persons other than the governing body?			
	year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		
40-	Ded the consequence have been been been been been been self-been 2	40-	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	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		114	1 65	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	110		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
12a				
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
12a b c	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	Yes	
12a b c 13	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c	Yes Yes	
12a b c 13	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13	Yes Yes Yes	
12a b c 13 14	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13	Yes Yes Yes	
12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14	Yes Yes Yes Yes Yes	
12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►EPRI FINANCE DIVISION 3420 HILLVIEW AVENUE Palo Alto, CA 94304 (650) 855-2000

# Part VII 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 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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion ( han d in is l	one b both	ox, an c	heck unless officer stee)	i	(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
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organization and related organizations
See Additional Data Table										
										Form <b>990</b> (2015)

Par	Section A. Officers,	Directors, irus	stees,	Key i	<u>-</u> mp	лоу	ees, a	na r	nignest Compens		( continu	ea) 	
	<b>(A)</b> Name and Tıtle	A verage hours per week (list any hours for related organizations below dotted line)  (C)  Position (do not check more than one box, unless person is both an officer and a director/trustee)  Or Cliest any hours for related organizations below dotted line)  (C)  Position (do not check more than one box, unless person is both an officer and a director/trustee)  Or Cliest any hours for related organizations below dotted line)  (D)  Reportable compensation from the organization (W-2/1099-MISC)  2/1099-MISC)  2/1099-MISC)									amou com fr	(F) Estimated amount of other compensation from the organization and	
		organizations below dotted line)		Institutional Trustee	Ke) emplojee Officei		Highest compensated employee	Former	2/1099-MISC)	2/1099-M1SC)	r	elate	
See	Additional Data Table												
					$\vdash$	t	<u> </u>				1		
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1b	Sub-Total		٠	٠.	-		►			,	•		
C	Total from continuation shee	•					•						
d	Total (add lines 1b and 1c) .				_ •	•	<b>P</b> -		8,563,847	0		2,5	80,631
2	Total number of individuals (ii \$100,000 of reportable comp							e) wl	ho received more th	nan			
											Y	es	No
3	Did the organization list any <b>f</b> on line 1a? <i>If "Yes," complete</i>									sated employee	3		No
4	For any individual listed on lir organization and related orga individual										4 Y	es	
5	Did any person listed on line	1a receive or acc	crue cor	npen	satı	on fr	om anv	/ unr	elated organization	or individual for			
_	services rendered to the orga										5		Νo
	_										•		
Se	ection B. Independent Co	ontractors											

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

(A) Name and business address	( <b>B)</b> Description of services	<b>(C)</b> Compensation
VIA Motors Inc, 165 Mountain Way Drive OREM, UT 84058	Contract R&D	8,820,376
Electricite de France,  1 AVENUE DU GENERAL DE GAULLE CLAMART CEDEX, 0 92143 FR	Contract R&D	5,166,393
Areva Federal Services Inc, 7207 ibm drive CHARLOTTE, NC 28262	Contract R&D	4,744,038
Structural Integrity Associates, 5215 Hellyer Avenue SAN JOSE, CA 95138	Contract R&D	4,234,742
Westinghouse Electric Co LLC, 1000 Westinghouse Drive CRANBERRY TOWNSHIP, PA 16066	Contract R&D	4,019,869

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 🕨 373

Part V	***	Statement o			and the second			_
		Check if Schedu	ule O contains a respoi	nse or note to any lu	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
0 K	1a	Federated cam	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership du	es <b>1b</b>					
ا <u>ء</u> وَرَ	С	Fundraising eve	ents 1c					
Ę.	d	_	zations 1d					
<u>.</u> ≘ [		Government grants						
Si Si	е	_	. ,					
₽ï	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above					
룓美	g		ons included in lines					
Contr and (	_	1a-1f \$			0			
ع ت	h	Iotal. Add lines	s 1a-1f	•	0			
<u>a</u>				Business Code				
e l	2a	MEMBERSHIP FEE	REVENUE	541900	190,693,700	176,682,249	14,011,451	
æ	b	SUPPLEMENTAL FU	INDING	541900	202,281,530	175,314,221	26,967,309	
921	С	BILLABLE SERVICES	S	541900	7,938,917		7,938,917	
Ž	d	_						
Program Serwce Revenue	е							
   	f	All other progra	am service revenue					
Ě	g	Total. Add lines	s 2a-2f		400,914,147			
	3	Investment inc	ome (including dividen	ds, interest,				1 340 76
	_		ar amounts) stment of tax-exempt bond		1,249,763			1,249,76
	4			<b>-</b>	987,387			987,38
	5	Royallies	(ı) Real	(II) Personal	307,307			307/30
	6a	Gross rents	2,317,630	(II) I ersonal				
	_		207.222					
	b	Less rental expenses	307,323					
	С	Rental income or (loss)	2,010,307	0				
	d		me or (loss)		2,010,307			2,010,30
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	339,563,000	3,128				
	b	Less cost or other basis and sales expenses	339,563,000	2.120				
	C	Gain or (loss)	- >	3,128	3,128			3,12
Other Revenue	d 8a	Gross income fevents (not inc	luding  reported on line 1c)		3,110			5,12
<u> </u>			а					
ō			penses <b>b</b>	avents	0			
	c 9a		(loss) from fundraising rom gaming activities	events 🕦				
	эa	See Part IV, lin						
			а					
			penses <b>b</b>					
			(loss) from gamıng actı 	vities <b>.</b> ►	0			
	10a	Gross sales of returns and allo						
	b	Less cost of g	oods sold <b>b</b>					
	С		(loss) from sales of inv		0			
		Miscellaneous		Business Code				
	11a	SALE OF R&D	REPORTS	900099	1,686,481	1,686,481		
	b	OTHER INCOM	1E	900099	136,845	136,845		
	С							
	d	All other reven						
	е	Total. Add lines	s 11a-11d	🕨	1,823,326			
	12	Total revenue.	See Instructions .	🛌	406,988,058	353,819,796	48,917,677	4,250,58
	1				. 55,550,050	222,012,730	. 5, 5 ± 1, 0 1 1	1,230,30

	Part IX Statement of Functional Expenses								
Section	n 501(c)(3) and 501(c)(4) organizations must complete all columns								
	Check if Schedule O contains a response or note to any line in the	nis Part IX I		(C)	<u>.</u> (D)				
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,204,922	1,204,922						
2	Grants and other assistance to domestic individuals See Part IV, line 22	44 500	44 500						
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15	44,500	44,500						
	and 16	16,900	16,900						
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors, trustees, and key employees	8,656,876		8,656,876					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	75,144	75,144						
7	Other salaries and wages	96,370,266	59,162,375	37,207,891					
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	13,107,144	7,687,653	5,419,491					
9	Other employee benefits	22,011,272	12,910,137	9,101,135					
10	Payroll taxes	7,097,785	4,163,021	2,934,764					
11	Fees for services (non-employees)								
а	Management	0							
b	Legal	709,749	73,094	636,655					
C	Accounting	346,872		346,872					
d	Lobbying	36,275		36,275					
е	Professional fundraising services See Part IV, line 17	0							
f	Investment management fees	281,961		281,961					
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	335,582		335,582					
12	Advertising and promotion	0							
13	Office expenses	13,595,121	12,867,673	·					
14	Information technology	5,329,096		5,329,096					
15	Royalties	0							
16	Occupancy	4,074,276	3,880,181	194,095					
17	Travel	14,988,481	11,188,324	3,800,157					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0							
19	Conferences, conventions, and meetings	9,225,967	8,127,730	1,098,237					
20	Interest	210,289		210,289					
21	Payments to affiliates	5,394,739	1,032,488	4,362,251					
22	Depreciation, depletion, and amortization	10,399,178	9,903,769	495,409					
23	Insurance	728,916		728,916					
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)								
а	R&D EXPENSES	156,590,839	156,590,839						
b	CONSULTING	3,900,229		3,900,229					
c	TELEPHONE	1,604,823		1,604,823					
d	STAFFING	1,179,630		1,179,630					
e	All other expenses	6,584,070	4,100,816	2,483,254					
25	Total functional expenses. Add lines 1 through 24e	384,100,902	293,029,566	91,071,336	0				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)								

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X	Par		Charlest Cabadula O contains a manage of note to any		this Dawt V			_
1   Cash-non-interest-bearing   Sagnamp of year   Sagnamp of ye			Check it Schedule O contains a response or note to any	line in	tnis Part X		• •	· · · · · · · · · · · · · · · · · · ·
1								
2   Savings and temporary cash investments   128,072,692   2   104,731,404		1	Cash-non-interest-bearing				1	
3   Pledges and grants receivable, net		2				123,572,592	2	104,781,445
4 Accounts receivable, net.  5 Loans and other receivables from current and former officers, directors, trustees, loan and other receivables from current and former officers, directors, trustees, loan and other receivables from extent disqualified persons (as defined under section 4958(1)1)), persons described in section 4958(1)8), and countriuring employees and generations of section 511 (e/g) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule D  7 Notes and loans receivable, net.  9 Prepard expenses and deferred charges  10a Inventiones for sale or use.  9 Prepard expenses and deferred charges  10b Loans accumulated depreciation  10c Investments—publicity traded securities  10 Investments—publicity traded securities  11 Investments—publicity traded securities  12 Investments—program-related See Part IV, line 11  13 Investments—program-related See Part IV, line 11  14 Intangible assets  15 Other assets See Part IV, line 11  17 Accounts pavable and accruate expenses  18 Granta payable  19 Deferred revenue  10 Total issets.  10 Deferred revenue  10 Total issets and indeptity and describe and former officers, directors, trustees, large employees, highest compensated employees, and disqualified and other habilities. Add lines 17 through 25  19 Total indeptities and loans assayable to unrelated third parties.  10 Organizations that follow SFAS 117 (ASC 958), check here ►   and complete   and complete   and charges and loans assayable to unrelated third parties.  10 Organizations that follow SFAS 117 (ASC 958), check here ►   and complete   and		3						0
Several process and other receivables from current and former officers, directors, trustees, leveral process, and highest compensated employees. Complete Part 11 of Schedule 1.    Compare the process of the proces						46,599,934	4	35.201.271
Severable   Sev						, ,		, ,
Section 4988(f(1)), persons described in section 4958(c)(3)(b), and conjugate the section 4958(f(1)), persons described in section 501c(p)   Section 501c			key employees, and highest compensated employees					
Section 4938 (17), in present sequence from charm discounting persons (as defined under section 4938 (17)), in present sequented on action 4958 (12) (18), in present sequented on action 4958 (12) (18) and a contributing amployees in description of a section 501 (2) (9) voluntary employees in the sequence of the se			Schedule L					
Section 4958 (f)(L)), persons described in section 4958 (c)(3)(8), and contributing employers and spanning organizations of section 501c(19) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L  7 Notes and loans receivable, net						0	5	0
Contributing employers and sponsoring organizations of section 501 (c)(9)		6						
Notes and loans receivable, net   0   6   0   0   0   0   0   0   0   0			contributing employers and sponsoring organizations of	fsection	n 501(c)(9)			
Notes and loans receivable, net   0 6 0 0   0   0   0   0   0   0   0				structio	ons) Complete Part			
8	ets ets		II of Schedule L			0	6	0
8	Š.	_	Notes and leans reservable, not					
9   Prepaid expenses and deferred charges   5,556.236   9   4,372,034     10a   Land, buildings, and equipment cost or other basis   10a   146,892,332     10b   90,697.235   54,783,338   10c   56,195,067     11   Investments—publicly traded securities   0   11   0     12   Investments—publicly traded securities   10a   14   0     13   Investments—program-related See Part IV, line 11   70,488,853   12   101,832,903     13   Investments—program-related See Part IV, line 11   3,3624,453   15   2,741,252     15   Other assets See Part IV, line 11   3,3624,453   15   2,741,252     16   Total assets. Add lines 1 through 15 (must equal line 34)   335,467,448   16   363,338,197     17   Accounts payable and accrued expenses   56,044,643   17   64,686,810     18   Grants payable   0   18   0   0   18   0     19   Deferred revenue   136,529,458   19   125,436,435     10   Escrewor custodial account liability   Complete Part IV of Schedule   0   20   0     10   Escrewor custodial account liability   Complete Part IV of Schedule   0   21   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   22   0     10   Complete Part IV of Schedule   0   24   0     10   Complete Part IV of Schedule   0   22   0     11   Complete Part IV of Schedule   0   22   0     12   Complete Part IV of Schedule   0   24   0     13   Complete Part IV of Schedule   0   24   0     14   Complete Part IV of Schedule   0   24   0     15   Complete Part IV of Schedule   0   24   0     16   Complete Part IV of Schedule   0   24   0     17   Complete Part IV of Schedule   0   24   0     18   Complete Part IV of Schedule   0   24   0     19   Complete Part IV of	⋖		·					
10a								
Complete Part VI of Schedule D   10a   146,862,332						J,336,∠36	9	4,372,094
b		TOU		10a	146,892,332			
12   Investments other securities See Part IV, line 11   70.488,833   12   101.832,903   13   101.832,903   13   101.832,903   14   101.832,903   14   101.832,903   14   101.832,903   15   101.832,903   15   101.832,903   15   101.832,903   15   101.832,903   15   101.832,903   15   101.832,903   15   101.832,903   16   16   101.832,903   17   17   17   17   18   18   18   18		b	Less accumulated depreciation	10b	90,697,235	54,783,338	<b>10</b> c	56,195,097
13		11	Investments—publicly traded securities			0	11	0
14		12	Investments—other securities See Part IV, line 11			70,468,853	12	101,832,903
15		13	Investments—program-related See Part IV, line 11			0	13	0
16		14	Intangible assets			0	14	0
17		15	Other assets See Part IV, line 11			3,928,453	15	2,741,252
18   Grants payable   0   18   0   0   18   0   0   19   0   19   0   18   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   19   125,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,435   126,436,43		16	Total assets.Add lines 1 through 15 (must equal line 3	4) .		335,467,448	16	353,339,197
19		17	Accounts payable and accrued expenses			58,044,643	17	64,698,610
Tax-exempt bond liabilities   0 20		18	Grants payable			0	18	0
21   Escrow or custodial account liability Complete Part IV of Schedule D		19	Deferred revenue			136,529,458	19	125,436,435
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20	Tax-exempt bond liabilities			0	20	0
24 Unsecured notes and loans payable to unrelated third parties	_	21	Escrow or custodial account liability Complete Part IV	/ of Sch	edule D	0	21	0
24 Unsecured notes and loans payable to unrelated third parties	ities	22						
24 Unsecured notes and loans payable to unrelated third parties	园		persons Complete Part II of Schedule L			0	22	0
24 Unsecured notes and loans payable to unrelated third parties	Ē	23	Secured mortgages and notes payable to unrelated thi	rd partie	es	0	23	0
and other liabilities not included on lines 17-24) Complete Part X of Schedule D  26 Total liabilities.Add lines 17 through 25		24	Unsecured notes and loans payable to unrelated third	parties		0	24	0
26 Total liabilities.Add lines 17 through 25		25		s to rela	ated third parties,			
26 Total liabilities.Add lines 17 through 25			·			14,439,210	25	14,219,245
Organizations that follow SFAS 117 (ASC 958), check here  and complete lines 27 through 29, and lines 33 and 34.  127 Unrestricted net assets		26						
Ilines 27 through 29, and lines 33 and 34.   27	_	20					20	
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   126,454,137   33   148,984,907     34   Total liabilities and net assets/fund balances   335,467,448   34   353,339,197	ě				, and som <b>p</b> ioco			
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   126,454,137   33   148,984,907     34   Total liabilities and net assets/fund balances   335,467,448   34   353,339,197	ä	27	Unrestricted net assets			126,454,137	27	148,984,907
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   126,454,137   33   148,984,907     34   Total liabilities and net assets/fund balances   335,467,448   34   353,339,197	- 60 - 60	28	Temporarily restricted net assets			0	28	0
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   126,454,137   33   148,984,907     34   Total liabilities and net assets/fund balances   335,467,448   34   353,339,197	둳	29	Permanently restricted net assets			0	29	0
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   126,454,137   33   148,984,907     34   Total liabilities and net assets/fund balances   335,467,448   34   353,339,197	Ī		Organizations that do not follow SFAS 117 (ASC 958),	check l	nere ► ┌ and			
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   126,454,137   33   148,984,907     34   Total liabilities and net assets/fund balances   335,467,448   34   353,339,197			complete lines 30 through 34.					
33       Total net assets or fund balances       126,454,137       33       148,984,907         34       Total liabilities and net assets/fund balances       335,467,448       34       353,339,197		30	Capital stock or trust principal, or current funds .				30	
33       Total net assets or fund balances       126,454,137       33       148,984,907         34       Total liabilities and net assets/fund balances       335,467,448       34       353,339,197	S.O.	31	Paid-in or capital surplus, or land, building or equipme	nt fund			31	
34   Total liabilities and net assets/fund balances		32	- 1				32	
34   Total liabilities and net assets/fund balances	₹	33	Total net assets or fund balances			126,454,137	33	148,984,907
Farm 000 /2015		34	Total liabilities and net assets/fund balances			335,467,448	34	<u> </u>

FUIII	1990 (2013)			ŀ	Page 14
Par	Reconcilliation of Net Assets  Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		406,9	988,058
2	Total expenses (must equal Part IX, column (A), line 25)	2		384,1	100,90
3	Revenue less expenses Subtract line 2 from line 1	3		22,8	387,15
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		126,4	154,13
5	Net unrealized gains (losses) on investments	5		-3	356,386
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		148,9	984,90
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>, Г</u>
				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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig of the audit, review, or compilation of its financial statements and selection of an independent accountant		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
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?	ie	3a	Yes	
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		3b	Yes	

Software ID: **Software Version:** 

**EIN:** 23-7175375

Name: Electric Power Research Institute Inc

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers, ependent Cor	Direct ntracto	ors, ors	Tru	ste	es, k	(ey	Employees, Higl	hest	
( <b>A)</b> Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion ( han o n is b	ne b oth ctor,	ox, u an of /trus	inless ficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
GIL C QUINIONES CHAIRMAN OF THE BOARD	1 0	х		x				0	0	0
PAT K VINCENT-COLLAWN	1 0	х		x				0	0	0
VICE CHAIRMAN	0 0	_ ^						Ů	0	0
DENIS P O'BRIEN	1 0	×		X				0	0	0
DIRECTOR / CHAIR - PART YEAR	0 0									
NICHOLAS K AKINS		х						0	0	О
DIRECTOR THROUGH APR 2015  WARNER L BAXTER	0 0									
DIRECTOR	0 0	х						0	0	0
REBECCA BLALOCK	1 0	x						0	0	0
DIRECTOR	0 0									
JOHN A BOHN		х						6,500	0	О
DIRECTOR  MARK B BONSALL	1 0									
DIRECTOR	0 0	х						0	0	О
W TERRY BOSTON	1 0									
DIRECTOR THROUGH DEC 2015	0 0	X						0	0	0
JOSEPH P BRANNAN	1 0	V								0
DIRECTOR	0 0	Х						0	0	0
JIM BURKE  DIRECTOR	1 0	x						0	0	0
CAREN BYRD	1 0	Х						0	0	0
DIRECTOR THROUGH APR 2015  JORGE CARRASCO	0 0									
DIRECTOR THROUGH MAY 2015	0 0	х						0	0	0
SHERYL CARTER	1 0	х						0	0	0
DIRECTOR	0 0	^						Ů	0	0
SEOK CHO	1 0	x						0	0	0
DIRECTOR	0 0									
DANIEL F COLE DIRECTOR THROUGH APR 2015		х						0	0	0
DAVID C COEN	1 0									
DIRECTOR	0 0	Х						8,750	0	0
THEODORE F CRAVER JR	1 0	,,								
DIRECTOR	0 0	Х						0	0	0
ANTHONY F EARLEY JR DIRECTOR	1 0	х						0	0	0
DOUGLAS F ESAMANN	1 0									
DIRECTOR	0 0	X						0	0	0
BENJAMIN G S FOWKE III	1 0	x						0	0	0
DIRECTOR	0 0									
THAVA GOVENDER		х						0	o	0
DIRECTOR  KIMBERLY S GREENE	0 0		1							
DIRECTOR	0 0	х						0	0	0
THOMAS J HELLER	1 0	х						0	0	0
DUANE D HIGHLEY	0 0			_		_				
DIRECTOR	0 0	х						0	0	0

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

Compensated Employees, and Inde	ependent Co	tracto	rs			, -		I	I	1 1
(A) Name and Title	(B) Average hours per week (list any hours	Posit more th perso and a	ion (d nan o n is b	ne b	ox, u an of	ınless fficer	i	( <b>D</b> ) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee		Key employee		Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
CRAIG IVEY	1 0	, , ,								
DIRECTOR	0 0	X						0	0	0
LISA D JOHNSON	1 0	x						0	0	0
DIRECTOR	0 0									
ROBERT W JONES	1 0	x						8,750	0	0
DIRECTOR	0 0									
PATRICIA L KAMPLING		х						0	0	0
GALE E KLAPPA	0 0									
DIRECTOR THROUGH APR 2015	·	x						0	0	0
JAMES H LASH	0 0									
DIRECTOR	0 0	х						0	0	0
CONSTANCE H LAU	1 0									
DIRECTOR	0 0	X						0	0	0
STEPHEN J LENNON	1 0	<u> </u>								
DIRECTOR THROUGH MARCH 2015	0 0	X						0	0	0
JEFFREY J LYASH	1 0	х						0	0	0
DIRECTOR	0 0	_ ^						Ů	0	
ELLIOTT MAINZER	1 0	l x						0	0	0
DIRECTOR	0.0									
MARK C MCCULLOUGH	1 0	x						0	0	0
DIRECTOR	0 0									
TOM MITCHELL DIRECTOR THROUGH AUG 2015	······	x						0	0	0
CHARLES G PARDEE	0 0									
DIRECTOR	0 0	х						0	0	0
TERRY OLIVER	1 0									
DIRECTOR THROUGH JAN 2015	0 0	X						0	0	0
BERNARD SALHA	1 0	, , ,								
DIRECTOR	0 0	Х						0	0	0
WILLIAM H SPENCE	1 0	x						0	0	0
DIRECTOR	0 0									
B KEITH TRENT	1 0	x						0	0	0
DIRECTOR THROUGH JULY 2015	0 0									
ENRICO VIALE		х						0	0	0
DAVID G VICTOR	0 0									
DIRECTOR		х						6,500	0	0
MICHAEL W HOWARD	0 0 40 0									
PRESIDENT AND CEO	0 0			Х				1,490,952	0	529,289
HENRY A COURTRIGHT	40 0									
SVP GLOBAL STRAT AND EXT RELAT	0 0			X				600,230	0	228,900
ARSHAD MANSOOR	40 0			V				604 190	0	241 262
SVP RESEARCH AND DEVELOPMENT	0 0			Х				694,180	0	241,263
PAMELA J KEEFE	40 0			Х				504,145	0	193,222
SVP CFO AND TREASURER	0 0									
ANDA RAY	40 0			х				456,194	0	134,479
SVP ENERGY ENVIRON & EXT RELAT	0 0									
CHARLES T ALLEY JR	·			х				428,748	0	134,735
VP GENERATION	0 0						<u> </u>	l		<u> </u>

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

Compensated Employees, and Inde						, -	,	<b>,,,,</b>		
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th person and a	ion (d nan o n is b dired	ne booth a	ox, u an of trus	nless ficer tee)		( <b>D)</b> 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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke, emplojee	Highest compensated employee	Former			related organizations
SALVADOR A CASENTE JR VP GEN COUNSEL AND SECRETARY	40 0			х				444,784	0	120,056
ROBERT N CHAPMAN  VP MEMBER AND TECHNICAL SVCS	40 0			х				435,708	0	151,446
ROBIN E MANNING  VP TRANSMISSION	40 0			х				275,725	0	113,673
MARK MCGRANAGHAN	40 0			х				458,702	0	150,644
CAROLYN R SHOCKLEY	40 0			x				487,863	0	163,230
VP PEOPLE AND PERFORMANCE  NEIL M WILMSHURST	40 0			x				521,985	0	157,469
VP NUCLEAR & CHIEF NUC OFFICER  JANIS G MENDELSON	0 0 40 0									
ASSISTANT CORP SECRETARY ROSA L YANG	0 0			Х				127,974	0	21,521
SENIOR TECHNICAL EXECUTIVE	0 0					х		347,493	0	58,539
CLARK GELLINGS  EPRI FELLOW	40 0					x		322,576	0	35,696
ANDREW PHILLIPS DIRECTOR RESEARCH & DEVELOP	40 0					х		318,176	0	55,898
KURT W EDSINGER DIRECTOR RESEARCH & DEVELOP	40 0					х		310,855	0	57,940
TUAN M NGUYEN DIRECTOR OPERATION EXCELLENCE	40 0					х		307,057	0	32,631

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OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

		ne organization					Employer identifica	ition number
Electr	c Power	r Research Institute Inc					23-7175375	
Pa	rt I	Reason for Publi	c Charity S	<b>itatus</b> (All organiza	tions must co	mplete this p		ns.
		zation is not a private fo					•	
1	Ĭ.	A church, convention						
2	Ė	A school described in	-			=		
3	Ė	A hospital or a cooper	-		•		* *	
4	Ė	A medical research or						). Enter the
-	,	hospital's name, city,			a moopital a			
5	Γ	=		nefit of a college or un	iversity owned	or operated by	a governmental unit d	escribed in <b>section</b>
_	_	170(b)(1)(A)(iv). (C			4	t: 470/b\/d	\/A\/\	
6	<u> </u>	A federal, state, or loc	<del>-</del>	<del>-</del>				
7	ı	An organization that n described in <b>section 1</b>				om a governme	ntal unit or from the g	eneral public
8	Г	A community trust de				tII)		
9	<u></u>			ves (1) more than 33			butions, membership	fees, and gross
		receipts from activitie	es related to it	s exempt functions—s	ubject to certa	in exceptions, a	and (2) no more than 3	331/3% of its support
				unrelated business ta:			1 tax) from businesse	s acquired by the
10	г	An organization after Jun		ee <b>section 509(a)(2).</b>			509(a)(4)	
11	,	An organization organ	•	·	•	•		ut the nurnoses of
	,	one or more publicly s						
	_	the box in lines 11a th						
а		Type I. A supporting of						
		supported organization organization You mus			-	ty of the directi	ors or trustees of the	supporting
ь	Г	Type II. A supporting	=	•		with its suppo	rted organization(s), b	y having control or
	•	management of the su	-	•				
	_	must complete Part I						
С	1	Type III functionally is supported organization						grated with, its
d	Г	Type III non-function						anızatıon(s) that ıs
		not functionally integr	ated The orga	inization generally mu	st satisfy a dist	rıbutıon require		
	_	(see instructions) Yo						
е	ı	Check this box if the contegrated, or Type II.					s a Type I, Type II, T	ype III functionally
f	Enter	r the number of support						
g		Provide the following i						
_		-						
		(i)	(ii)EIN	(iii)	(iv)		(v)	(vi)
Nar	ne of s	upported organization		Type of	Is the orga		A mount of	A mount of other
				organization	listed in your docume		monetary support	support (see
				(described on lines 1-9 above (see	docume	entr	(see instructions)	instructions)
				instructions))				
					Yes	No		
Tota	I							

Pa	Support Schedule for (Complete only if you Part III. If the organize	checked the bo	x on line 5, 7,	or 8 of Part I o	or if the organiz	ation failed to d	jualify under
Se	ection A. Public Support	•	•		, <u>, , , , , , , , , , , , , , , , , , </u>		
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	( <b>d)</b> 2014	<b>(e)</b> 2015	( <b>f)</b> Total
•	fiscal year beginning in) F Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	(4,72022	(-)	(9,2323	(=,===	(0)2020	(i)
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge <b>Total.</b> Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 ection B. Total Support						
	Calendar year						
(or	fiscal year beginning in)	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
7	A mounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	<b>Total support.</b> Add lines 7 through 10						
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is check this box and stop here	<u> </u>	<u> </u>				
14	ection C. Computation of Pul Public support percentage for 2019			11 column (f))		14	
15	Public support percentage for 201			: 11, Column (1))		14	
	33 1/3% support test—2015.If the	-	•	v on line 12 and	lino 14 is 22 1/20	15	this box
	and <b>stop here.</b> The organization qui <b>33 1/3% support test—2014.</b> If the box and <b>stop here.</b> The organizatio	alıfıes as a publıc organızatıon dıd	ly supported organic not check a box	anızatıon on lıne 13 or 16a			<b>►</b> □
17a	10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me	— <b>2015.</b> If the organization meets the fa	anization did not o	check a box on lir tances test, chec	ck this box and <b>st</b>	op here. Explain	orted ▶□
b	organization  10%-facts-and-circumstances test  15 is 10% or more, and if the orga Explain in Part VI how the organiza supported organization	nızatıon meets th	e "facts-and-circ	umstances" test	c, check this box a	nd <b>stop here.</b>	
18	Private foundation. If the organizations	ion did not check	a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and see	<b>-</b> '

## Part III Support Schedule for Organizations Described in Section 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 organizati	ion fails to quali	fy under the tes	sts listed below	, please comple	ete Part II.)		
Se	ction A. Public Support Calendar year	<u> </u>					$\overline{}$	
(or f	fiscal year beginning in) 🟲	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015		<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	0	0	0	0		0	0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	360,794,350	379,265,089	376,748,690	383,281,829	400,914	,147	1,901,004,105
3	Gross receipts from activities that are not an unrelated trade or business under section 513							0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0
6	Total. Add lines 1 through 5	360,794,350	379,265,089	376,748,690	383,281,829	400,914	,147	1,901,004,105
	Amounts included on lines 1, 2, and 3 received from disqualified persons							0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	121,175,441	111,578,750	124,546,693	113,035,690	123,038	,890	593,375,464
c	Add lines 7a and 7b	121,175,441	111,578,750	124,546,693	113,035,690	123,038	,890	593,375,464
8	<b>Public support.</b> (Subtract line 7 c							1,307,628,641
	from line 6 )							1,507,020,041
56	ection B. Total Support	Т					—	
(or f	Calendar year fiscal year beginning in) 🟲	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> 2015		<b>(f)</b> Total
	Amounts from line 6	360,794,350	379,265,089	376,748,690	383,281,829	400,914	,147	1,901,004,105
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,520,706	4,425,618	4,548,482	4,054,284	4,554	,780	23,103,870
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							0
С	Add lines 10a and 10b	5,520,706	4,425,618	4,548,482	4,054,284	4,554	780	23,103,870
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	2,002,177	1,716,193	924,694	1,439,473	1,823	,326	7,905,863
13	Total support. (Add lines 9,	368,317,233	385,406,900	382,221,866	388,775,586	407,292	,253	1,932,013,838
14	10c, 11, and 12)  First five years.If the Form 990 is check this box and stop here		, ,					
	ection C. Computation of Pu							
15	Public support percentage for 20			e 13, column (f))		15		67 682 %
16	Public support percentage from 2		<u> </u>			16		66 739 %
	ection D. Computation of In							
17	Investment income percentage for				nn (f))	17		1 196 %
18	Investment income percentage fr					18		2 206 %
102	22 1 / 20/2 cumport toota 201E If t	na arganization di	a not chock the he	wan lina 14 and	ling I E ic more t	nan 22 1/20/-		una 17 ic nat

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization 33 1/3% support tests—2014. 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

<sup>18</sup> 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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked

Section A. All Supporting Organizations			
I, complete Sections A and D, and complete	te Part V )		
11b of Part I, complete Sections A and C	If you checked 11c of Part I, com	iplete Sections A , D , and E If y	ou checked 11d of Par

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)?  If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below.	За		ı
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$ , $(5)$ , or $(6)$ and satisfied the public support tests under section $509(a)(2)$ ?  If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?  If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
<b>4</b> a	Was any supported organization not organized in the United States ("foreign supported organization")?  If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		ı
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?  If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised	4b		
c	by or in connection with its supported organizations.  Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)$ ?  If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	<b>4</b> c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		ı
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
C	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		l
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		_ <del></del>

Pai	Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?  If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?  If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b	The organization is the parent of each of its supported organizations Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
Ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in?  If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ŀ	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
<b>i</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	rganızatıon (see

Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	· · · · · · · · · · · · · · · · · · ·
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp	pt purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval re	quired)		
6 Other distributions (describe in Part VI) See instru	uctions		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
<b>d</b> From 2013			
e From 2014			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
<ul> <li>Carryover from 2010 not applied (see instructions)</li> </ul>			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (If amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
<b>c</b> Excess from 2013			
<b>d</b> From 2014			
<b>e</b> From 2015			

#### Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

#### Facts And Circumstances Test

Return Reference	Explanation
SUPPORT SCHEDULE FOR ORGANIZATIONS DESCRIBED IN SECTION 509(A)(2)	SCHEDULE A, PART III EPRI REPORTS ITS MEMBERSHIP DUES AS GROSS RECEIPTS FROM SERVICES PERFORMED THESE PAYMENTS ARE MADE IN CONNNECTION WITH THE PERFORMANCE OF TAX EXEMPT SCIENTIFIC RESEARCH IN THE PUBLIC INTEREST, WHICH BY DEFINITION ALSO INCIDENTALLY BENEFITS EPRI MEMBERS WHO MAY IN CERTAIN CIRCUMSTANCES HAVE A DIRECT AND IMMEDIATE BENEFIT FROM SUCH RESEARCH THE RESEARCH RESULTS MAY ALSO, IN CERTAIN CIRCUMSTANCES, HAVE A MORE DIRECT BENEFIT TO THE EPRI MEMBERS THAN TO THE GENERAL PUBLIC CONTEMPLATED WITHIN TREASURY REGULATION SECTION 1 509(A)-3(G)(2)
OTHER INCOME DESCRIPTION	SCHEDULE A, PART III, LINE 12 OTHER INCOME INCLUDES INCOME FROM PREVIOUSLY PUBLISHED SCIENTIFIC RESEARCH REPORTS AND SOFTWARE AVAILABLE FOR SALE TO THE GENERAL PUBLIC AND INCOME FROM RELATED SCIENTIFIC RESEARCH ACTIVITIES CONDUCTED BY EPRI IN THE PUBLIC INTEREST

Schedule A (Form 990 or 990-EZ) 2015

Political Campaign and Lobbying Activities

DLN: 93493222008846

OMB No 1545-0047

**Inspection** 

## 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. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

If the organization answered "Yes" on 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" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Electric Power Research Institute Inc 23-7175375 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 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 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes Was a correction made? 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 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 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? 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 filing organization's contributions received funds If none, enter -0and promptly and directly delivered to a separate political organization If none, enter-0-

remedate e (i	01111330 01330 122/2010		ı ağı
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form	5768	(election
	under section 501(h)).		

Check	₽F	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

		ying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals			
1a	Total lobbying expenditures to influence public lobbying)	opinion (grass roots					
b	Total lobbying expenditures to influence a legis	36,275					
С	Total lobbying expenditures (add lines 1a and 3	1b)	36,275				
d	Other exempt purpose expenditures		383,782,666				
e	Total exempt purpose expenditures (add lines	1c and 1d)	383,818,941				
f	Lobbying nontaxable amount Enter the amount	from the following table in both columns	1,000,000				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:					
	Not over \$500,000	20% of the amount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000					
	Over \$17,000,000	\$1,000,000					
g	Grassroots nontaxable amount (enter 25% of I	ine 1f)	250,000				
h	Subtract line 1g from line 1a If zero or less, en	ter - 0 -					
i	Subtract line 1f from line 1c If zero or less, en	ter -0 -					
	If there is an amount other than zero on either line 1h or line 1, did the organization file Form 4720						

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?

⊢ Y	e s	▼ No
-----	-----	------

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

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	(e) Total	
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000	
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000	
c	Total lobbying expenditures	1,047	5,312	21,608	36,275	64,242	
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000	
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000	
f	Grassroots lobbying expenditures						

Return Reference

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ОТ				ige <b>S</b>
<i></i>	1	(	a)		(b)	
ror e activ	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	A	moun	t
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	Tes				
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section $501(c)(4)$ , section $501(c)(6)$ .	01(c	)(5), o	r se	ctio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible 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				
С	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				
Pa	art IV Supplemental Information					

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

DLN: 93493222008846

OMB No 1545-0047

Open to Public

## SCHEDULE D

(Form 990)

Department of the Treasury

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** Electric Power Research Institute Inc 23-7175375 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of 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 can 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" on Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) 
Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 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, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, handling of violations, and enforcing conservation easements during the vear Amount of expenses incurred in monitoring, inspecting, handling of violations, 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)

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.

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and

Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

- If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on 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 (ASC 958) relating to these items
- Revenue included on Form 990, Part VIII, line 1

(B)( $_{\rm I}$ ) and section 170(h)(4)(B)( $_{\rm II}$ )?

Assets included in Form 990, Part X

Cat No 52283D Schedule D (Form 990) 2015

Part	Organization (continued)	ns Maintaining	Collections of Ar	t, His	storic	al Tr	easures,	or Ot	her Similar As	sets
3	Using the organization collection items (chec		ession, and other reco	rds, cl						ofits
а	Public exhibition			d		Loan o	rexchange	progra	ms	
b	Scholarly research	า		e	Γ	Other				
c	Preservation for fu	iture generations								
4	Provide a description of Part XIII	_	s collections and expla	aın hov	w they	further	the organiz	atıon's	exempt purpose	n
5	During the year, did th assets to be sold to ra									┌ No
Par	t IV Escrow and	<b>Custodial Arra</b> ne organization a		-						on Form 990
La	Is the organization an included on Form 990,		todian or other interm	ediary	forco	ntribut	ions or othe	rasse	ts not <b>Yes</b>	┌ No
b	If "Yes," explain the	arrangement in Pa	art XIII and complete	the fol	llowing	table			Amo	ount
c	Beginning balance							1c		
d	Additions during the	year						1d		
e	Distributions during	•						1e		
f	Ending balance							1f		
2a	Did the organization in	clude an amount o	n Form 990, Part X, Iır	ne 21,	for es	crow or	custodial a	ccount	liability? <b>Yes</b>	┌ No
	If "Yes," explain the a									Г
Par	t V Endowment	Funds. Comple	te if the organizatio							
	D 6 1 1		(a)Current year	( <b>b)</b> Pr	nor year	·   b	(c)Two years	back (	d)Three years back	(e)Four years bac
.a	Beginning of year bala	nce								
b	Contributions									
c	Net investment earnin losses	gs, gains, and								
d	Grants or scholarship	5								
е	Other expenditures fo and programs	r facilities • •								
f	Administrative expens	ses								
g	End of year balance									
2	Provide the estimated	percentage of the	current year end balan	ice (lir	ne 1g,	column	(a)) held as		•	
а	Board designated or qu	uası-endowment ►								
ь	Permanent endowment									
c	Temporarily restricted The percentages on lir		should equal 100%							
3a	Are there endowment forganization by	unds not in the pos	session of the organiz	zatıon	that a	re held	and adminis	stered		Yes No
	(i) unrelated organizat			•					3a(	<del></del>
<b>L</b>	(ii) related organizatio								3a(	<del>-                                    </del>
b 1	If "Yes" on 3a(II), are to Describe in Part XIII to	_							31	<u> </u>
		ngs, and Equip		.40 9911	. C.IIC IUI					
			inswered 'Yes' to Fo	<u>orm</u> 9	90, P	art IV,	line 11a.9	See Fo	orm 990, Part X,	line 10.
		n of property		Со	(a)	) ner basıs	(b)	er basıs	Accumulated (c) depreciation	(d)Book value
la L	_and						2,2	293,299		2,293,29
b E	Buildings							183,152		
c L	_easehold improvement	s						828,125		
d E	quipment						28,4	473,189	20,806,430	7,666,7
	Other							114,567		

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

56,195,097

See Form 990, Part X, line 12.	plete if the organi	zation answered 'Yes'	on Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)		<b>(b)</b> Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests			
(3)O ther		100.063.355	_
(A) LONG TERM INVESTMENTS		100,062,355	F
(B) INVESTMENT IN SUBSIDIARIES		1,769,410	F
(C) INVESTMENT IN OTHER COMPANIES		1,138	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>P</b>	101,832,903	
Part VIII Investments—Program Related.  Complete if the organization answered 'Y	res' on Form 990,	Part IV, line 11c. See	Form 990 Part X line 13
(a) Description of investment		(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. Complete if the organization is	answered 'Yes' on F	orm 990 Part IV line 1	Id See Form 990 Part X June 15
(a) Description			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.			
Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25.	ization answered	'Yes' on Form 990, Pa	art IV, line 11e or 11f.
1. (a) Description of liability	(b) Book value		
Federal income taxes		0	
ACCRUED POST RETIREMENT BENEFITS	10,003,1	23	
OTHER LONG-TERM LIABILITIES	2,424,5	70	
INTERCO PAYABLE WITH RELATED PARTY	1,791,5	52	
		$\dashv$	
		_	
		_	
	-		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	14,219,2	4 5	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities	
C	Recoveries of prior year grants	
d	Other (Describe in Part XIII)............. <mark>2d</mark>	
e	Add lines <b>2a</b> through <b>2d</b>	2e
3	Subtract line <b>2e</b> from line <b>1</b>	3
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIII )	
C	Add lines <b>4a</b> and <b>4b</b>	4c
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5
Part		s per Return.
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
		T .
1	Total expenses and losses per audited financial statements	1
1 2	Total expenses and losses per audited financial statements	1
_	Total expenses and losses per audited financial statements	1
2	Total expenses and losses per audited financial statements	1
2 a	Total expenses and losses per audited financial statements	1
2 a b	Total expenses and losses per audited financial statements	1
2 a b c	Total expenses and losses per audited financial statements	2e
2 a b c d	Total expenses and losses per audited financial statements	
2 a b c d	Total expenses and losses per audited financial statements	2e
2 a b c d e	Total expenses and losses per audited financial statements	2e
2 a b c d e 3	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities	2e
2 a b c d e 3 4 a	Total expenses and losses per audited financial statements	2e
2 a b c d e 3 4 a b	Total expenses and losses per audited financial statements	2e 3

## Part XIII Supplemental Information

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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
FIN 48 (ASC 740) FOOTNOTE	SCHEDULE D, PART X, LINE 2 EPRI ADOPTED FIN 48 (CODIFIED AS ASC 740) IN 2009 THE ADOPTION IN 2009 DID NOT HAVE A MATERIAL IMPACT ON THE EPRI FINANCIAL STATEMENTS THERE WAS NO CHANGE IN 2014 OR 2015 AS A RESULT, THE FINANCIAL STATEMENTS DO NOT HAVE A FIN 48 LIABILITY RECORDED AND A FOOTNOTE FOR FIN 48 WAS NOT REQUIRED

Part XIII Supplemental Info	ormation (continued)						
Return Reference	Explanation						

Schedule D (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493222008846

SCHEDULE F (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

## **Statement of Activities Outside the United States**

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

► Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

**Employer identification number** 

Electric Power Research Institute Inc				23-7175375						
Part I General Informatio Complete if the organ				14b.						
1 For grantmakers. Does the of and other assistance, the grants or a used to award the grants or a	antees' eligibil	ity for the gra	nts or assistance, and	the selection criteria	✓ Yes					
<b>For grantmakers.</b> Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.										
3 Activites per Region (The follow	ving Part I, line 3	3 table can be d	uplicated if additional sp	ace is needed )						
(a) Region	<b>(b)</b> Number of offices in the region			(e) If activity listed in (d) is a program service, describe specific type of service(s) in region						
(1) See Add'l Data			,							
( 2)										
(3)										
(4)										
(5)										
3a Sub-total b Total from continuation sheets to Part I					73,447,970					
c Totals (add lines 3a and 3b)					73,447,970					

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		Europe (Including Iceland and Greenland)	CONTRIBUTION	16,900	electronic			
( 2)								
(3)								
(4)								

Schedule F (Form 990) 2015

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.									
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	( <b>f</b> ) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
(1)					,				
(2)		+ + +			1		<u>'</u>		
(3)		1	·		'		1		
(4)		+ +	·		†		<del>                                     </del>		
(5)		+ +	 I		†		<del>                                     </del>		
(6)		+ +	 I		†		<del>                                     </del>		
(7)		+ + +			†		<u> </u>		
(8)		+ + +			†		<u>'</u>		
(9)		+ +					<u> </u>		
(10)		+	·		<u> </u>		<u> </u>		
(11)		+			1		<u> </u>		
( 12)		+ + +					<u> </u>		
( 13)		+	·		<u>'</u>		<u> </u>		
( 14)		+ + +			1				
( 15)		+ + +			1				
( 16)		1			1				
( 17)					1				
( 18)					1				
		<del></del>							

## Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	ত	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>~</u>	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	IZ.	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Yes	<u>~</u>	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Γ	Yes	দ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	~	Yes	Г	No

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 Page **5** 

#### Part V

#### **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

### 990 Schedule F, Supplemental Information

Return Reference	Explanation
PROCEDURE FOR MONITORING USE OF GRANT FUNDS OUTSIDE OF THE UNITED STATES	SCHEDULE F, PART I, LINE 2 EPRI occasionally makes grants to other institutions when doin g so is consistent with and furthers EPRIs charitable purpose. Grants are made only to ent ities which are well known to EPRI and after appropriate due diligence. The permitted uses of the granted funds are enumerated to the grantee and EPRI typically receives reports, technical papers, conference and similar materials demonstrating the appropriate use of the granted funds.

## **Additional Data**

Software ID: Software Version:

**EIN:** 23-7175375

Name: Electric Power Research Institute Inc

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)		(f) Total expenditures for region
Central America and the Caribbean			Program Services	R&D Project	3,812
East Asia and the Pacific			Program Services	R&D Project	3,145,224
Europe (Including Iceland and Greenland)			Program Services	R&D Project	17,259,637

<u>Form 990 Schedule F P</u>	<u> art I - Activit</u>	<u>ies Outside Th</u>	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa			Program Services	R&D Project	10,622
North America			Program Services	R&D Project	4,556,362
Russia and the Newly Independent States			Program Services	R&D Project	555

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America			Program Services	R&D Project	51,651
South Asia			Program Services	R&D Project	6,434
Sub-Saharan Africa			Program Services	R&D Project	122,175

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside Tl</u>	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Unrelated Trade or Business		260,913
Europe (Including Iceland and Greenland)			Unrelated Trade or Business		821,374
North America			Unrelated Trade or Business		3,675

Form 990 Schedule F	<u> Part I - Activit</u>	ies Outside Tl	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Grantmakıng		16,900
East Asia and the Pacific			Investments		8,219,176
Europe (Including Iceland and Greenland)			Investments		33,186,178

Form 990 Schedule F I	Part I - Activit	<u>ties Outside Tl</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Investments		5,783,282

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DLN: 93493222008846 OMB No 1545-0047

Open to Public Inspection

23-7175375

# **Grants and Other Assistance to Organizations.** Governments and Individuals in the United States

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

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

(Form 990)

Employer identification number Name of the organization Electric Power Research Institute Inc.

Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non-(f) Method of (q) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance arant cash (book, FMV, or government assistance appraisal, other) See Additional Data Table

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

Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . . Cat No 50055P

Schedule I (Form 990) 2015

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
PARTICIPATION AT AIR POLLUTION (1) EPIDEMIOLOGY mtg	3	4,000			
PARTICIPATION AT ENV-VISION (2) CONFERENCE	1	1,000			
(3) SPEAKER AT NATURAL GAS MEETING	1	5,000			
PARTICIPATION ON ADVISORY (4) COUNCIL	14	34,500			
Doub TV Complemental Informat	i Duarrida blas rafar		aut I luas 2 Daut III		

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PROCEDURE FOR	SCHEDULE I, PART I, LINE 2 EPRI occasionally makes grants to other institutions when doing so is consistent with and furthers EPRIs charitable
MONITORING USE OF GRANT	purpose Grants are made only to entities that are well known to EPRI and after appropriate due diligence. The permitted uses of the granted funds are
FUNDS IN THE UNITED STATES	enumerated to the grantee and EPRI typically receives reports, technical papers, conference and similar materials demonstrating the appropriate use of
	the granted funds

Schedule I (Form 990) 2015

## **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 23-7175375

Name: Electric Power Research Institute Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	(d) Amount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)	(h) Purpose of grant or assistance
ARIZONA STATE UNIVERSITY 577 ENGINEERING Rsrch Ctr TEMPE,AZ 85287	86-0196696	115	158,730			CONTRIBUTION
CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE PITTSBURGH,PA 15213	25-0969449	501(c)(3)	210,000			CONTRIBUTION
GORDON RESEARCH CONFERENCES 512 LIBERTY LANE WEST KINGSTON,RI 02892	26-0150662	501(c)(3)	7,500			CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> A mount of cash grant	1 3 5	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MRIGLOBAL 425 VOLKER BLVD KANSAS CITY,MO 64110	26-1939342	501(c)(3)	50,000				CONTRIBUTION			
LITTLE BROTHERS FRIENDS OF THE ELDERLY 909 HYDE STREET SAN FRANCISCO,CA 94109	94-3143730	501(c)(3)	6,500				CONTRIBUTION			
STANFORD UNIVERSITY 326 GALVEZ STREET STANFORD,CA 94305	94-1156365	501(c)(3)	125,000				CONTRIBUTION			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
TEXAS A&M UNVERSITY 201 MECHANICAL ENGINEEING OFFICE COLLEGE STATION, TX 77843	74-1974733	501(c)(3)	12,000				CONTRIBUTION		
THE BIOELECTROMAGNETICS SOCIETY 11 N WASHINGTON ST 600 ROCKVILLE, MD 20850	51-0229774	501(c)(3)	15,000				CONTRIBUTION		
THE UNIV OF NORTH CAROLINA AT CHARLOTTE 9201 UNIV CITY BLVD CHARLOTTE,NC 28223	56-6001393	115	125,833				CONTRIBUTION		

Form 990,Schedule I, Par	Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	* *	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance	
THE UNIVERSITY OF TEXAS AT AUSTIN 1 UNIVERSITY STATION AUSTIN,TX 78712	74-6000203	115	80,000				CONTRIBUTION	
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION 109 KINKEAD HALL LEXINGTON, KY 40506	61-6033693	501(c)(3)	200,000				CONTRIBUTION	
UNIVERSITY OF MICHIGAN 2355 BONISTEEL BLVD ANN ARBOR,MI 48109	38-6006309	115	15,000				CONTRIBUTION	

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	I	(f) Method of valuation (book, FMV, appraisal, other)	1	(h) Purpose of grant or assistance
UNIVERSITY OF PITTSBURGH 123 UNIVERSITY PLACE PITTSBURGH,PA 15213	25-0965591	501(c)(3)	40,346				CONTRIBUTION
UNIVERSITY OF TENNESSEE KNOXVILLE 1534 WHITE AVENUE KNOXVILLE,TN 37996	62-6001636	115	67,500				CONTRIBUTION
CPS ENERGY 17281 GREEN MOUNTAIN RD SAN ANTONIO,TX 78247	74-6002071			72,438	FMV	TWO LIGHT DUTY PHEV	CONTRIBUTION

DLN: 93493222008846

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" on Form 990, Part IV, line 23. ► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Internal Revenue Service Name of the organization

Electric Power Research Institute Inc

**Employer identification number** 

		[23-/1/53/5			
Pa	rt I	Questions Regarding Compensation			
				Yes	No
.a		eck the appropiate box(es) if the organization provided any of the following to or for a person listed on Form O, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	굣	First-class or charter travel			
	$\sqcap$	Travel for companions Payments for business use of personal residence			
	Γ	Tax idemnification and gross-up payments			
	Γ	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b		ny of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or nbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2		the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	aire	ectors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	orga	licate which, if any, of the following the filing organization used to establish the compensation of the anization's CEO/Executive Director Check all that apply Do not check any boxes for methods by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	<u></u>	Compensation committee Written employment contract			
	굣	Independent compensation consultant 🔽 Compensation survey or study			
	<u>                                      </u>	Form 990 of other organizations			
ı		ring the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization a related organization			
а	Rec	ceive a severance payment or change-of-control payment?	4a		No
b	Par	ticipate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Par	ticipate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If"	Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Onl	y 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
•		persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any npensation contingent on the revenues of			
а	The	e organization?	5a		Νo
b	Any	y related organization?	5b		Νo
	If"	Yes," on line 5a or 5b, describe in Part III			
•		persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any npensation contingent on the net earnings of			
а	The	e organization?	6a		No
b	Any	y related organization?	6b		No
	If"	Yes," on line 6a or 6b, describe in Part III			
,		persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed ments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
3		re any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was			
		oject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe	_		N -
		Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	8		No
,	1.1	restrontone o toro trie otroanización also ronow trie reportable presumblion blocentre describen in Kentilations			

section 53 4958-6(c)?

## Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in column(B) reported as deferred on prior Form 990	
	Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)		
See Additional Data Table								

Schedule J (Form 990) 2015

DEFERRED COMPENSATION

### Part III Supplemental Information

Provide the information, explanation, o	or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Return Reference	Explanation
FIRST-CLASS TRAVEL	SCHEDULE J, PART I, LINE 1A EPRIS CEO and Senior Vice Presidents are required to travel frequently and often for extended periods away from home To lessen the burden and increase productivity, first class travel is allowed and pre-approved for EPRIS CEO and Senior Vice Presidents during periods when the individual is subjected to a heavy travel schedule and extended flight duration
PERSONAL SERVICES	SCHEDULE J, PART I, LINE 1A EPRI makes available to its key officers a financial planning benefit through an outside vendor, which each officer may determine to accept or decline. Officers selecting the service may also use the planner for tax preparation advice. The benefit is treated as taxable income to the officer. The following officers accepted a voluntary financial planning benefit offered by EPRI, which in 2015 resulted in taxable income to the officers. Michael W. Howard \$12,785 Henry A. Courtright \$12,785 Arshad Mansoor \$12,785 Pamela J. Keefe \$12,785 Anda Ray \$12,785 Charles. T. Alley, Jr. \$12,785 Salvador A. Casente, Jr. \$12,785 Robert N. Chapman \$12,785 Robin E. Manning \$12,295 Carolyn R. Shockley \$12,785
SEVERANCE ARRANGEMENTS	SCHEDULE J, PART I, LINE 4A The Institute has established severance plans for its regular employees, including officers Employees have no pre-existing vested or accrued rights to a severance benefit under these plans, and the plans may be changed at the discretion of the Institute Severance benefits in each plan are contingent upon qualifying employee terminations and other conditions as required in the particular plan Generally, the amount of any severance benefit is dependent upon the position held by the employee and length of service up to forty-two weeks of salary and two months of health benefit continuation in the officer plan In connection with the long term incentive program, officers (as determined by the board or a board committee) may be entitled to a payment upon qualifying terminations, as required in the program
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	SCHEDULE J, PART I, LINE 4B EPRI provides a retirement contribution for its employees based on their compensation. This retirement contribution is usually in the form of an employer contribution to its retirement plans. However, if the calculated retirement contribution exceeds the retirement plan employer contribution limit for the year, the amount of the retirement contribution in excess of the limit is reported on the employees Form W-2 as taxable income as required and reported on Schedule J, Part II, Column (B)(III) as follows. Michael W. Howard \$65,224 Henry A. Courtright \$3,803 Arshad Mansoor \$13,325 Neil M. Wilmshurst \$594
NON-FIXED PAYMENTS	SCHEDULE J, PART I, LINE 7 Officers, as well as employees, are eligible for incentive awards based on EPRIs results against corporate goals and each individuals performance and contribution toward achieving those goals. Incentive awards are strongly tied to both corporate and individual performance. Incentive awards are determined based as a percentage of base salary and are considered in the determination by EPRI of a total reasonable compensation package. The Compensation and Leadership Development Committee of the Board of Directors approves incentive payments for all officers at the level of Vice President or above, with the exception of the incentive payment for the Chief Executive Officer which is approved by the Executive Committee of the Board.

or vested) at December 31, 2015 in connection with the organizations long term incentive program

SCHEDULE J, PART II, COLUMN (C) For certain officers of the organization, deferred compensation includes amounts earned or accrued (but not funded

# Software ID: Software Version:

**EIN:** 23-7175375

Name: Electric Power Research Institute Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation (A) Name and Title (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(ı)-(D) column (B) (iii) (ii) (i) compensation reported as deferred Base Bonus & Other on prior Form 990 Compensation incentive reportable compensation compensation 1MICHAEL W HOWARD 586,715 (1) 823,400 80,837 507,627 21,662 2,020,241 321,200 PRESIDENT AND CEO (11) n 1HENRY A COURTRIGHT 309,036 (1) 24,794 207,243 21,657 829,130 101,400 266.400 SVP GLOBAL STRAT AND EXT RELAT (II) n 2ARSHAD MANSOOR (1) 362,082 305,400 26,698 212,876 28,387 935,443 98,400 SVP RESEARCH AND DEVELOPMENT (11) 3PAMELA J KEEFE 279,481 (1)204,000 20,664 169,723 23,499 697,367 60,900 SVP CFO AND TREASURER (II) 4ANDA RAY SVP ENERGY ENVIRON & EXT (1) 279,125 161,900 15,169 134,449 30 590,673 29,700 (11) 0 **5**CHARLES T ALLEY JR VP GENERATION (1) 252,387 162,500 13,861 122,636 12,099 563,483 62,500 (11) 0 **6**SALVADOR A CASENTE JR VP GEN COUNSEL AND 254,433 (1) 58,500 175,800 14,551 120,026 30 564,840 **SECRETARY** (11) 7ROBERT N CHAPMAN 242,127 (1) 179,700 13,881 121,563 29,883 587,154 60,200 VP MEMBER AND TECHNICAL (II) 8ROBIN E MANNING (1) 262,055 0 13,670 94,319 19,354 389,398 O (11) 0 9MARK MCGRANAGHAN 256,991 (1) 1,711 63,000 200,000 128,782 21,862 609,346 VP DISTRIB AND ENERGY UTIL 0 10CAROLYN R SHOCKLEY 273,380 (1) 651,093 67,400 200,500 13,983 135,343 27,887 VP PEOPLE AND PERFORMANCE 11NEIL M WILMSHURST 297,315 (1) 222,300 2,370 142,757 14,712 679,454 69,300 VP NUCLEAR & CHIEF NUC OFFICER (11) 12ROSA L YANG (1) 230,523 114,063 2,907 35,459 23,080 406,032 SENIOR TECHNICAL EXECUTIVE (11) 13CLARK GELLINGS 207,217 (1) 90,000 25,359 23,857 11,839 358,272 **EPRI FELLOW** (11) 14ANDREW PHILLIPS DIRECTOR RESEARCH & (1) 232,460 337 374,074 85,379 32,161 23,737 DEVELOP (II)15KURT W FDSINGER (1) 226,351 84,174 330 31,707 26,233 368,795 **DIRECTOR RESEARCH &** DEVELOP (11) 16TUAN M NGUYEN 226,833 (1) 30,751 78,944 1,280 1,880 339,688 DIRECTOR OPERATION **EXCELLENCE** 

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DLN: 93493222008846

OMB No 1545-0047

2015

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# Department of the Treasury

Schedule L (Form 990 or 990-EZ)

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

**Transactions with Interested Persons** 

ternal Revenue Service											specu	UII
Name of the org							En	nploye	er identif	ication	numbei	r
Electric Power Rese	arch Institute I	Inc					, ;	3-717	5375			
Part I Exce	ss Benefi	t Transactio	ns (sect	uon 501(c)(3)	section 501(c)	(4) and 501(				only)		
					D, Part IV, line 2						40b	
	e of disquali				etween disquali				cription		(d) Corr	rected?
_ ,,	•	•	``	·	organization	·			saction		Yes	No
			<b>.</b>									
2 F=t==th==					d 1.6 d							
					disqualified pers			unaer:	section \$\delta \text{\$\delta} \te			
					the organizatio			•	r γ . <b>Þ</b> r dr			
5 Linter the ai	inount or tax	, ii airy, oii iirie	z, above,	Tellibursed by	the organization	,,,,		•	<b>-</b> → .			
Part III Loa	ans to and	d/or From I	nterest	ed Persons								
Con	nplete if the	organization ar	nswered "Y	es" on Form 9	90-EZ, Part V,	line 38a, or F	orm 99	0, Par	rt IV, lın	e 26, o	r ıf the	
orga	anızatıon rep	orted an amou	nt on Form	n 990, Part X, I	line 5, 6, or 22							
(-) N 6	(I-) Dalation	-1 (-3	(4)		(-)0 ··· ··· - 1	(6) D - I	1 (-)	T	1 (1.)		C:N//	
(a) Name of interested	(b) Relation with	ship (c) Purpose o	( <b>d)</b> Lo		(e)O riginal principal	( <b>f)</b> Balance due				(h) (i)Writ		
person	organizati		organiz		amount	duc	""	uic.	by boa		agreement?	
	_							committee?		tee?		
			То	From			Yes	No	Yes	No	Yes	No
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otal		<b>▶</b> \$										
		sistance Be										
					Form 990, Pa							
(a) Name of in		(b) Relations	•	1 ' '	int of assistance	e (d) Type	of assı	stance	e <b>(e)</b>	Purpos	e of ass	ıstanc
persor	n	interested pe organiz		ine								
		organiz							<u> </u>			
		1							I			
		<del> </del>										
				1								

		ng Interested Poered "Yes" on Form	ersons. n 990, Part IV, line 28	3a. 28b	. or 28	С.
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of	(d) Description of transaction	(e) Sh	arıng f zatıon's	
				Yes	No	•
See Additional Data Table	1	1	<u></u>		1	
						-
						•
						<u>.</u>
						-
						-
Part V Supplemental 1 Provide additional i		nses to questions on	n Schedule L (see instruc	tions)		
Return Reference			Explanation			
BUSINESS TRANSACTIONS	SCHEDULE I	, PART IV EPRI re	ceived payment from the	organiza	tions li	sted in Schedule L, Part IV
INVOLVING INTEREST PERSO						ımn (d) for work associated
						or former officer, director,
			•	•		ay have served in a similar an arms-length basis EPRI
	1.	_	ns listed in Schedule L, P			
						that served as a current or
	former officer	, dırector, trustee or	key employee listed in E	PRIs Fo	rm 990	, Part VII, Section A may
						ed transactions were on an
			yment for employment c			
			Director" shown as the re 's management's hiring a		•	lumn (b) Director Jeffrey J
	Nathaniel Ly		5 management 5 mining a	na comp	CHBUILO	ii decisions regarding

# Software ID: Software Version:

**EIN:** 23-7175375

Name: Electric Power Research Institute Inc

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	
(1) A merican Electric Power	) A merican Electric Power O verlapping 998,313 Funding for Services Director/Mgmt				No	
(2) Edison International	O verlapping Director/Mgmt	235,000	Funding for Services		No	
(3) Duke Energy Corporation	O verlapping Director/Mgmt	102,500	Funding for Services		No	
(4) Exelon Corporation	O verlapping Director/Mgmt	92,982	Funding for Services		No	
(5) FirstEnergy Corporation	O verlapping Director/Mgmt	306,678	Funding for Services		No	
(6) Korea Electric Power Company	O verlapping Director/Mgmt	249,130	Funding for Services		No	
(7) New York Power Authority	O verlapping Director/Mgmt	276,982	Funding for Services		No	
(8) Southern Company	O verlapping Director/Mgmt	94,500	Funding for Services		No	
(9) American Electric Power	O verlapping Director/Mgmt	29,190	Pymnt for Public Interest R&D		No	
(10) Duke Energy Corporation	O verlapping Director/Mgmt	494,029	Pymnt for Public Interest R&D		No	
(11) Electricite de France	O verlapping Director/Mgmt	5,166,393	Pymnt for Public Interest R&D		No	
(12) Entergy Corporation	O verlapping Director/Mgmt	212,800	Pymnt for Public Interest R&D		No	
(13) Exelon Corporation	O verlapping Director/Mgmt	175,047	Pymnt for Public Interest R&D		No	
(14) Great River Energy	O verlapping Director/Mgmt	150,000	Pymnt for Public Interest R&D		No	
(15) HAWAIIAN ELECTRIC INDUSTRIES INC	O verlapping Director/Mgmt	142,052	Pymnt for Public Interest R&D		No	
(16) KOREA ELECTRIC POWER COMPANY	O verlapping Director/Mgmt	880,731	Pymnt for Public Interest R&D		No	
(17) SOUTHERN COMPANY	O verlapping Director/Mgmt	3,494,629	Pymnt for Public Interest R&D		No	
(18) Nathaniel Lyash	Son of Director	75,144	Employment		No	

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DLN: 93493222008846

OMB No 1545-0047

2015

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## SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
Electric Power Research Institute Inc

Electric Power Research Institute Inc

23-7175375

Return Reference	Explanation
Organization's Mission and Most Important Activities	Form 990, Part I, Line 1 and Form 990, Part III, Line 1 The Electric Power Research Institute (EPRI) conducts research and development relating to generation, delivery and use of electricity for the benefit of the public. An independent, nonprofit organization, EPRI brings together its scientists and engineers as well as experts from academia and industry to help address challenges in electricity, including reliability, efficiency, health, safety and the environment EPRI also provides technology, policy and economic analyses to drive long-range research and development planning, and supports research in emerging technologies. EPRI's principal offices and laboratories are located in Palo Alto, CA, Charlotte, NC, Knoxville, TN, and Lenox, MA

Return Reference	Explanation
Program Service Activity	Form 990, Part III, Line 4a EPRI's mission is to conduct research & development through science and technology with a view of providing benefits to its members' customers and the US public. To accomplish this objective, EPRI develops and manages research and development programs for improving energy generation, delivery and usage. Program service expenses are direct charges to the research programs. Certain indirect expenses are included in the management and general expense category, as EPRI does not separate these expenses for financial accounting purposes.

Return Reference	Explanation
Organization's Members or Stockholders	Form 990, Part VI, Section A, Line 6 EPRI has three classes of members, namely (a) Class I (1) Any person, firm, agency or corporation owned by the federal government, or by an agency, authority or instrumentality of the federal government, which is engaged to a substantial degree in the production, transmission or distribution of electric power for public use within the United States, (2) Any cooperative association or cooperative corporation which is engaged to a substantial degree in the production, transmission or distribution of electric power for public use within the United States, (3) Any nonfederal governmental or other public agency, authority or instrumentality, or any non-profit corporation, association or other public agency, authority or instrumentality, or any non-profit corporation, association or distribution of electric power for public use within the United States, (4) Any corporation, association or other organization operating pursuant to governmental oversight or regulation, which is engaged to a substantial degree in operating, maintaining or assuring reliability of systems for the transmission of electric power for public uses within the United States and Canada, or (5) Any governmental or other public agency, authority or instrumentality within the United States which is engaged to a substantial degree in directly funding research and development related to the production, transmission, distribution, sale, and utilization of electric power, including but not limited to, energy efficiency, renewables, and environmental research (b) Class II (1) Any investor-owned person, firm or corporation which is engaged to a substantial degree in the production, transmission or distribution of electric power for public use within the United States, or any person controlling such person, firm or corporation or sale of electric power and which is not regulated as a public utility, or any person controlling such person, firm or corporation (c) Class III Any non-United States government agency or person,

Return Reference	Explanation
Member's Power to Elect or Appoint the Governing Body	Form 990, Part VI, Section A, Line 7a In 2015, the members of EPRIs Board of Directors were elected and appointed as follows Class I members may elect seven members of the Board The Tennessee Valley Authority and the Bonneville Power Administrator may each appoint one member of the Board Class II members may elect fifteen members of the Board Class III members may elect five members of the Board The EPRI Governance and Nominating Committee may appoint six members of the Board

Return Reference	Explanation
Governance Decisions Reserved to Members	Form 990, Part VI, Section A, Line 7b Members have the power to amend the articles of incorporation and may have other powers conferred by the Nonprofit Corporation Code of the District of Columbia

Return Reference	Explanation
Form 990 Review Process	Form 990, Part VI, Section B, Line 11b An external tax firm and EPRI staff work together to gather the required tax information necessary to complete the tax return. The tax firm prepares an initial draft return and reviews the initial draft return with the finance and legal management team, items are discussed and reviewed. Recommended changes are reflected in the return and a draft tax return is prepared. The draft tax return is presented to the Audit Committee of the Board of Directors for their review and a copy is provided through a secure link to all members of the Board of Directors. The Audit Committee may question EPRI management and the external tax firm or ask for clarification on any item on the return. After the Committee has reviewed the tax return, the return is filed with the appropriate governing tax authorities.

Return Reference	Explanation
Monitoring and Enforcement of Conflict of Interest Policy	Form 990, Part VI, Section B, Line 12c EPRI requires all officers, directors and employees to complete an annual statement disclosing any conflicts of interest with a requirement to update the disclosure on an ongoing basis

Return Reference	Explanation
Process for Determining Compensation of CEO, Officers, and Key Employees	Form 990, Part VI, Section B, Lines 15a and 15b Officers' compensation decisions for those at the level of Vice President and above are determined by the Compensation and Leadership Development Committee of EPRI's Board of Directors, with the exception of determination of compensation levels for the CEO and new officers, which are usually determined by the Executive Committee of the Board of Directors. The Committees obtain and act in reliance upon appropriate comparability and benchmarking data for the officer positions from a nationally recognized independent source to support determinations of fair market value of officers compensation for the services rendered. The Committees vote on officer compensation at their meetings and concurrently document the approval in the minutes.

Return Reference	Explanation
Participation in Joint Venture/Similar Arrangement With a Taxable Entity	Form 990, Part VI, Section B, Line 16b As defined by the Form 990 instructions, a joint venture or similar arrangement (or a "venture or arrangement") means any joint ownership or contractual arrangement through which there is an agreement to jointly undertake a specific business enterprise, investment, or exempt-purpose activity without regard to (1) whether the organization controls the venture or arrangement, and (2) the legal structure of the venture or arrangement EPRI performs services work and other unrelated business activities and reports that work as unrelated business income for appropriate tax treatment. Particular care is taken in structuring business arrangements such as commercialization transactions, strategic alliances, service centers, and other similar arrangements, including obtaining advice early in the process, in order to protect EPRI's tax-exempt status and minimize any liability

Return Reference	Explanation
Documents Made Available to the Public	Form 990, Part VI, Section C, Line 19 EPRI makes its governing documents, conflict of interest policy, and audited financial statements for the past three years available to the public through its own website

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

DLN: 93493222008846

**Related Organizations and Unrelated Partnerships** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2015

OMB No 1545-0047

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Schedule R (Form 990) 2015

**Employer identification number** 

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

**SCHEDULE R** 

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

				23-71753	75			
Identification of Disregarded Entities Complete	te if the organization	answered "Yes" or	Form 990, Part	IV, line 33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Er	<b>(e)</b> nd-of-year assets	D	<b>(f)</b> Irect controlling entity		
II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during th	e tax year. (b)	(c)	(d)	(e)		(f)		g)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity s (if section 501(	status c)(3))	Direct controlling entity	-	ontrolle tity?
city Innovation Institute view Avenue	DORMANT	CA	501(c)(3)	9		EPRI Inc	Yes	No
CA 94304 27								_
								_
								$\vdash$
								<del> </del>

Cat No 50135Y

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

<b>(a)</b> Name, address, and EIN of	(b) Primary activity	(c) Legal	<b>(d)</b> Direct	(e) Predominant	<b>(f)</b> Share of	(g) Share of	(h Disprop	) rtionate	(i) Code V-UBI	Gener	) ral or	<b>(k)</b> Percentage
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	alloca		amount in box	mana	ng ing	ownership
		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign country)		excluded from tax under					Schedule K-1 (Form 1065)			
		country,		sections 512-					(1 01111 1000)			
				514)			Yes	No		Yes	No	
										1		
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Part IV Identification of Polated Organizations Taxable a	c a Carpar	ation	or Truct C	amplete if th	0.0000170	tion and	vorad	"Voc"	on Form O	000 0	) 2 r+ T	IV line

Part IV

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

(a) Name, address, and EIN of related organization	dress, and EIN of Primary activity Legal		(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	<b>(h)</b> Percentage ownership		on 512 (13) rolled :ity?
				<u> </u>			4	Yes	No
(1)EPRI Solutions Inc	R&D Applic	DE	EPRI	C Corp	-2,435	1,884,296	100 000 %	Yes	<i>'</i>
942 Corridor Park Knoxville, TN 37932 77-0449454									
(2)EPRI International Inc	Intl Sales	DE	EPRI	C Corp	249,247	1,051,858	100 000 %	Yes	7
3420 Hillview Avenue Palo Alto, CA 94304 52-2357247									

Part V	Transactions With Related Organizations Complete if the organization answ	ered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During t	he tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations lis	sted in Parts II-IV?				
<b>a</b> Rece	ipt of (i) interest, (ii)annuities, (iii)royalties, or(iv)rent from a controlled entity				1a		No
<b>b</b> Gıft,	grant, or capital contribution to related organization(s)				1b		No
<b>c</b> Gıft,	grant, or capital contribution from related organization(s)				<b>1</b> c		No
<b>d</b> Loan	s or loan guarantees to or for related organization(s)				1d		No
<b>e</b> Loan	s or loan guarantees by related organization(s)				1e		No
<b>f</b> Divid	ends from related organization(s)				1f		No
<b>g</b> Sale	of assets to related organization(s)				1g		No
<b>h</b> Purc	nase of assets from related organization(s)				1h		No
i Exch	ange of assets with related organization(s)				1i		No
<b>j</b> Leas	e of facilities, equipment, or other assets to related organization(s)				1j		No
<b>k</b> Leas	e of facilities, equipment, or other assets from related organization(s)				1k		No
I Perfo	mance of services or membership or fundraising solicitations for related organization(s) $oldsymbol{.}$				11	Yes	
<b>m</b> Perfo	mance of services or membership or fundraising solicitations by related organization(s) . $$ .				1m	Yes	
<b>n</b> Sharı	ng of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
<b>o</b> Shar	ng of paid employees with related organization(s)				10	Yes	
<b>p</b> Reim	bursement paid to related organization(s) for expenses				<b>1</b> p		No
<b>q</b> Reim	bursement paid by related organization(s) for expenses				1q		No
<b>r</b> Othe	transfer of cash or property to related organization(s)				1r		No
<b>s</b> Othe	r transfer of cash or property from related organization(s)				1s		No
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete	e this line, including co	vered relationships	and transaction thresholds			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount ir	nvolved	
1)EPRI INTE	RNATIONAL INC	М	5,394,739	ACTUAL EXPENSE			
<b>2)</b> EPRI INTE	RNATIONAL INC	L	9,609	ACTUAL EXPENSE			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
<b>(a)</b> Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations	_	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		<b>(k)</b> Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
											1	1	İ
			<u> </u>	_		-	1	I		<u> </u>			

# Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2015