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DLN: 93493273005216

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)

 \blacktriangleright 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

Open to Public Inspection

A F	or the	≥ 2015 ca	ılendar year, or tax year begi	nning 01-01-2015 , and ending 12-31-	2015		
		applicable	C Name of organization			D Employ	er identification number
☐ Add			NATIONAL OILHEAT RESEARCH	ALLIANCE		54-20	24246
		-					24240
_		_	Doing business as				
Init		ım	Number and street (or P.O. box	c if mail is not delivered to street address) Roor	n/suite	E Telephor	ne number
Fin		mınated	600 CAMERON STREET NO 206		ı, saite	(703)	340-1660
┌ Am	ended	return	City or town, state or province	country, and ZIP or foreign postal code			
		n pending	ALEXANDRIA VA 22314	country, and 21 or foreign postar code		G Gross re	ceipts \$ 9,818,226
i Ahi	nicatioi	n penaing			ı		
			F Name and address of JOHN HUBER	principal officer		s this a group i	
			600 CAMERON STREET	NO 206		ubordinates?	「Yes ▼No
			ALEXANDRIA, VA 223	14	l l	re all subordin ncluded?	nates TYes TNo
					1		a list (see instructions)
I Ta	x-exen	npt status	「 501(c)(3)) ◀ (Insert no)	H(c)	Group exemption	on number ►
J W	ebsite	e:► WV	VW NORAWEB ORG				
K Form	n of or	raanizatior	Corporation Trust Associ	Cation Other In-	l Vear	of formation 200	01 M State of legal domicile DC
	rt I		imary	cation) other P	L rear	or formation 200	11 State of legal dofficile. De
				sion or most significant activities			
Governance		Check th		n discontinued its operations or dispose	ed of more tha	an 25% of its r	net assets
Activities &	 3	Number	of voting members of the gov	erning body (Part VI, line 1a)			3 48
Ë	l			ers of the governing body (Part VI, line		F	4 47
Ŧ.	l		·	I in calendar year 2015 (Part V, line 2a			5 3
ĕ				ıf necessary)			6 47
				m Part VIII, column (C), line 12			7a 0
				e from Form 990-T, line 34		<u>-</u>	7b 0
						D==== V====	Current Year
					1	Prior Year	Current rear
	8	Contr	ibutions and grants (Part VII	I, line 1h)		Prior Year	0 0
e E	8		- '	I, line 1h)		5,559,5	0 0
venue		Progr	am service revenue (Part VI)	·		5,559,5	0 0
Revenue	9	Progr Inves	am service revenue (Part VII tment income (Part VIII, col	II, line 2g)		5,559,5	0 0 73 9,728,432 36 1,136
Revenue	9 10	P rogr I nves O ther	am service revenue (Part VII tment income (Part VIII, col revenue (Part VIII, column	II, line 2g)		5,559,5 5 20,8	0 0 73 9,728,432 36 1,136 62 18,111
Revenue	9 10 11	P rogr I nves O ther	am service revenue (Part VII tment income (Part VIII, col revenue (Part VIII, column	II, line 2g)		5,559,5 5	0 0 73 9,728,432 36 1,136 62 18,111
Revenue	9 10 11	Progr Inves Other Total 12)	am service revenue (Part VII) tment income (Part VIII, col revenue (Part VIII, column revenue—add lines 8 through	II, line 2g)		5,559,5 5 20,8	0 0 73 9,728,432 36 1,136 62 18,111 71 9,747,679
Revenue	9 10 11 12	Progr Inves Other Total 12)	am service revenue (Part VII) tment income (Part VIII, col revenue (Part VIII, column revenue—add lines 8 through s and similar amounts paid (I	II, line 2g)	line	5,559,5 5 20,8 5,580,9	0 0 73 9,728,432 36 1,136 62 18,111 71 9,747,679
	9 10 11 12	Progr Inves Other Total 12) Grant Benef Salari	am service revenue (Part VII tment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through s and similar amounts paid (lits paid to or for members (Pass, other compensation, emp	II, line 2g)	Ine	5,559,5 5 20,8 5,580,9	0 0 73 9,728,432 36 1,136 62 18,111 71 9,747,679 00 6,228,592 0 0
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	9 10 11 12 13 14 15	Progr Inves Other Total 12) Grant Benef Salari 5-10 Profe	am service revenue (Part VII) tment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through and similar amounts paid (lits paid to or for members (Part paid to or for members or for members (Part paid to or for members (Part paid to or for members or for memb	II, line 2g)	Inne	5,559,5 5 20,8 5,580,9 3,077,0	0 0 0 73 9,728,432 36 1,136 62 18,111 71 9,747,679 00 6,228,592 0 0
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Expenses	9 10 11 12 13 14 15 16a b	Progr Inves Other Total 12) Grant Benef Salari 5-10 Profe Total fo	am service revenue (Part VIII) tment income (Part VIII, column revenue (Part VIII, column revenue—add lines 8 through s and similar amounts paid (lits paid to or for members (Part Silvan) ssional fundraising fees (Part IX, column rexpenses (Part IX, column (expenses Add lines 13–17	II, line 2g)	Ine	5,559,5 20,8 5,580,9 3,077,0 324,1 695,9 4,097,1 1,483,8	0 0 0 73 9,728,432 36 1,136 62 18,111 71 9,747,679 00 6,228,592 0 0 49 361,904 0 0 93 1,220,978 42 7,811,474 29 1,936,205
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MCLEAN, VA 22102

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

. ✓ Yes ┌ No

Form	1990 (2015)				Page 2
Par		Program Service A	-		_
			or note to any line in this Part	<u>III</u>	<u> </u>
EDU EFFI	Briefly describe the organ CATE CONSUMERS ABOU CIENCY AND UPGRADES	JT THE BENEFITS OF (DILHEAT, PERFORM RESEAR NICAL TRAINING TO PROV	RCH AND DEVELOPMENT, E IDE BETTER CUSTOMER SE	NCOURAGE HEATING OI ERVICE
2	the prior Form 990 or 990)-EZ?	ogram services during the yea	r which were not listed on	⊤Yes ▼No
	If "Yes," describe these n				
3	services?		ignificant changes in how it c	onducts, any program · · · · · · · ·	⊤Yes ▼No
	If "Yes," describe these c	hanges on Schedule O			
4)(3) and 501(c)(4) orga	omplishments for each of its the nizations are required to repo program service reported		
4a	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	DEMONSTRATION PROGRAM, \$2,000,000 IN ADDITIONAL NA TO BE SPENT SUBSEQUENT TO NET ASSESSMENTS REVENUE REMAINS TO BE SPENT IN FUT DEMONSTRATION PROGRAM COLLECTED FOR EACH CALEN RESEARCH, DEVELOPMENT, AI SYSTEMS TO BE PLACED INTO	INCLUDING \$166,499 IN GRA ATIONAL SPENDING AND \$12: D YEAR END FOR THE RESEAL ADDITIONALLY, AS OF DECE FURE PERIODS AND UNALLOC THE NORA PUBLIC LAW : DAR YEAR UNDER THE NORA ND DEMONSTRATION ACTIVI THE MARKETPLACE THIS AL JELOP CONSUMER EDUCATIO	L5, THE ALLIANCE GRANTED OR EXPI NATS AND SPENDING OF PAST YEARS 7,029 IN FUTURE GRANTS TO BE MA RCH, DEVELOPMENT, AND DEMONST MBER 31, 2015, \$368,574 IN ADDIT CATED STATE REBATES OF 2015 REV 113-79 REQUIRES THE ALLIANCE TO A PUBLIC LAW 113-79 ARE USED BY OF ITES RELATING TO OILHEAT FUEL, IN SO INCLUDES THE ALLIANCE, IN CO N MATERIALS DESCRIBING THE BENI	G ASSESSMENT'S REVENUE THE ALL' DE TO STATE ORGANIZATIONS FRO RATION PROGRAM MAKING THE TO CONAL NATIONAL SPENDING FROM 2 ENUE WILL BE USED FOR THE RESE ENSURE NOT LESS THAN 30 PERCE QUALIFIED STATE ASSOCIATIONS OF CLUDING THE DEVELOPMENT OF EN NJUNCTION WITH AN INSTITUTION	MANCE ALSO BUDGETED M 2015 ASSESSMENTS REVENUE TAL FOR 2015, 34 PERCENT OF 1014 ASSESSMENTS REVENUE ARCH, DEVELOPMENT, AND 1015 THE ASSESSMENTS R THE ALLIANCE TO CONDUCT NERGY-EFFICIENT HEATING OR ORGANIZATION ENGAGED IN
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$	1
	HEATING OIL EFFICIENCY AND PROGRAM, INCLUDING \$54,22 NATIONAL SPENDING AND \$92 EFFICIENCY AND UPGRADE PROSESSMENTS REVENUE ADD UPGRADE PROGRAM THE NOR EACH CALENDAR YEAR UNDER ASSIST CONSUMERS (I) TO M. MODIFICATIONS TO AN EXIST	D UPGRADE IN 2015, THE AL 21 IN GRANTS AND SPENDING 2,545 IN FUTURE GRANTS TO ROGRAM, OF WHICH \$73,551 ITIONALLY, UNALLOCATED ST (A PUBLIC LAW 113-79 REQU THE NORA PUBLIC LAW 113 AKE COST-EFFECTIVE UPGRA ING HEATING SYSTEM TO IMI	LIANCE GRANTED OR EXPENDED \$1 G OF PAST YEARS ASSESSMENTS REVENDED BE MADE TO STATE ORGANIZATION IN REMAINED UNSPENT AS OF DECEMBRICATE REBATES OF 2015 ASSESSMENT IN THE ALLIANCE TO ENSURE NOT 10-79 ARE USED BY QUALIFIED STATE ADES TO MORE FUEL EFFICIENT HEAP PROVE THE EFFICIENCY OF THE SYSCIENCY PROGRAMS FOR CONSUMER	.366,329 FOR THE HEATING OIL EFI /ENUE THE ALLIANCE ALSO BUDGE' S FROM 2015 ASSESSMENTS REVEN BER 31, 2015, MAKING THE TOTAL 'S REVENUE WILL BE USED FOR THI LESS THAN 15 PERCENT OF THE ASSOCIATIONS OR THE ALLIANCE TO JUSTING OIL SYSTEMS OR OTHERWISE TEM, (II) TO IMPROVE ENERGY EFF	TED \$100,000 IN ADDITIONAL JUE FOR THE HEATING OIL FOR 2015, 15 PERCENT OF NET E HEATING OIL EFFICIENCY AND HE ASSESSMENTS COLLECTED FOR TO CARRY OUT PROGRAMS TO MAKE COST-EFFECTIVE FICIENCY OR REDUCE ENERGY
	(Code) (Expenses \$	including grants of \$) (Revenue \$	\
76	CONSUMER EDUCATION, SAFE TRAINING PROGRAM, INCLUD ADDITIONAL NATIONAL SPEND CONSUMER EDUCATION, SAFE 30 PERCENT OF NET ASSESSMENTS COLLECTE ACTIVITIES RELATING TO OILL TECHNOLOGIES THAT REDUCE DESIGNED TO ASSIST OILHEAT EFFICIENCY TRAINING, (III) T	TTY, AND TRAINING IN 2015 ING \$108,444 IN GRANTS AN ING AND \$185,084 IN FUTUR TY, AND TRAINING PROGRA IENTS REVENUE PROGRAM T D FOR EACH CALENDAR YEAR EAT FUEL, INCLUDING PROV TOONSUMPTION OR IMPROV TO CARRY OUT OTHER ACTIV	, THE ALLIANCE GRANTED OR EXPEN ID SPENDING OF PAST YEARS ASSES RE GRANTS TO BE MADE TO STATE O M, OF WHICH \$11,468 REMAINED U HE NORA PUBLIC LAW 113-79 REQU	NDED \$2,866,471 FOR THE CONSUMENTS REVENUE THE ALLIANCE AND REGANIZATIONS FROM 2015 ASSESSIVED AS OF DECEMBER 31, 2015 IRES THE ALLIANCE TO ENSURE NOT 113-79 ARE USED (I) TO CONDUCTOR OF BIOFUEL BLENDS, AND FEDERAL ALINING ACTIVITIES RELATING TO CETARY OF ENERGY, OR (IV) TO EST	LSO BUDGETED \$300,000 IN MENTS REVENUE FOR THE MAKING THE TOTAL FOR 2015, T MORE THAN 30 PERCENT OF T CONSUMER EDUCATION ATEGIES, SAFETY, NEW , STATE, AND LOCAL PROGRAMS VILHEAT FUEL, INCLUDING ENERG
	See Additional Data				
4d	Other program services	•	•		
	(Expenses \$	ıncludıng	grants of \$) (Revenue \$)
4e	Total program service ex	penses 🕨			

Part IV	Checklist o	of Req	uired	Schedule
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			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		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
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
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? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	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		No
	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 2	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
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νo
	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		No
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		No
16	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
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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	
22	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		Νo
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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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	200		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28a		No_
	Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I </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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? 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	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 25			
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		
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			
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		No
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country ► 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_		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 gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?	7a 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	\vdash		
	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	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			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
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? Note. See the instructions for additional information the organization must report on Schedule O	120		
h	Enter the amount of reserves the organization is required to maintain by the states	13a		
	in which the organization is licensed to issue qualified health plans			
		14-		Nic
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No
U	II 165, Has it med a Form 720 to report these payments 'II IVO, provide an explanation in Schedule U	, T4D		i

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

Se	ection A. Governing Body and Management	-	• • •	,, -
	etion A. Governing Body and Flanagement		Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 48			
	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 47			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,	7b		
	or persons other than the governing body?	70		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	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	ıe Cod	e.)
			Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13		Νo
L 4	Did the organization have a written document retention and destruction policy?	14		No
L 5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
L6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

Own website Another's website Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records ►HALT BUZAS & POWELL 1199 NORTH FAIRFAX STREET 10TH ALEXANDRIA, VA 22314 (703)836-1350

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-	(E) Reportable compensation from related organizations	(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	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
										Form 990 (2015)

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han on is a dire	ne l both	oox, an d	officer stee)	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		0; 0;	Trustee			einsated				
See Additional Data Table										
		<u> </u>								
		 								
						<u> </u>				
1b Sub-Total			•							
c Total from continuation sheet d Total (add lines 1b and 1c).	-			•	•			285,364	0	23,275
							<u> </u>	· I	-	23,213
2 Total number of individuals (in \$100,000 of reportable compe						a abov	e) wh	no received more th	an	

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo

	Yes	No
3		No
4	Yes	
5		Νo

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
WARM THOUGHTS COMMUNICATIONS	MARKETING SERVICES	726,118
4 BRIGHTON ROAD SUITE 300 CLIFTON, NJ 07012		
JL360 MEDIA LLC	MARKETING SERVICES	338,333
1600 ROUTE 22 2ND FLOOR UNION, NJ 07083		
OILHEAT ASSOCIATES INC	CONSULTING SERVICES	305,479
1597 EARL ROAD WANTAGH, NY 11793		
BOSTON ENVIRONMENTAL	CONSULTING SERVICES	264,921
600 STATE STREET SUITE 7 PORTSMOUTH, NH 03801		
PRIMEDIA	MARKETING SERVICES	262,664
401 FRANKLIN AVENUE SUITE 310 GARDEN CITY, NY 11530		

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 \blacktriangleright 15

Part V	1111	Statement o						_
		Check if Schedi	ule O contains a respor	ise or note to any lir	(A)	(B)	(C)	
					Total revenue	Related or	Unrelated	Revenue
						exempt	business	excluded from
						function revenue	revenue	tax under sections
						revenue		512-514
	1a	Federated cam	paigns 1a					
nts								
Grants mounts	Ь	Membership du	les 1b					
ons, Gifts, Grants Similar Amounts	С	Fundraising eve	ents 1c					
Giffs, iilar Aı	d	Related organiz	zations 1d					
ij. iš	е	Government grants	s (contributions) 1e					
Contributions, and Other Sim	f	All other contribution	ons, gifts, grants, and 1f					
Contributic and Other								
Ēρ	g	1a-1f \$	ons included in lines					
no l	h	Total. Add lines	s 1 a - 1 f					
C				· · · · •				
<u>9</u>				Business Code				
e⊔.	2a	OILHEAT ASSESSM	ENTS	900099	9,728,432	9,728,432		
£e, Fe,	b							
<u>-</u>	С							
۲۳	d							
38								
Program Serwce Revenue	e							
#B	f	All other progra	am service revenue					
Ĕ.	g	Total. Add lines	s 2a-2f		9,728,432			
	3		ome (including dividen		5,720,⊤32			
			ar amounts)		1,136			1,136
	4	Income from inves	stment of tax-exempt bond p	oroceeds 🕨				
	5	Royalties		🕨				
		•	(ı) Real	(II) Personal				
	6a	Gross rents	(1)	(,				
	b	Less rental						
	С	expenses Rental income						
	_	or (loss)						
	d	Net rental inco	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other						į.
		than inventory						
	ь	Less cost or						
		other basis and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (los	s)					
As .		Gross income f	ı					
ň		events (not inc	_					
Other Revenue		\$						
ا سے			reported on line 1c)					
		See Part IV, lin	ne 18 a					
۽	L	1 000 d.===+=						
0			penses b	works				
			(loss) from fundraising (Þ-				
	ya	Gross income f See Part IV, lin	rom gaming activities					
		· wisav / illi	a					
	ь	less directev	penses b					
			(loss) from gaming activ	/ities ⊾				
		Gross sales of						
	_54	returns and allo						
			a	88,658				
	ь	Less cost of a	oods sold b	70,547				
			(loss) from sales of inve		18,111	18,111		
		Miscellaneous		Business Code				
	11a							
	b							
	_							
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	🕨				
	12	Total revenue	See Instructions	<u> </u>				

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	Statement of Functional Expenses				
Section	on 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 t	his Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	6,228,592			
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	308,638			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	35,407			
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	2,447			
9	Other employee benefits				
10	Payroll taxes	15,412			
11	Fees for services (non-employees)				
а	Management				
b	Legal	88,000			
С	Accounting	266,147			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	718,553			
12	Advertising and promotion	2,001			
13	Office expenses	41,996			
14	Information technology	23,771			
15	Royalties				
16	Occupancy	20,448			
17	Travel	8,557			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,843			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	9,277			
23	Insurance	9,406			
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)				
a					
Ь					
c					
d					
e	All other expenses	29,979			
25	Total functional expenses. Add lines 1 through 24e	7,811,474			
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

					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			104,714	1	,
	2	Savings and temporary cash investments			3,181,472	2	8,209,832
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			2,953,907	4	2,575,553
	5	Loans and other receivables from current and former offic trustees, key employees, and highest compensated empl II of	ers, dırect				
		Schedule L				5	
4ssets	6	Loans and other receivables from other disqualified person section 4958(f)(1)), persons described in section 4958(contributing employers and sponsoring organizations of soluntary employees' beneficiary organizations (see instruction of Schedule L	c)(3)(B), ai ection 501	nd L(c)(9)		6	
A S	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use		•	6,723		
	9				14,300		342,229
	10a	Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis	· · · ·	• •	14,300	9	342,229
	10a	Complete Part VI of Schedule D	10a	65,216			
	b	Less accumulated depreciation	10b	27,871	33,300	10c	37,345
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11 .				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	21,145
	16	Total assets.Add lines 1 through 15 (must equal line 34)			6,294,416	16	11,186,104
	17	Accounts payable and accrued expenses			591,094		659,676
	18	Grants payable			3,532,960		6,420,146
	19	Deferred revenue			1,049		764
	20	Tax-exempt bond liabilities	• • •	• •	.,,,,,	20	
	21	Escrow or custodial account liability Complete Part IV o	 fSchadula			21	_
Liabilities	22	Loans and other payables to current and former officers, of key employees, highest compensated employees, and dis	directors, t			21	
Ξ		persons Complete Part II of Schedule L				22	-
Ę.	23	Secured mortgages and notes payable to unrelated third i	parties .			23	
_	24	Unsecured notes and loans payable to unrelated third par	ties .			24	
	25	Other liabilities (including federal income tax, payables to and other liabilities not included on lines 17-24) Complete Part X of Schedule D	o related th	nird parties,		25	
	26	Total liabilities. Add lines 17 through 25			4,125,103	26	7,080,586
Se.		Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets			2,169,313	27	4,105,518
ស	28	Temporarily restricted net assets				28	
-	29	Permanently restricted net assets				29	
sets or fund balance		Organizations that do not follow SFAS 117 (ASC 958), ch complete lines 30 through 34.	eck here 🕨	- ┌─ and			
ا د ا بور	30	Capital stock or trust principal, or current funds				30	
<u>,</u>	31	Paid-in or capital surplus, or land, building or equipment f	und			31	
HS.	32	Retained earnings, endowment, accumulated income, or o	ther funds			32	
Net	33	Total net assets or fund balances			2,169,313	33	4,105,518
2	34	Total liabilities and net assets/fund balances			6 294 416		11 186 104

Par	t XI 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		9,7	747,679
2	Total expenses (must equal Part IX, column (A), line 25)	2		7 (311,474
3	Revenue less expenses Subtract line 2 from line 1				,11,4/-
_		3		1,9	936,205
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,:	169,313
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities				
_	<u> </u>	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	\dashv			
10	Not contain the form of the containing of the co	9			С
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4,:	105,518
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>			. ᅜ
				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	wed on			
	a separate basis, consolidated basis, or both Separate 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 sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
_	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	n+			
	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 in Schedule O	1			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	e	_		
•	Single Audit Act and OMB Circular A-133?		3a		No
D	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		

Additional Data

Software ID:

Software Version:

EIN: 54-2024246

Name: NATIONAL OILHEAT RESEARCH ALLIANCE

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

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

UNALLOCATED STATE REBATES IN ADDITION TO THE SPECIFIC PROGRAM COMMITMENTS DISCUSSED PREVIOUSLY, THE

ALLIANCE HAS COMMITTED \$1,736,928, WHICH IS 18 PERCENT OF NET 2015 ASSESSMENT REVENUE, FOR STATE REBATES

THAT HAVE NOT YET BEEN ALLOCATED TO A PROGRAM SPECIFIED IN THE NORA PUBLIC LAW 113-79 THE ALLIANCE PLANS

TO ALLOCATE THESE STATE REBATES TO THE RESEARCH, DEVELOPMENT, AND DEMONSTRATION AND/OR HEATING OIL

EFFICIENCY AND UPGRADE PROGRAMS STATE ORGANIZATIONS DEVELOP DETAILED PLANS FOR USE OF THE REBATES TO DO

WORK UNDER THESE PROGRAMS THESE FUNDS WILL BE ALLOCATED BETWEEN PROGRAMS IN ACCORDANCE WITH THE

REQUIREMENTS OF NORA PUBLIC LAW 113-79

Compensated Employees, and Inc		ntracto '						1	ı	l I
(A) Name and Title	(B) A verage hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(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	2/1099-MISC)	2/1099-MISC)	organization and related organizations
BRETT ADAMS	1 00	х						0	0	0
DIRECTOR	1.00							<u> </u>		
RALPH ADAMS	1 00	×						0	0	0
DIRECTOR NANCY ALLEN	1 00									
DIRECTOR		х						0	0	0
MIKE ANTON	1 00									
DIRECTOR		X						0	0	0
TOM BARRON	1 00	х						0	0	0
DIRECTOR	4.00	<u> </u>							-	
SAM BELL	1 00	x						0	0	0
DIRECTOR LORI BERG	1 00									
DIRECTOR		x						0	0	0
TOM BERRY	1 00									
DIRECTOR		X						0	0	0
BOB BLANCHARD	1 00	х						0	0	0
DIRECTOR		_ ^						0		0
BOB BOLTZ	1 00	×						0	0	0
DIRECTOR	1 00									
MOLLY BRADY DIRECTOR		x						0	0	o
JIM BUHRMASTER	1 00									
DIRECTOR		X						0	0	0
THOMAS A BUTCHER DR DIRECTOR	3 00	х						9,093	0	742
PETER CARINI	1 00	V						0	0	0
DIRECTOR		Х						U	0	0
STEVE CLARK	1 00	×						0	0	0
DIRECTOR	1 00									
SEAN COTA DIRECTOR		×						0	0	О
ERIC DEGESERO	1 00									
TREASURER		X		Х				0	0	0
TOM DEVINO	1 00							0		0
DIRECTOR		X						U	0	0
PETER DOUGLAS DIRECTOR	1 00	х						0	0	0
DAVID GLENDON	1 00	х						0	0	0
DIRECTOR	1.00	-	<u> </u>						,	
ALLISON HEANEY	1 00	x		х				0	0	0
CHAIRWOMAN JEFF JENKINS	1 00									
DIRECTOR		х						0	0	o
CHRIS KEYSER DIRECTOR	1 00	х						0	0	0
NANCY KISTER	1 00									
DIRECTOR		Х						0	0	0
BARRY KNOX	1 00	х						0	0	0
DIRECTOR										

Compensated Employees, and Inde		ntracto						ı	I	1 1
(A) Name and Tıtle	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(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	2/1099-MISC)	2/1099-MISC)	organization and related organizations
BRIAN E KOTTCAMP	1 00	Х						0	0	0
DIRECTOR	1 00									
WILL LAWES		x						0	0	0
DIRECTOR	1 00									
LOUISE GIGUERE LEBLANC		x						0	0	0
DARREN LEDOUX	1 00									
DIRECTOR		x						0	0	0
ROGER MARRAN	1 00							_	_	_
DIRECTOR		X						0	0	0
DAVE MARTIN	1 00	х						0	0	0
DIRECTOR		_ ^						0	0	0
BILL MCKIBBIN	1 00	x						0	0	0
DIRECTOR								Ů		
CHARLES MILLER	1 00	l x						0	0	0
DIRECTOR								-		
DAVID NEIL	1 00	x						0	0	0
DIRECTOR	1 00									
MIKE NEISH		x						0	0	0
DIRECTOR	1 00									
ED NOONAN		x		х				0	0	0
PAST CHAIRMAN MIKE O'CONNOR	1 00									
DIRECTOR		x						0	0	0
JOHN PETERS	1 00	X						0	0	0
DIRECTOR										
MARK PETRUNIS	1 00	×						0	0	0
DIRECTOR	1.00									
CARLA ROMITA	1 00	x						0	0	0
DIRECTOR	1 00									
ERIC S SLIFKA		x						0	0	0
CHARLES STAFFORD	1 00									
DIRECTOR		×						0	0	0
GENE WALDMAN	1 00									
DIRECTOR		Х						0	0	0
JEFF WITHAM	1 00	х						0	0	0
DIRECTOR		_ ^						0	0	0
JACK WOODFIN	1 00	X						0	0	0
DIRECTOR								Ů		
KEITH WRISLEY	1 00	l x						0	0	0
DIRECTOR	1.00									
AL BREDA	1 00	×						0	0	0
DIRECTOR BOB LONG	1 00									
DIRECTOR		x						0	0	0
BRUCE Q HARRIS	1 00									
DIRECTOR		X						0	0	0
CHARLES UGLIETTO	1 00	x						0	0	0
DIRECTOR										

Compensated Employees, and Ind		ntracto						I	I	ı ı
(A) Name and Title	(B) A verage hours per week (list any hours	person is both an officer and a director/trustee)		(D) 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 trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
CHRIS DALY	1 00	х						0	0	0
DIRECTOR	1 00									
DAN DONOVAN		x						0	0	0
DANIEL SINGER	1 00									
DIRECTOR		х						0	0	0
ED SCOTT	1 00									
DIRECTOR		Х						0	0	0
GEORGE MCQUEENEY	1 00	†						_	_	_
DIRECTOR		X						0	0	0
GREG ANDERSON	1 00	х						0	0	0
DIRECTOR		ļ <u>"</u>	-							
JAY BUEHLER	1 00	x						0	0	o
DIRECTOR	1 00									
JOE PHILLIPS		х						0	0	О
JOHN COMBS	1 00									
DIRECTOR		х						0	0	0
JOHN MCCUSKER	1 00									
DIRECTOR		X						0	0	0
KATE CHILDS	1 00	x						0	0	0
DIRECTOR		_ ^						0	0	0
KEN RUSS DIRECTOR	1 00	x						0	0	0
LARRY GALGOCI DIRECTOR	1 00	х						0	0	0
MARK FITZ DIRECTOR	1 00	х						0	0	0
MATT MEEHAN DIRECTOR	1 00	х						0	0	0
MICHAEL JANUARIO DIRECTOR	1 00	х						0	0	0
PETER AZIZ DIRECTOR	1 00	×						0	0	0
QUINCY W LONGACRE DIRECTOR	1 00	х						0	0	0
RICK BOLOGNA DIRECTOR	1 00	х						0	0	0
STEPHEN SACK DIRECTOR	1 00	х						0	0	0
STEVE MCCRACKEN DIRECTOR	1 00	х						0	0	0
STEVE SCHOOLEY DIRECTOR	1 00	х						0	0	0
SUSAN SANTOPIETRO DIRECTOR	1 00	Х						0	0	0
TOM FLAHERTY	1 00	x						0	0	0
TOM SANTA	2 00									
1ST VICE CHAIRMAN		×		х				0	o	o
-		<u> </u>	1		1	<u> </u>	<u> </u>	l	<u> </u>	<u> </u>

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit more the personal Individual trustiee or director	ion (d nan o n is b	ne bo	ox, u an of trust 文 文	inless ficer tee)	Forme	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JOHN HUBER PRESIDENT	40 00			х				276,271	0	22,533

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DLN: 93493273005216

OMB No 1545-0047

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.

Open to Public

ernal Revenue Service	Information about Schedule D	(Form 990) and its instructions is at <u>www.ir</u>	s.gov/f	orm990. Inspection
Name of the organ			Emple	oyer identification number
NATIONAL OILILAT KE	SEARCH ALLIANCE		54-2	024246
		r Advised Funds or Other Similar F ed "Yes" on Form 990, Part IV, line 6.	unds o	r Accounts.
		(a) Donor advised funds	(b)	Funds and other accounts
Total numb	er at end of year			
A ggregate year)	value of contributions to (during			
Aggregate	value of grants from (during year)			
Aggregate	value at end of year			
_		advisors in writing that the assets held in doi the organization's exclusive legal control?	nor advis	ed Yes No
used only for		and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for a		purpose Yes No
art III Conse	ervation Easements. Compl	ete if the organization answered "Yes" (on Form	n 990, Part IV, line 7.
Preservati Protection Preservati Complete line	conservation easements held by the conservation of land for public use (e g , recreated of natural habitat con of open space s 2a through 2d if the organization	certified	cally important land area historic structure of a conservation	
easement on t	the last day of the tax year		Held at the End of the Year	
a Total number	of conservation easements	2a	Tiola at the Lila of the Teal	
b Total acreage	restricted by conservation easeme	2b		
c Number of cor	nservation easements on a certified	d historic structure included in (a)	2c	
	nservation easements included in (ture listed in the National Register	c) acquired after 8/17/06, and not on a	2d	
Number of cor tax year ►	nservation easements modified, tra	nsferred, released, extinguished, or terminat	ed by the	e organization during the
Number of sta	tes where property subject to cons	ervation easement is located 🛌		
	inization have a written policy regai d enforcement of the conservation (rding the periodic monitoring, inspection, han easements it holds?	dling of	┌ Yes
Staff and volu year	nteer hours devoted to monitoring,	inspecting, handling of violations, and enforc	ing cons	ervation easements during the
<u> </u>				
	penses incurred in monitoring, insp	ecting, handling of violations, and enforcing c	onserva	tion easements during the year
	nservation easement reported on li tion 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 17	0(h)(4)
In Part XIII, o balance sheet	describe how the organization repor , and include, if applicable, the text	ts conservation easements in its revenue an t of the footnote to the organization's financia	•	se statement, and
	on's accounting for conservation ea			au Cimilae A
		ctions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Oth	er Similar Assets.
a If the organiza works of art, h	ation elected, as permitted under S iistorical treasures, or other similai	FAS 116 (ASC 958), not to report in its reversesses held for public exhibition, education, note to its financial statements that describe	or resea	irch in furtherance of public
b If the organization works of art, h	ation elected, as permitted under S	FAS 116 (ASC 958), to report in its revenue r assets held for public exhibition, education,	stateme	ent and balance sheet
(i) Revenue incl	luded on Form 990, Part VIII, line	1	► \$	
	ded in Form 990, Part X		- ¢	
If the organiza	ation received or held works of art,	historical treasures, or other similar assets f SFAS 116 (ASC 958) relating to these items		ial gain, provide the
_	ided on Form 990, Part VIII, line 1	· · · · · ·		► \$

b Assets included in Form 990, Part X

Part	1111	Organizations Maintaining (continued)	Collections of A	rt, Hi	stori	cal	Trea	sures, o	or O	ther S	Similar A	sse	ts	
		the organization's acquisition, acce tion items (check all that apply)	ession, and other reco	ords, c	heck a						ınıfıcant us	e of	ts	
а	ΓP	ublic exhibition		d	Г	Loa	n or ex	xchange ¡	orogr	ams				
b	Г s	cholarly research		e	Γ	Oth	ner							
c	ГР	reservation for future generations												
4	Provid Part X	de a description of the organization's	s collections and exp	laın ho	w the	y furt	her th	e organız	atıon	's exem	pt purpose	ın		
		g the year, did the organization solic s to be sold to raise funds rather th									r ┌ Yes	Γ	- No	
Part	: IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		Form	990,	Part	t IV, l	ine 9, oi	r rep	orted	an amour	nt on	Forn	n 990,
		e organization an agent, trustee, cus led on Form 990, Part X?	todian or other interr	nediary	y for c	ontri	bution	s or othe	rass	ets not	┌ Yes	Γ	- No	
ь	If"	Yes," explain the arrangement in Pa	art XIII and complete	the fo	llowin	a tab	ole				Am	ount		
c		ginning balance							1c					
d		ditions during the year						Ī	1d					
e		tributions during the year							1e					
f		ding balance							1f					
2a		ie organization include an amount oi	n Form 990. Part X. li	ne 21.	for es	scrov	vorcu	ו stodial ad	cou	nt liabili	ıtv? E Yes	Т	- No	
	D14 (1)			,	, 101 01		, 0, 04	o co a i a i		ic masim	, , ,	,		
b	If"Ye	s," explain the arrangement in Part	XIII Check here if the	ne expl	lanatı	on ha	ıs beer	n provide	d ın F	art XII	I			Γ
Par		Endowment Funds. Comple												
			(a)Current year	(b) P	nor yea	ar	b (c)⊺	Γwo years t	ack	(d)Three	years back	(e)l	our ye	ars back
1a	Begir	nning of year balance												
b	Conti	ributions · · · · · · ·												
С	Net II losse	nvestment earnings, gains, and s												
d	Grant	ts or scholarships												
е		r expenditures for facilities rograms												
f	A dmi	nistrative expenses												
g		of year balance												
2	Provid	de the estimated percentage of the o	current vear end bala	nce (lu	ne 1a.	colu	ımn (a)) held as						
		designated or quasi-endowment	,		5,			,,						
		anent endowment -												
c	Temp	orarıly restricted endowment ►	1 11 11000											
		ercentages on lines 2a, 2b, and 2c		. 	+	ا معا	اما	d = d==	+a =-	l f o = + !-				
		nere endowment funds not in the pos ization by	session of the organ	ization	tnat a	are no	eid and	a aaminis	tered	i for the	!	ſ	Yes	No No
		related organizations									3a	ı(i)		
	(ii) re	lated organizations									3a	(ii)		
		s" on 3a(11), are the related organiza					R?.				3	3b		
		ribe in Part XIII the intended uses o		ndown	nent fu	ınds								
Part	· VI	Land, Buildings, and Equip)OO [) n u+ '	T\/	11 . C	'aa F	-a wma O	00 Dowt V	منا /	- 10	
		Complete if the organization a	inswered tes to r	(a	Cost		er basıs	(b Cost or otl) ner ba		Accumulated)depreciation			k value
1-	254							(oth	er)	+		+		
				· -				-				+		
		gs		. -				-		-		+		
		nent		. -					19,76	56	16,5	59.1		3,185
				· [45,4	_	11,2	-		34,160

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

37,345

Part VII Investments—Other Securities. See Form 990, Part X, line 12.	Complete if the organ	ization answered 'Ye	s' on Form 990, Part IV, line 11b.
(a) Description of security or categ (including name of security)	ory	(b)Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives			
(2)Closely-held equity interests (3)Other			
) -		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 Part VIII Investments—Program Related)		
Complete if the organization answe	red 'Yes' on Form 990), Part IV, line 11c. _{Se}	
(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 organiz		Form 990. Part IV. line	11d See Form 990. Part X. line 15
	escription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) In	ne 15.)		
Part X Other Liabilities. Complete if the o		l 'Yes' on Form 990,	Part IV, line 11e or 11f.
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Book value		
Faderal income toyee			
Federal Income taxes			
		\dashv	
		_	

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per Retur	'n
1	Total revenue, gains, and other support per audited financial statements	1	9,747,679
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	9,747,679
4	Amounts 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)		
С	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	9,747,679
Part	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s per Ret	urn.
1	Total expenses and losses per audited financial statements	1	7,811,474
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	7,811,474
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	7,811,474
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
	THE ALLIANCE IS REQUIRED TO MEASURE, RECOGNIZE, PRESENT, AND DISCLOSE IN ITS FINANCIAL STATEMENTS UNCERTAIN INCOME TAX POSITIONS THE ALLIANCE HAS TAKEN IN THE TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION OR EXPECTS TO TAKE ON AN INCOME TAX RETURN THE ALLIANCE RECOGNIZES THE TAX BENEFITS FROM UNCERTAIN INCOME TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAX AUTHORITIES THE ALLIANCE RECORDED NO LIABILITY FOR UNCERTAIN INCOME TAX POSITIONS FOR ANY OPEN TAX YEARS

Part XIII Supplemental Information (continued)										
Return Reference	Explanation									

Schedule D (Form 990) 2015

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Schedule I

DLN: 93493273005216

OMB No 1545-0047

2015

Open to Public Inspection

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

Department of the Treasury

(Form 990)

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.

Internal Revenue Service Employer identification number Name of the organization NATIONAL OILHEAT RESEARCH ALLIANCE 54-2024246 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

25

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Informa	tion. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.

Return Reference Explanation

PART I, LINE 2 GRANTEES SUBMIT AN ONLINE REQUEST FOR PAYMENT DIRECTLY TO THE THIRD PARTY VENDORS USED TO CONDUCT THE GRANT ACTIVITIES THE ONLINE REQUEST INCLUDES A DESCRIPTION, INDICATION, AND CERTIFICATION OF HOW THE GRANT REBATE FULFILLS THE REQUIREMENTS OF THE NORA PUBLIC LAW PRIOR TO PAYMENT, NORA MANAGEMENT REVIEWS THE REQUEST, ASK QUESTIONS AS APPROPRIATE, AND THEN APPROVES THE REQUEST, IF APPROPRIATE

Schedule I (Form 990) 2015

Additional Data

Software ID:

Software Version:

EIN: 54-2024246

Name: NATIONAL OILHEAT RESEARCH ALLIANCE

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	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONNECTICUT ENERGY MARKETERS ASSOCIATION 10 ALCAP RIDGE CROMWELL,CT 06416		501(C)(6)	579,932				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
MID-ATLANTIC PETROLEUM DISTRIBUTORS ASSOCIATION INC 3 CHURCH CIRCLE ANNAPOLIS,MD 21401		501(C)(6)	240,347				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
INDIANA PETROLEUM MARKETERS & CONVENIENCE STORE ASSOCIATION 600 EAST 96TH STREET SUITE 585 INDIANAPOLIS,IN 46240		501(C)(6)	13,883				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING

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	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
KENTUCKY PETROLEUM MARKETERS ASSOCIATION 2365 HARRODSBURG ROAD SUITE A325 LEXINGTON, KY 40504		501(C)(6)	102,409				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
MASSACHUSETTS ENERGY MARKETERS ASSOCIATION ONE VAN DE GRAAFF DRIVE SUITE 100 BURLINGTON, MA 01803		501(C)(6)	688,712				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
MAINE ENERGY MARKETERS ASSOCIATION 25 GREENWOOD ROAD BRUNSWICK,ME 04011		501(C)(6)	351,694				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			

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	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
MICHIGAN PETROLEUM ASSOCIATION 7521 WESTSHIRE DRIVE SUITE 200 LANSING,MI 48917		501(C)(6)	189,267				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
OIL HEAT COUNCIL OF NEW HAMPSHIRE INC PO BOX 3898 CONCORD,NH 033023898		501(C)(6)	299,192				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
FUEL MERCHANTS ASSOCIATION OF NEW JERSEY 21 COMMERCE DRIVE SUITE 202 CRANFORD,NJ 07016		501(C)(6)	528,932				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			

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	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
EMPIRE STATE ENERGY ASSOCIATION 56 CLIFTON COUNTRY ROAD SUITE 108 CLIFTON PARK,NY 12065		501(C)(6)	129,009				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
NEW YORK OIL HEATING ASSOCIATION INC 183 MADISON AVENUE SUITE 1403 NEW YORK, NY 10016		501(C)(6)	372,837				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
UPSTATE NEW YORK ENERGY ASSOCIATION 56 CLIFTON COUNTRY ROAD SUITE 108 CLIFTON PARK, NY 12065		501(C)(6)	291,561				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			

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	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
NORTH CAROLINA PETROLEUM & CONVENIENCE MARKETERS ASSOCIATION 7300 GLENWOOD AVENUE RALEIGH, NC 27612		501(C)(6)	196,109				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
HUDSON VALLEY OIL & ENERGY COUNCIL PO BOX 2550 NEWBURGH,NY 12550		501(C)(6)	171,583				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
OIL HEAT INSTITUTE OF LONG ISLAND 200 PARKWAY DR S SUITE 202 HAUPPAUGE,NY 11788		501(C)(6)	325,104				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			

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	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
OHIO PETROLEUM MARKETERS & CONVENIENCE STORE ASSOCIATION 17 S HIGH STREET SUITE 810 COLUMBUS, OH 43215		501(C)(6)	175,490				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
OREGON FUELS ASSOCIATION 707 SW WASHINGTON STREET SUITE 927 PORTLAND,OR 97205		501(C)(6)	11,308				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
PENNSYLVANIA PETROLEUM ASSOCIATION PO BOX 68 HIGHSPIRE,PA 170340068		501(C)(6)	838,895				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			

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	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	, ,=,	(h) Purpose of grant or assistance			
OIL HEAT INSTITUTE OF RHODE ISLAND 55 JOHN CLARKE ROAD UNIT A24 MIDDLETOWN,RI 02842		501(C)(6)	193,778				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
SOUTH CAROLINA PETROLEUM MARKETERS ASSOCIATION 1809 GADSDEN STREET COLUMBIA,SC 29201		501(C)(6)	30,135				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			
VERMONT FUEL DEALERS ASSOCIATION 963 PAINE TURNPIKE NORTH BERLIN,VT 05602		501(C)(6)	122,333				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING			

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	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIRGINIA PETROLEUM CONVENIENCE AND GROCERY ASSOCIATION 7275 GLEN FOREST DRIVE SUITE 204 RICHMOND,VA 23226		501(C)(6)	213,776				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
WASHINGTON OIL MARKETERS ASSOCIATION 9390 ORCHARD AVE SE PORT ORCHARD,WA 98366		501(C)(6)	37,832				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
WISCONSIN PETROLEUM MARKETERS & CONVENIENCE STORE ASSOCIATION 122 W WASHINGTON AVE SUITE 101 MADISON, WI 53703		501(C)(6)	115,921				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING

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	1 ` '	(f) Method of valuation (book, FMV, appraisal, other)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(h) Purpose of grant or assistance
IDAHO PETROLEUM MARKETERS & CONVENIENCE STORE ASSOCIATION PO BOX 984 BOISE,ID 83702		501(C)(6)	5,577				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING

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DLN: 93493273005216

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.

2015

Open to Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization NATIONAL OILHEAT RESEARCH ALLIANCE 54-2024246

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		l
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		ı
b	Any related organization?	6b		
	If "Yes," on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	_		

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 of W-2 and/or 1099-MISC compensation			(C) Retirement and	1 ' '	(E) Total of columns		
		Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990	
1 JOHN HUBERPRESIDENT	(i)	276,271	0	0	22,533	0	298,804	0	
	(ii)	0	0	0	0	0	0	0	

Schedule J (Form 990) 2015

Part III Supplemental Information

Provide the information, explanation, 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

Schedule J (Form 990) 2015

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2015

Open to Public Inspection

Supple

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

SCHEDULE 0

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
NATIONAL OILHEAT RESEARCH ALLIANCE

54-2024246

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ALLIANCE IS COMPOSED OF MEMBERS FROM (1) STATES WITH OILHEAT SALES IN EXCESS OF 32 MILLION GALLONS PER YEAR OR AT LEAST 24 STATES AND DISTRICTS, (2) RETAIL MARKETERS OF OILHEAT SALES, (3) WHOLESALE DISTRIBUTORS OF OILHEAT, AND (4) THE GENERAL PUBLIC NEW MEMBERS ARE APPROVED BY THE BOARD OF DIRECTORS
FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR PRIOR TO FILING IT IS NOT PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO ISSUANCE
FORM 990, PART VI, SECTION B, LINE 12C	THE ALLIANCE ENGAGES A CPA FIRM TO REVIEW AND PROCESS ALL PAYABLE TRANSACTIONS FOR ANY POT ENTIAL CONFLICTS OF INTEREST THE EXECUTIVE DIRECTOR ALSO MONITORS COMPLIANCE WITH THE CON FLICT OF INTEREST POLICY
FORM 990, PART VI, SECTION B, LINE 15A	COMPENSATION IS DETERMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS
FORM 990, PART VI, SECTION C, LINE 19	THE ALLIANCE'S DOCUMENTS ARE AVAILABLE TO THE PUBLIC ON IT'S WEBSITE OR BY CONTACTING THE ALLIANCE.
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR RELATED TO THE ORGANIZATIONS OVERSIGHT PR OCESS OR SELECTION PROCESS IN CONNECTION WITH ITS AUDIT COMMITTEE'S ASSUMED RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AC COUNTANT