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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493249011537 Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

2016

OMB No 1545-0047

Department of the Treasury

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

▶ Information about Form 990 and its instructions is at www IRS gov/form990

Open to Public

Interna	al Rever	nue Service						Inspection	
A F	or the	2016 c	alendar year, or tax year begin	ning 01-01-2016 , and ending	j 12-31-20	16			
B Che	eck if ap	pplicable	C Name of organization Electric Power Research Institute Inc			D Emplo	yer ident	ification number	
	ldress c	-							
	ime cha itial reti	_	% PAMELA J KEEFE Doing business as						
Fir	nal								
_	rn/term	ninated Freturn		all is not delivered to street address) R	loom/suite	E Teleph	one numbe	er .	
_		n pending	3420 Hillview Avenue			(650)	855-200	0	
		. ,	City or town, state or province, coun Palo Alto, CA 94304	try, and ZIP or foreign postal code					
			·			G Gross	receipts \$	903,588,208	
			F Name and address of principa Michael W Howard	lofficer	H(a	a) Is this a group	return for		
			3420 Hillview Avenue			subordinates?		□Yes 🗹 No	
			Palo Alto, CA 94304		— Н(1	 Are all subordin included? 	ates	☐ Yes ☐No	
I la	ıx-exem	npt status	☑ 501(c)(3) ☐ 501(c)() ◄ (insert no)		If "No," attach a	•	•	
J W	ebsite	e:► www	w epri com		H(e	c) Group exemption	n numbe	ir 🕨	
					11.77	(() 1072	Maria	(1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
K Fori	m of or	ganızatıon	✓ Corporation ☐ Trust ☐ Asso	ciation U Other ►	L Ye	ar of formation 1972	M State	e of legal domicile DC	
Pa	et T	Sumi	marv						
-		_	scribe the organization's mission of	most significant activities					
eu.			t research and development relati		of electricit	y for the benefit of	the publi	ıc (See Schedule O)	
<u>ိ</u>	-								
E	-								
) Ye	2	Check thi	s box ▶ ☐ If the organization dis	continued its operations or dispose	ed of more t	han 25% of its net	assets		
Ğ			of voting members of the governin				3	35	
≫ 5 ∪1	4	Number o	of independent voting members of	the governing body (Part VI, line	1b)		4	34	
Activities & Governance	5	Total num	nber of individuals employed in cal	endar year 2016 (Part V, line 2a)			5	1,048	
₹	6	Total num	nber of volunteers (estimate if nec		6	37			
AC	7a	Total unre	elated business revenue from Part	VIII, column (C), line 12			7a	46,231,746	
	Ь	Net unrel	ated business taxable income from	Form 990-T, line 34			7t	-1,113,298	
						Prior Year		Current Year	
Qı.	8	Contribut	ions and grants (Part VIII, line 1h)			0	80,000	
Rəvenue	9	Program :	service revenue (Part VIII, line 2g)		400,914	1,147	395,366,900	
λċ	10	Investme	nt income (Part VIII, column (A),	1,252	2,891	2,160,613			
ш	11	Other rev	enue (Part VIII, column (A), lines	4,821	,020	3,832,403			
	12	Total reve	enue—add lines 8 through 11 (mu	st equal Part VIII, column (A), line	12)	406,988	3,058	401,439,916	
	13	Grants ar	nd sımılar amounts paıd (Part IX, c	olumn (A), lines 1–3)		1,266	5,322	1,202,578	
	14	Benefits p	oald to or for members (Part IX, co		0	C			
\$ 2	15	Salaries,	other compensation, employee be	nefits (Part IX, column (A), lines 5	5-10)	147,318	3,487	157,754,750	
nse	16a	Professio	nal fundraising fees (Part IX, colu		0	O			
Expenses	Ь.	Total fundr	aising expenses (Part IX, column (D), li	ne 25) ▶ 0					
ā	17	Other exp	penses (Part IX, column (A), lines	11a-11d, 11f-24e)		235,516	5,093	224,153,548	
	18	Total exp	enses Add lines 13–17 (must equ	al Part IX, column (A), line 25)		384,100	,902	383,110,876	
	19	Revenue	less expenses Subtract line 18 fro	om line 12		22,887	⁷ ,156	18,329,040	
8 8					В	Seginning of Current	Year	End of Year	
and and							$-\!\!\!\!+\!\!\!\!\!-$		
Net Assets or Fund Balances			ets (Part X, line 16)		.	353,339	· -	371,687,046	
돌			ilities (Part X, line 26)		•	204,354		204,016,290	
		_	s or fund balances Subtract line 2	11 from line 20		148,984	1,907	167,670,756	
	rt II		ature Block erjury, I declare that I have exami	ned this return including accomp	anung seba	dulas and statemen		the best of my	
			f, it is true, correct, and complete						
any k	nowle	dge							
		*****	ĸ			2017-09-01			
Sign	1	Signati	ure of officer			Date			
Here		PAMELA	A J KEEFE SVP CFO & Treasurer						
			r print name and title						
			rınt/Type preparer's name	Preparer's signature	Date		PTIN		
Paid	d	ro	osemarie brown	rosemarie brown	2017-0	9-01 Check L If self-employed	P012780	//	
Preparer									
	Onl	1 5	ırm's address ► 101 CALIFORNIA STREE	ET SUITE 2700		Phone no (415) 986-390	0	
			SAN FRANCISCO, CA	94111					
May t	the IR	S discuss	this return with the preparer show	n above? (see instructions) .			. 🗹	Yes 🗌 No	
For F	aperv	work Red	duction Act Notice, see the sep	arate instructions.		Cat No 11282Y		Form 990 (2016	

Cat No 11282Y

Form **990** (2016)

Form	990 (2016)					Page 2
Par	t IIII Statement	of Program Servi	ce Accomplis	hments		
	Check If Sche	edule O contains a resp	onse or note to	any line in this Part III		🗹
1	Briefly describe the	organization's mission				
SEE :	SCHEDULE O					
2	Did the organization	undertake any signific	ant program ser	vices during the year wh	ich were not listed on	
	the prior Form 990 o	or 990-EZ?				☐ Yes 🗹 No
	If "Yes," describe the	ese new services on Sc	hedule O			
3	Did the organization					
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedu	ıle O			
4	Section 501(c)(3) ar		ons are required	to report the amount of	argest program services, as meas grants and allocations to others,	
4a	(Code) (Expenses \$	289,234,323	including grants of \$	1,202,578) (Revenue \$	396,421,791)
	See Additional Data					
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
4d	Other program serv	ices (Describe in Sched	lule O)			
	(Expenses \$	inc	cluding grants of	\$) (Revenue \$)
4e	Total program ser	vice expenses ►	289,234,3	23		
						Form 990 (2016)

or X as applicable

Section 501(c)(3) organizations.

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

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 🕏

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🕏 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

for public office? If "Yes," complete Schedule C, Part I 💆

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

3

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

14h

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Yes

Yes

Yes

Yes

Yes

Page 3

No

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No

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No

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Form **990** (2016)

30

31

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37

Part IV Checklist of Required Schedules (continued)

Yes

28b

28c

29

30

31

32

33

34

35a

35b

36

37

38

Yes

Yes

Yes

Yes

Yes

Yes

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Nο

Nο

No

Nο

No

Νo

Nο

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20a	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		
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	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
ь	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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 🔧 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3⁷ If "Yes," complete Schedule R, Part I

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

	990 (2016)				Page
Par					
	Check if Schedule O contains a response or note to any line in this Part V .		•		<u> </u>
1 2	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	J 360[Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b				
	Did the organization comply with backup withholding rules for reportable payments to vendor				
•	(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	1,048			
b	If at least one is reported on line 2a, did the organization file all required federal employment		2b	Yes	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see ins	<i>'</i>		V	
	Did the organization have unrelated business gross income of \$1,000 or more during the yea If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in S	-	3a 3b	Yes Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature	-	30	163	
Tu	financial account in a foreign country (such as a bank account, securities account, or other fir				
			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 Fine	and Assertate (FRAR)			
	See instructions for filling requirements for Filicely Form 114, Report of Foreign Bank and Filia	ancial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the ta	x year [?]	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt	ter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				
-			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such c	ontributions or gifts were			
_	not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and payor?	artly for goods and services	7a		No
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for wh				
	Form 82827		7c		No
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
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben	L	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organizati required?	ion file Form 8899 as	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the	organization file a Form	79		
•	1098-C?		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business ho				
	the year?		8		
Qa	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 personal trials and a section 1988.	son?	9b		
	Section 501(c)(7) organizations. Enter				
	Initiation fees and capital contributions included on Part VIII, line 12 10a	a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10th				
1	Section 501(c)(12) organizations. Enter	•			
а	Gross income from members or shareholders	a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				
	against amounts due of received from them?	<u>' </u>			
	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 12th	,			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state 2 Note. See additional information the organization must report on Schedule O	the instructions for	_		
h	Enter the amount of reserves the organization is required to maintain by the states in	1	13a		
,	which the organization is licensed to issue qualified health plans				
c	Enter the amount of reserves on hand				
-					No
4a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in S	-	14a		NO

01111	J J O (L						rage
Par		Governance, Management, and Disclosure For each "Yes" response to lines 2 ti 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedu			" respo	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction	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	35			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or r committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent	1b	34			
2		ny officer, director, trustee, or key employee have a family relationship or a busines r, director, trustee, or key employee?	s rela	tionship with any other	2		No
3		e organization delegate control over management duties customarily performed by cers, directors or trustees, or key employees to a management company or other p			3		No
4	Did th	e organization make any significant changes to its governing documents since the p	prior F	Form 990 was filed?	4		No
5	Did th	e organization become aware during the year of a significant diversion of the organ	ıızatıo	n's assets? .	5		No
6	Did th	e organization have members or stockholders?			6	Yes	
7a	Did th	e organization have members, stockholders, or other persons who had the power t	o elec	t or appoint one or more			
		pers of the governing body?			7a	Yes	
b		ny governance decisions of the organization reserved to (or subject to approval by) ns other than the governing body?	mem	bers, stockholders, or	7b	Yes	
8		e organization contemporaneously document the meetings held or written actions (llowing	undert	aken during the year by			
а	The go	overning body?			8a	Yes	
b	Each o	committee with authority to act on behalf of the governing body?			8b	Yes	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, who o ization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>		t be reached at the	9		No
Se	ction	B. Policies (This Section B requests information about policies not requi	red b	y the Internal Revenue	e Code		
						Yes	No
		e organization have local chapters, branches, or affiliates?	٠,٠		10a		No
	and br	s," did the organization have written policies and procedures governing the activitie ranches to ensure their operations are consistent with the organization's exempt pu	ırpose	s?	10b		
	form?		•	g body before filing the	11a	Yes	
		ibe in Schedule O the process, if any, used by the organization to review this Form	990				
		e organization have a written conflict of interest policy? If "No," go to line 13	•		12a	Yes	
	conflic				12b	Yes	
С	Sched	e organization regularly and consistently monitor and enforce compliance with the fulle O how this was done	policy •	? If "Yes," describe in • • •	12c	Yes	
13		e organization have a written whistleblower policy?	•		13	Yes	
14		e organization have a written document retention and destruction policy?			14	Yes	
15		e process for determining compensation of the following persons include a review and its comparability data, and contemporaneous substantiation of the deliberation and					
		rganization's CEO, Executive Director, or top management official			15a	Yes	
b		officers or key employees of the organization			15b	Yes	
		s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
	taxabl	e organization invest in, contribute assets to, or participate in a joint venture or single entity during the year?			16a	Yes	
b	ın join	s," did the organization follow a written policy or procedure requiring the organization to venture arrangements under applicable federal tax law, and take steps to safeguate with respect to such arrangements?	ard th				
					16b	Yes	
		C. Disclosure ne States with which a copy of this Form 990 is required to be filed▶					
17	LISCEN	e States with which a copy of this Form 990 is required to be filed. CA					
18		on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990 ble for public inspection Indicate how you made these available. Check all that app		990-T (501(c)(3)s only)			
		own website 🔲 Another's website 🗹 Upon request 🔲 Other (explain in Sc		•			
19	policy	ibe in Schedule O whether (and if so, how) the organization made its governing doc , and financial statements available to the public during the tax year					
20		the name, address, and telephone number of the person who possesses the organi ELA J KEEFE 3420 HILLVIEW AVENUE Palo Alto, CA 94304 (650) 855-2000	zation	's books and records			

compensated employees, and former such persons

(A)

Name and Title

(F)

Estimated

Form 990 (2	orm 990 (2016) Page 7					
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors					
	Check if Schedule O contains a response or note to any line in this Part VII					
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees					
year ● Lıst all	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount ation. Enter -0- in columns (D), (E), and (F) if no compensation was paid					
• List all o	of the organization's current key employees, if any See instructions for definition of "key employee "					
who receive	organization's five current highest compensated employees (other than an officer, director, trustee or key employee) In reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the In and any related organizations					
• List all o	of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000					

(C)

Position (do not check more

(D)

Reportable

(E)

Reportable

organiza List 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(B)

Average

hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation organization (Wany hours director/trustee) organizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensat employee Individual trustee or director Officer Former organizations MISC) related Institutional Trustee below dotted organizations employee line) See Additional Data Table

compensation from the organization ▶ 382

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

Page **8**

LELL	Section A. Officers, Direct	Jois, Hustees	J, KEY	<u>Linp</u> i	loye	<u>:es,</u>	, and	<u>ıng</u> ı	lest Compensate	3d Employees (tillueu)			
	(A) Name and Title	(B) Average hours per week (list any hours	than one box, unless person com is both an officer and a forgan director/trustee) organ						(D) Reportable compensation from the organization (W-		n I W-	amount of compens from t	Estimated amount of other compensation from the		
		for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensatemployee	Former	- 2/1099-MISC)	2/1099-MISC)	, [organization and related organizations			
See /	Additional Data Table														
		<u> </u> '	<u> </u>	<u> </u>	<u> </u>	_	<u> </u>	<u> </u>	<u> </u>		\dashv				
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										†	T				
	Sub-Total					<u> </u>	P				Ŧ				
	Total (add lines 1b and 1c)	<u> </u>					▶	_	8,736,092		0	;	2,226,834		
2	Total number of individuals (including of reportable compensation from the c			je liste	ed al	bove	e) who	rec (eived more than \$1	.00,000					
						_		_			_	Yes	No		
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule J</i>	· ·							-	employee on	3	.	No		
4	For any individual listed on line 1a, is organization and related organizations individual									n the					
5	Did any person listed on line 1a receiv	ve or accrue cor	mpensa	tion f	rom	any	• y unrel	ated	organization or ind	lividual for	4	Yes			
l	services rendered to the organization?	n?If "Yes," compl	lete Sch	edule	₃ J fo	r su	ıch per	rson	<u> </u>		5		No		
Se 	ection B. Independent Contractor Complete this table for your five higher from the organization Report compen	nest compensate									nper	nsation			
		(A) and business addre	ess		_	_		_		(B) cription of services	_	(C) Compen	nsation		
1 AVE	ricite de France, ENUE DU GENERAL DA GAULLE IART CEDEX, 0 92143								Contract R&	ίD		5,	5,613,360		
Studs SE-61	svik Nuclear AB, 11 82 NYKOPING PPING, 0 611 82	_		-					Contract R&	₄ D		4,	1,488,244		
South 241 R ATLAN	nern Company Services Inc, Ralph McGill Blvd NTA, GA 30308								Contract R&		_		,027,841		
7207	a Federal Services Inc, I IBM Drive RLOTTE, NC 28262			_		_		_	Contract R&	ιD		3,	3,293,109		
Westin 1000	inghouse Electric Co LLC, Westinghouse Drive IBERRY TOWNSHIP, PA 16066								Contract R&	Д		3,	3,220,188		
	Total number of independent contractor	re (including bu)	t not lin	outod	to th	2056	Justad	abo	va) who received m	ore than \$100 00	10.00	<i>i</i>			

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part \		(2016)	Davis										Page 9
Part	V L							D+ \/TIT					
		Check if Schedul	e O Contains	a respo	onse or no	ote to any	(/	A) evenue	Rela exe fun	B) ited or empt iction	(C) Unrelate busines revenue	ss	(D) Revenue excluded from tax under sections
	1:	a Federated campaign	ns	1a					rev	renue			512-514
nts nts		b Membership dues		1b									
irai 10 u		c Fundraising events		1c									
§. G Δπ		_											
a iii		 d Related organizatio e Government grants (co 		1d	<u> </u>								
S, (1e	<u> </u>								
ion		f All other contributions, and similar amounts no		1f		80,000							
Contributions, Gifts, Grants and Other Similar Amounts	!	above g Noncash contribution in lines 1a-1f \$	ons included			<u> </u>							
ang ang		n Total. Add lines 1a-1	f			>		80,000					
						Business	Code	00,000	T				
Ě	2 a	MEMBERSHIP FEE REVE	NUE				541900	196,9	71,828	188,518	,551	8,453,2	77
Program Service Revenue		SUPPLEMENTAL FUNDIN					541900	191,2	40,446	160,616	,603	30,623,8	43
- 3	c	BILLABLE SERVICES					541900	7,1	54,626			7,154,6	26
er v	d	1		_									
S	e			_	-								
grar	f	All other program se	rvice revenue	;	L								
ě	g	Total.Add lines 2a-2f	f		>	395,3	866,900						
		Investment income (ii			nterest. a	ind other	1						
	9	sımılar amounts) .				•		2,173,260	<u> </u>				2,173,260
		Income from investme		-	ond proce	eds >		0					
	5	Royalties				<u>.</u>		862,039	'				862,039
	٤.	Gross rents	(ı) Rea	l	(II) Pe	ersonal	-						
	Va	I GIOSS TEIRS	2,2	218,118									
	b	Less rental expenses	3	302,645									
	_	Rental income or	1.0	15,473		(7						
	•	(loss)	1,-	,13,473			Ί						
	c	Net rental income o	r (loss)			>		1,915,473					1,915,473
			(ı) Securi	ties	(11)	Other							
	7a	Gross amount from sales of	501,8	33,000									
		assets other than inventory											
	ŀ	Less cost or					-						
	•	other basis and sales expenses	501,8	33,000		12,647	7						
	c	Gain or (loss)				-12,647	7						
	c	l Net gaın or (loss) .			II.	>		-12,647	,				-12,647
	8 a	Gross income from fi		_									
Other Revenue		(not including \$ contributions reporte		of									
₹ Ş		See Part IV, line 18		a		0							
a		Less direct expense		b		0							
er		: Net income or (loss)		-	ents .	· •	_	0	1				
₽	9a	Gross income from g See Part IV, line 19		ies									
				а	ĺ	0							
	Ŀ	Less direct expense	s	b		0							
	c	Net income or (loss)	from gaming	activit	ies	>		0					
	10	Gross sales of invent returns and allowand											
		returns and anomane		a) 	0							
	Ŀ	Less cost of goods s	sold	b		0							
	c	Net income or (loss)	from sales of	: invent	ory	. •	_	0	,				
		Miscellaneous	Revenue		Busine	ss Code							
	11	aSALE OF R&D REPO	RTS			900099	9	707,230	1	707,230			
	Ŀ	OTHER INCOME				900099)	347,661		347,661			
	c	:											
	c	All other revenue .											
	€	Total. Add lines 11a	-11d			>		1,054,891			<u> </u>		
	12	Total revenue. See	Instructions							350 100 015	**	224 746	4,000,405
						*		401,439,916	'	350,190,045	46,	231,/46	4,938,125 Form 990 (2016)

Form 990 (2016) Page 10				
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	-	·	• •	
Check if Schedule O contains a response or note to any	line in this Part IX			<u> </u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,162,506	1,162,506		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	37,000	37,000		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	3,072	3,072		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	8,834,420		8,834,420	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	56,795	56,795		
7 Other salaries and wages	104,790,229	63,040,346	41,749,883	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	12,713,558	8,096,718	4,616,840	
9 Other employee benefits	23,847,738	15,187,598	8,660,140	
10 Payroll taxes	7,512,010	4,784,076	2,727,934	
11 Fees for services (non-employees)				
a Management	0			
b Legal	967,822	120,065	847,757	
c Accounting	352,932		352,932	
d Lobbying	12,186		12,186	
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	233,796		233,796	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,336,246		3,336,246	
12 Advertising and promotion	0			
13 Office expenses	14,383,109	11,828,426	2,554,683	
14 Information technology	4,443,496		4,443,496	
15 Royalties	0			
16 Occupancy	4,088,637	3,753,028	335,609	
17 Travel	15,372,447	11,736,376	3,636,071	_
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19 Conferences, conventions, and meetings	9,919,642	9,181,220	738,422	
20 Interest	218,192		218,192	
21 Payments to affiliates	6,464,166	1,288,919	5,175,247	
22 Depreciation, depletion, and amortization	10,512,488	9,649,589	862,899	
23 Insurance	989,649		989,649	
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 R&D EXPENSES	145,524,722	145,524,722		
b STAFFING	1,367,962		1,367,962	
c EQUIP RENTAL AND MAINTENANCE	1,057,171		1,057,171	
d ALL OTHER EXPENSES	4,908,885	3,783,867	1,125,018	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	383,110,876	289,234,323	93,876,553	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)				

basis Complete Part VI of Schedule D

Intangible assets

Grants payable . .

Deferred revenue . . .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities

Investments-publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) .

check here

and complete lines 30 through 34.

Total net assets or fund balances

Total liabilities and net assets/fund balances

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related See Part IV, line 11

Less accumulated depreciation

	Check if Schedule O contains a response or note to any line in this Part IX			<u> ⊔</u>
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	48,215,135	1	31,662,763
2	Savings and temporary cash investments	104,781,445	2	117,335,630
3	Pledges and grants receivable, net	0	3	0
4	Accounts receivable, net	35,201,271	4	46,361,873
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
6	Loans and other receivables from other disqualified persons (as defined under			

10a 10b 153,419,914

100,942,811

Page **11**

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167,670,756

167,670,756

371.687.046

Form **990** (2016)

5,107,710

52,477,103

116.142.544

2.599,423

371.687.046

64,075,163

126,471,335

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148.984.907

148,984,907

353.339.197

4.372.094

56.195.097

101.832.903

2.741.252

353,339,197

64,698,610

125,436,435

	4	Accounts receivable, net
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Pa II of Schedule L
sts	6 7	Loans and other receivables from other disqualified persons (as defined undesection $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net
Assets	8	Inventories for sale or use
Ø	9	Prepaid expenses and deferred charges
	10a	Land, buildings, and equipment cost or other

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spets	7
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- Liabilitie 23 24 26
- Escrow or custodial account liability Complete Part IV of Schedule D 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 . Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 . Fund Balances Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958),
- Assets or 30 31 32 Net 33 34

Form	990 (2016)				Page 12
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		401	,439,916
2	Total expenses (must equal Part IX, column (A), line 25)	2		383	,110,876
3	Revenue less expenses Subtract line 2 from line 1	3		18	,329,040
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		148	,984,907
5	Net unrealized gains (losses) on investments	5			356,809
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		167	,670,756
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				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 reviewed separate basis, consolidated basis, or both	on a			
	☐ 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 consolidated basis, or both	basıs,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle			

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

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3b

Yes

Yes (2016)

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 23-7175375

Name: Electric Power Research Institute Inc

Form 990 (2016)

Form 000 Port III Line 4

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 U S 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

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent, Contractors (D) (F) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours organizations and a director/trustee) organization from the for related (W-2/1099-(W- 2/1099organization and Officer Highest compen Former Individual truste or director key employee Institutional MISC) organizations MISC) related below dotted organizations line) Tru:

		€.	4413			isat ed				
PAT K VINCENT-COLLAWN CHAIR of as 04/2016	1 0	x		×				0	0	0
WARNER L BAXTER VICE CHAIR as of 04/2016	1 0	x		×				0	0	0
GIL C QUINIONES Chair thru 04/2016, Director	10	X		×				0	0	0
TERRY BASSHAM DIRECTOR as of 12/2016	1 0	х						0	0	0
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TERRY BASSHAM	1 0	
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DIRECTOR as of 12/2016	0 0	
REBECCA BLALOCK	1 0	
		X
DIRECTOR	0.0	

JOHN A BOHN

MARK B BONSALL

NICHOLAS A BROWN

JOSEPH P BRANNAN

DIRECTOR as of 12/2016

DIRECTOR

DIRECTOR

JIM BURKE

DIRECTOR

DIRECTOR through 04/2016

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and individu or direc Highest compensatemplovee Former Instituti MISC) organizations MISC) below dotted organizations employee line)

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DIRECTOR

SEOK CHO

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DIRECTOR

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DIRECTOR

DAVID C COEN

KENNETH W CORNEW

DIRECTOR as of 12/2016

THOEDORE F CRAVER JR

ANTHONY F EARLEY JR

DOUGLAS F ESAMANN

BENJAMIN G S FOWKE III

THAVA GOVENDER

KIMBERLY S GREENE

DIRECTOR through 04/2016

DIRECTOR through 04/2016

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Compensated Employees, and Independent, Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W- 2/1099organization and Highest compenso Former Individual trustee or director Institutional MISC) organizations MISC) related below dotted organizations employee line)

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THOMAS J HELLER	1 0	X				0	0	
DIRECTOR	0 0						,	
DUANE D HIGHLEY	1 0	>				0	0	

THOMAS J HELLER	1 0	v			0	
DIRECTOR	0 0	^				
DUANE D HIGHLEY	1 0					
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DIRECTOR	0 0					
CRAIG IVEY	1 0					
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PATRICIA L KAMPLING

DIRECTOR

DIRECTOR

JAMES H LASH

CONSTANCE H LAU

ALLEN L LEVERETT

JEFFREY J LYASH

DIRECTOR

DIRECTOR through 04/2016

DIRECTOR as of 12/2016

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

		. x			I U	1 ()	
DIRECTOR	0 0	,			,		
CRAIG IVEY	1 0						
DIRECTOR through 04/2016	0 0	X			0	0	
LISA D JOHNSON	1 0	×			0	0	

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LISA D JOHNSON	1 0					0	0	0
DIRECTOR	0 0	^					5	Ĭ
ROBERT W JONES	1 0	×				7,250	0	0
DIRECTOR	0.0	^				',250	Ĭ	l

Compensated Employees, and Independent Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual trustee or director Officer Highest compensatemployee Former Institutional MISC) MISC) organizations employee

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

	organizations below dotted line)	
ELLIOTT MAINZER	1 0	
DYDECTOR		
DIRECTOR	0 0	
MARK C MCCULLOUGH	1 0	

DIRECTOR

JOHN MOGG

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

ENRICO VIALE

DAVID G VICTOR

MARK C MCCULLOUGH

DIRECTOR as of 04/2016

DIRECTOR as of 12/2016

Chairman through 04/2016

PEDRO J PIZZARO

CHARLES G PARDEE

DENIS P O'BRIEN

BERNARD SALHA

WILLIAM H SPENCE

Compensated Employees, and Independent Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related any hours and a director/trustee) organization organizations (W-2/1099-(W-2/1099organization and Highest compensatemployee Former MISC) MISC)

(F)

Estimated

compensation

from the

related organizations

434,332

269,786

165.658

143,333

113,818

128,910

130,830

130,094

127,087

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

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1,639,404

731,263

535,476

492,292

466,089

469,293

458,910

426,982

460,409

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer
RODERICK K WEST	1 0	X		
DIRECTOR as of 12/2016	0.0	^		

MICHAEL W HOWARD

PRESIDENT AND CEO

SVP RESEARCH AND DEVELOPMENT

SVP ENERGY ENVIRON & EXT RELAT

VP GEN COUNSEL AND SECRETARY

VP MEMBER AND TECHNICAL SVCS

ARSHAD MANSOOR

PAMELA J KEEFE

ANDA RAY

SVP CFO AND TREASURER

CHARLES T ALLEY JR

ROBERT N CHAPMAN

ROBIN E MANNING

VP TRANSMISSION

MARK MCGRANAGHAN

VP DISTRIB AND ENERGY UTIL

SALVADOR A CASENTE JR

VP GENERATION

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation amount of other compensation week (list person is both an officer from the from related any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099l organization and

(F)

Estimated

compensation

from the

62,205

61,125

40,128

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

	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
CAROLYN R SHOCKLEY	40 0			x				512,478	0	142,83
VP PEOPLE AND PERFORMANCE	0.0			^				312,476	0	142,63
NEIL M WILMSHURST	40 0									

		ते र		sated			
CAROLYN R SHOCKLEY	40 0		v		512,478	0	142,832
VP PEOPLE AND PERFORMANCE	0.0		ĺ^		312,470	0	142,032
NEIL M WILMSHURST	40 0						
VP NUCLEAR & CHIEF NUC OFFICER	0 0		×		540,062	0	134,691
JANIS G MENDELSON	40 0					_	
ACCICTANT CORD CECRETARY			X		132,436	0	20,455

VP PEOPLE AND PERFORMANCE	0.0						
NEIL M WILMSHURST	40 0		,		540.063		124 601
VP NUCLEAR & CHIEF NUC OFFICER	0 0		^		540,062	0	134,691
JANIS G MENDELSON	40 0		v		132,436	0	20,455
ASSISTANT CORP SECRETARY	0.0		^		132,430	0	20,433
HENRY A COURTRIGHT	40 0			.,	502.240		50.050
EXECUTIVE ADVISOR				X	503,310	U	59,958

	0							
JANIS G MENDELSON	40 0		x			132,436	0	20,455
ASSISTANT CORP SECRETARY	0 0		,			132, 133	,	20,133
HENRY A COURTRIGHT	40 0			Х		503,310	0	59.958
EXECUTIVE ADVISOR	0 0			^		303,310	3	35,530
ROSA L YANG	40 0			.,				
		1		X	1	382.984	0	l 61.592

HENRY A COURTRIGHT	40 0			х	503.310	0	59,95
EXECUTIVE ADVISOR	0 0				000,010	,	03,31
ROSA L YANG	40 0			Х	382,984	0	61,59
SENIOR TECHNICAL ADVISOR	0.0			^	302,501	,	01,31
	40.0						

Χ

Х

321,627

303,457

EXECUTIVE ADVISOR	0.0						
ROSA L YANG	40 0						
CENTOR TECHNICAL ARVICOR				X	382,984	0	
SENIOR TECHNICAL ADVISOR	0.0						
	40.0						

ROSA L YANG	40 0			Х	382.984	0	
SENIOR TECHNICAL ADVISOR	0 0				332,33		
ANDREW J PHILLIPS	40 0			x	332,120	0	

0.0 40 0

00

......

DIRECTOR RESEARCH & DEVELOP

DIRECTOR RESEARCH & DEVELOP

DIRECTOR RESEARCH & DEVELOP

KURT W EDSINGER

SEAN P BUSHART

efile	GR/	APHIC prii	nt - DO NOT PROC	ESS	As Filed Data -			DLN: 9	3493249011537				
SCI	IED	ULE A	Puh	lic C	harity Statu	s and Pub	olic Supp	ort	OMB No 1545-0047				
(For	m 990			the org	ganization is a secti	ion 501 (c)(3) c	organization o		2016				
990E	(Z)			•		990 or Form 990-EZ.							
		the Treasury	► Information	ı about	Schedule A (Form			ıctions is at	Open to Public Inspection				
Name	of th	ue Service ne organiza			www.ns.ge	<u> </u>		Employer identific	<u></u>				
lectri	Power	Research Inst	atute Inc					23-7175375					
Pa			for Public Charity					See instructions.					
	rganız		private foundation be		•	•	,						
1		•	onvention of churches	•				(A)(1).					
2			scribed in section 17			·	• • • • • • • • • • • • • • • • • • • •						
3			or a cooperative hospit		-								
4		name, city,	esearch organization o and state			-			·				
5			ation operated for the [iv). (Complete Part I		of a college or univer	sity owned or op	erated by a gov	ernmental unit descri	bed in section 170				
6		A federal, s	tate, or local governm	ent or o	governmental unit de	scribed in sectio	on 170(b)(1)(A	۱)(v).					
7			ation that normally red O(b)(1)(A)(vi). (Con			s support from a	governmental u	ınıt or from the gener	al public described in				
8		A communi	ty trust described in s	ection	170(b)(1)(A)(vi)	Complete Part I	I)						
9			ural research organiza ant college of agricult						ege or university or a				
LO	✓	from activit	ation that normally rec les related to its exem income and unrelated see section 509(a)(2	npt func I busine	tions—subject to cert ss taxable income (le	ain exceptions, a	and (2) no more	than 331/3% of its su	pport from gross				
l 1			ation organized and op	- '	•	public safety S	ee section 509	(a)(4).					
l 2		more public	ation organized and op ly supported organiza through 12d that des	tions de	escribed in section 5	09(a)(1) or sec	tion 509(a)(2). See section 509(a					
а		Type I. A so	supporting organization on(s) the power to regular IV, Sections A a	n opera	ted, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by					
b		Type II. A manageme	supporting organization of the supporting or plete Part IV, Section	on supe rganizat	tion vested in the san								
С		Type III f	unctionally integrate organization(s) (see in	ed. A su	ipporting organization				ted with, its				
d		Type III n functionally	on-functionally inte integrated The organ You must comple	grated nization	A supporting organi generally must satisf	zation operated i y a distribution i	ın connection wi	th its supported organ					
e		Check this	box if the organization or Type III non-functi	receive	ed a written determin	ation from the II	RS that it is a Ty	pe I, Type II, Type II	I functionally				
f	Enter		of supported organiza	•	3 24664.41119								
g			ing information about										
(i) N	ame of	f supported o	organization (ii)E.	IN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
						Yes	No						
				$\overline{}$									
Total								Schedule A (Form 9					

Sch	edule A (Form 990 or 990-EZ) 2016						Page 2
P	art III Support Schedule for (Complete only if you che III. If the organization fa	ecked the box o	n line 5, 7, 8, o	r 9 of Part I or	if the organization	on failed to quali	
	ection A. Public Support	no to quanty un	441 1110 10313 113	tea below, pied	se complete i al		
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f) Total
	(or fiscal year beginning in) ▶	(a)2012	(0)2013	(0)2014	(4)2013	(e)2010	(T)TOtal
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						,
	organization's benefit and either paid						
3	to or expended on its behalf The value of services or facilities						
•	furnished by a governmental unit to						
	the organization without charge						
4	Total. 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						
6	shown on line 11, column (f) Public support. Subtract line 5 from						
	line 4						
S	ection B. Total Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	. ,	, ,	, ,	 ``	. ,	
8	Gross income from interest,				+		
٠	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						
11	(Explain in Part VI) Total support. Add lines 7 through						
	10						
12	Gross receipts from related activities, e	tc (see instruction	ns)			12	
13	First five years. If the Form 990 is for	r the organization	's first, second, th	ird, fourth, or fifth	h tax year as a sec	tion 501(c)(3) org	anızatıon,
	check this box and stop here					▶ [
S	ection C. Computation of Public						
14	Public support percentage for 2016 (lin	e 6, column (f) dı	vided by line 11,	column (f))		14	
15	Public support percentage for 2015 Sch	nedule A, Part II, l	ine 14			15	
16a	33 1/3% support test—2016. If the	organization did r	ot check the box	on line 13, and lir	ne 14 is 33 1/3% o	r more, check this	box
	and stop here. The organization qualif						ightharpoons
Ŀ					and line 15 is 33 i	1/3% or more, chec	ck this
	box and stop here. The organization	qualifies as a pub	licly supported or	ganization			▶ □
17 a	10%-facts-and-circumstances test						
	is 10% or more, and if the organization						
	in Part VI how the organization meets t	the "facts-and-circ	cumstances" test	The organization	qualifies as a publ	icly supported	. \square
	organization	2045 1511			12.46.46	47 11	▶ □
b	10%-facts-and-circumstances tes 15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization						
	supported organization			. 5-	,	. ,	►□
18		n did not check a	box on line 13, 1	6a, 16b, 17a, or 1	L7b, check this box	k and see	
	instructions		,	. ,	·		ightharpoons
					Schadu	le A (Form 990 o	r 990-F7) 2016

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year **(e)**2016 (a)2012 (b)2013 (c)2014 (d)2015 (f)Total (or fiscal year beginning in) ▶ Gifts, grants, contributions, and 80,000 80,000 membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in 379,265,089 376,748,690 383,281,829 400,914,147 395,366,900 1,935,576,655 any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or n business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 379,265,089 1,935,656,655 Total. Add lines 1 through 5

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

c Add lines 7a and 7b

Section B. Total Support Calendar year

> Amounts from line 6 Gross income from interest,

Add lines 10a and 10b

Net income from unrelated

assets (Explain in Part VI)

check this box and stop here

11, and 12)

business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital

Total support. (Add lines 9, 10c,

Section C. Computation of Public Support Percentage

Public support percentage from 2015 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

Investment income percentage from 2015 Schedule A, Part III, line 17

(or fiscal year beginning in) ▶

dividends, payments received on

securities loans, rents, royalties

and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30,

from line 6)

1975

10a

11

13

14

15

16

17

20

persons

Amounts included on lines 1, 2, and 3 received from disqualified

Public support. (Subtract line 7c

111,578,750

(a)2012

379,265,089

4,425,618

1,716,193

385,406,900

Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))

Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))

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

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

111,578,750

124,546,693

376,748,690

124,546,693

376,748,690

4,548,482

(b)2013

383,281,829

113,035,690

113,035,690

383,281,829

4,054,284

4,054,284

1,439,473

388,775,586

(c)2014

400,914,147

123,038,890

123,038,890

400,914,147

4,554,780

4,554,780

1,823,326

407,292,253

(d)2015

395,446,900

137,210,338

137,210,338

395,446,900

5,253,417

5,253,417

1,054,891

401,755,208

15

16

17

(e)2016

609,410,361 609,410,361 1,326,246,294

(f)Total

1,935,656,655

22,836,581

22,836,581

6,958,577

1,965,451,813

67 478 %

67 682 %

1 162 %

1 196 %

ightharpoons

Schedule A (Form 990 or 990-EZ) 2016

ightharpoons

4,425,618 4,548,482

924,694

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

382,221,866

19a 331/3% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

b 33 1/3% support tests - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is

Schedule A (Form 990 or 990-EZ) 2016

6

7

8

10a

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations Yes No

Page 4

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

_	If "No," describe in Part VI 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 Part VI how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
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 Part VI when and how the organization made the		

эa	Did the organization have a supported organization described in section 301(c)(4), (5), or (6), it res, answer (b) and (c)		
	below	3a	
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 Part VI 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 Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		

	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI 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 Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
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 by or in connection with its supported organizations		
	Supervised by or in connection with its supported organizations		

	etermination			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	on? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4b		
С	supervised 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	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
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 by or in connection with its supported organizations	4b	
С	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	4c	
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	5a	

U	bld the organization have ditinate 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 by or in connection with its supported organizations	4b	
С	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	4c	
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	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the		
	organization's organizing document?	5b	

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	Supporting Organizations (continued)			
			Yes	No
11	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		
b	A family member of a person described in (a) above?	11b		
С	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		
	stion B. Tuno I Summouting Ouspuingtions			
36	ction 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		1.03	""
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa			
	VI 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 Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
	skien C. Tune II Cumpostine Opposite tions			
Se	ction 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	163	110
-	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	"		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
C -	skion D. All Tuno III Sunnouting Ouspuinskians			
36	ction 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		1.03	"
	tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of t			
	Form 990 that was most recently filed as of the date of notification, and (iii) 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 Part VI 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 ta			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
Se	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions)		
а	The organization satisfied the Activities Test. Complete line 2 below	•		
ь	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (s	ee instri	ictions)	١
_	The organization supported a governmental entity bescribe in lare variow you supported a government entity (s	oc mon	100113)	,
2	Activities Test Answer (a) and (b) below.		1	
			Yes	No
а	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 Part VI identify those supported			
	organizations and explain 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		
b	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 Part VI 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.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the organization have the power to regularly appoint or elect a majority of the officers, directors, and the organization have the power to require the organization of the organization have the organization of the	of 3a		
	the supported organizations? Provide details in Part VI.			
b	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			
	Supported organizations: It res, describe in Fart #1. the fole played by the organization in this regard	3b	1	1

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	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		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	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	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

Schedule A (Form 990 or 990-EZ) (2016)

c Excess from 2014.

d Excess from 2015.

e Excess from 2016. . . .

Schedule A (F	Form 990 or 990-EZ) 20	D16 Pag	ge 8
Part VI	lines 1, 2, 3b, 3c, 4 line 1; Part IV, Sec Section B, line 1e;	ormation. Ations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, Ab, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, Abion D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Abion Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this Abional Information. (See instructions).	,
		Facts And Circumstances Test	
990 Sched	ule A, Supplement	al Information	
Ret	urn Reference	Explanation	
	CHEDULE FOR IONS DESCRIBED IN 9(A)(2)	SCHEDULE A, PART III EPRI REPORTS ITS MEMBERSHIP DUES AS GROSS RECEIPTS FROM SERVICES PER FORMED THESE PAYMENTS ARE MADE IN CONNNECTION WITH THE PERFORMANCE OF TAX EXEMPT SCIENT IC RESEARCH IN THE PUBLIC INTEREST, WHICH BY DEFINITION ALSO INCIDENTALLY BENEFITS EPRI ME MBERS WHO MAY IN CERTAIN CIRCUMSTANCES HAVE A DIRECT AND IMMEDIATE BENEFIT FROM SUCH RESEA RCH 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 SE ION 1 509(A)-3(G)(2)	

90 Schedule A, Supplemental Information					
Return Reference	Explanation				
	SCHEDULE A, PART III, LINE 12 OTHER INCOME INCLUDES INCOME FROM PREVIOUSLY PUBLISHED SCIE NTIFIC RESEARCH REPORTS AND SOFTWARE AVAILABLE FOR SALE TO THE GENERAL PUBLIC AND INCOME F ROM RELATED SCIENTIFIC RESEARCH ACTIVITIES CONDUCTED BY EPRI IN THE PUBLIC INTEREST				

Schedule A (Form 990 or 990-EZ) 2016

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

Employer identification number

OMB No 1545-0047

DLN: 93493249011537

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Electric Power Research Institute Inc

EZ)

SCHEDULE C (Form 990 or 990-

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

23-7175375 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV 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 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes □ No h If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization fileForm 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-3 5

Grassroots ceiling amount 1.500.000 (150% of line 2d, column (e))

Schedule C (Form 990 or 990-EZ) 2016

Grassroots lobbying expenditures

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

Yes

No

Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? 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)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 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). 2a Current year 2b Carryover from last year c Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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) Part 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

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

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

SCHEDULE D

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

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.

DLN: 93493249011537 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

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

► Attach to Form 990.

Name of the organization **Employer identification number** Electric Power Research Institute Inc 23-7175375 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 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes 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? □ No Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or 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 2 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) 20 C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 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 ▶ 5 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 year 6 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)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2016

d Equipment . .

e Other .

Sche	edule D ((Form 990) 2016										Page 2
Par	t III	Organizations Ma	aintaining Coll	ections of <i>i</i>	Art, Histo	rical T	reasu	res, or	Other	Similar A	ssets (cor	ntinued)
3		the organization's acq (check all that apply)	uisition, accession	, and other re	cords, chec	k any of	the fol	llowing t	hat are a	significant i	use of its c	ollection
а		Public exhibition			d		Loan	or excha	ange prog	rams		
b		Scholarly research			е		Other					
c		Preservation for future	e generations									
4	Provid Part X	le a description of the	organization's coll	ections and ex	kplain how t	hey furt	her the	organız	ation's ex	kempt purpo	ose in	
5		g the year, did the org s to be sold to raise fur								ılar	☐ Yes	□ No
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			on Form 99	90, Part	IV, lır	ne 9, or	reporte	ed an amou	unt on For	rm 990, Part
1 a		organization an agent ed on Form 990, Part 1		n or other int	ermediary f	or contri	butions	s or othe	er assets	not	п	П
	meraa	ca 3111 31111 330, 1 are									∐ Yes	∐ No
b	If "Ye	s," explain the arrange	ement in Part XIII	and complete	the following	ng table				Α	mount	
c		ning balance		·		_			1c			
d	Addıtı	ons during the year						-	1d			
е	Distrib	outions during the year	r					-	1e			
f	Ending	g balance						-	1f			
2 a	Did th	- ie organization include	an amount on For	m 990, Part >	K, line 21, fo	or escrov	v or cus	stodial a	ccount lia	ıbılıty?	☐ Yes	
b	76 "V-	- "	Doub VIII	Ch 1. h 4	: 41	_*			J D)	/111		
		s," explain the arrange						·				
Pa	rt V	Endowment Fund	us. Complete ii	(a)Current y		Prior yea				(d)Three year		Four years back
1a	Beainni	ng of year balance .		(a)current y	ear (B	Ji nor yea	<u> </u>	(C) I WO Y	surs buck	(d) Times yes	ars back (e	eyrodi yedis back
	-	utions										
		estment earnings, gair	ns, and losses									
		or scholarships	· .									
	Other e	expenditures for facilitie	ŀ									
f	Adminis	strative expenses .										-
g	End of	year balance										
2	Provid	le the estimated perce	ı ntage of the curre	nt vear end b	alance (line	1a. colu	mn (a)	ı) held a	s		<u> </u>	
– a		designated or quasi-e	=	,		19, 00.0	(-)	,,	-			
b		anent endowment >										
c		orarily restricted endov	vment ▶									
·		ercentages on lines 2a		d equal 100%	,							
3а	Are th	nere endowment funds ization by		•		nat are h	eld and	d admını	stered fo	r the		Yes No
	(i) un	related organizations									3a(i	i)
		elated organizations .					•				3a(i	-
b		s" on 3a(II), are the re	-								3b	
4		ibe in Part XIII the inte			endowmen	it funds						
Pa	rt VI	Land, Buildings, Complete if the ord			n Form QQ	N Part	IV lin	د11 م	See For	n 990 Dar	rt X line '	10
	Descri	ption of property	(a) Cost or other	er basis (b) Cost or oth					epreciation		Book value
	,	. , ,	(ınvestmer	nt)								
1a	Land					2,2	93,299					2,293,299
	Building					-	12,750			47,312,828		20,999,922
	-	old improvements					63,675			5,124,695		6,338,980

30,513,331

40,836,859

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

4,681,405

18,163,497

52,477,103

25,831,926

22,673,362

Part VII	Investments—Other Securities. Complete if the See Form 990, Part X, line 12.			
	(a) Description of security or category (including name of security)	(b)Book value		d of valuation f-year market value
-	derivatives			
3)Other	RM INVESTMENTS	114,372,052		F
) INVESTM	IENT IN SUBSIDIARIES	1,769,410		F
	IENT IN OTHER COMPANIES	1,082		F
)				
·)				
)				
)				
i)				
1)				
otal. (Columi art VIII	n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related. Complete if	116,142,544 the organization answe	red 'Yes' on Form 9	90, Part IV, line 11c.
	See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Metho	od of valuation
	(a) bescription of investment	(b) Book value		f-year market value
)				
.)				
<u>, </u>				
.)				
)				
)				
)				
;) 				
')				
otal. (Columi Part IX	n (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answered	d 'Yes' on Form 990, Part I\	/, line 11d See Form	990, Part X, line 15
.)	(a) Description			(b) Book value
·· <i>)</i> !)				
)				
)				
)				
)				
)				
)				
	The second Second Second Co. Port V. cel (R) line 15			
	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a		990, Part IV, line 1	▶ 1e or 11f.
otal. (Colu. Part X		answered 'Yes' on Form	· · · · · · · · · · · · · · · · · · ·	
otal. (Colu. Part X	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25.		value	
Part X Pederal (Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes		value 0	
Part X) Federal	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes OST RETIREMENT BENEFITS		0 9,478,870	
Part X Federal CRUED PC	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes OST RETIREMENT BENEFITS 6-TERM LIABILITIES		9,478,870 2,199,370	
Part X Federal CRUED PC THER LONG	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes OST RETIREMENT BENEFITS		0 9,478,870	
Part X) Federal CCRUED PC THER LONG	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes OST RETIREMENT BENEFITS 6-TERM LIABILITIES		9,478,870 2,199,370	
) Federal CCRUED PC THER LONG TERCO PA)	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes OST RETIREMENT BENEFITS 6-TERM LIABILITIES		9,478,870 2,199,370	
Part X) Federal CCRUED PO	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes OST RETIREMENT BENEFITS 6-TERM LIABILITIES		9,478,870 2,199,370	
Part X) Federal CCRUED PC THER LONG TERCO PA))	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes OST RETIREMENT BENEFITS 6-TERM LIABILITIES		9,478,870 2,199,370	
Part X) Federal CCRUED PC THER LONG TERCO PA))	Other Liabilities. Complete if the organization at See Form 990, Part X, line 25. (a) Description of liability income taxes OST RETIREMENT BENEFITS 6-TERM LIABILITIES		9,478,870 2,199,370	

1

2

b

c

d

е

3

Schedule D (Form 990) 2016

2e

3

Page 4

Donated services and use of facilities . .

Other (Describe in Part XIII)

Add lines 2a through 2d

Subtract line 2e from line 1 .

Recoveries of prior year grants

5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12
Part	Reconciliation of Expenses per Audited Finan Complete if the organization answered
1	Total expenses and losses per audited financial statements
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
c	Other losses
d	Other (Describe in Part XIII)
e	Add lines 2a through 2d
3	Subtract line 2e from line 1
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
b	Other (Describe in Part XIII)
C	Add lines 4a and 4b
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1
Par	XIII Supplemental Information
Prov	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a an

Total revenue, gains, and other support per audited financial statements

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

3	Subtract line Ze from line 1 .		
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1	
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIII) .		4b
c	Add lines 4a and 4b		
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)	
Par		i <mark>on of Expenses per Audited Financi</mark> Complete if the organization answered 'Y	
1	Total expenses and losses per au	dited financial statements	
2	Amounts included on line 1 but n	ot on Form 990, Part IX, line 25	
а	Donated services and use of facili	ties	2a
b	Prior year adjustments		2b
С	Other losses		2c
d	Other (Describe in Part XIII) .		2d
е	Add lines 2a through 2d		
3	Subtract line ${f 2e}$ from line ${f 1}$.		
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:	
а	Investment expenses not include	d on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIII) .		4b
c	Add lines 4a and 4b		
5	Total expenses Add lines 3 and 4	c. (This must equal Form 990, Part I, line 18)
Pai	t XIII Supplemental Info	ormation	
		art II, lines 3, 5, and 9, Part III, lines 1a and nes 2d and 4b, and Part XII, lines 2d and 4b	
	Return Reference		Explanation
See A	Additional Data Table		

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2a

2b

2c

2d

4c 5 s With Expenses per Return. 90, Part IV, line 12a. 2e 3 4c 5 nis part to provide any addit

_	
2e	
3	
4c	
5	
de any	additional information
Sched	ule D (Form 990) 201!

Page 5		Schedule D (Form 990) 2015		
	tal Information <i>(continued)</i>	Part XIII Supplemental Info		
xplanation		Return Reference		

Schedule D (Form 990) 2016

Additional Data

Software ID: Software Version:

EIN: 23-7175375

Name: Electric Power Research Institute Inc.

Supplemental Information

Return Reference

Explanation

Y RECORDED AND A FOOTNOTE FOR ASC740 WAS NOT REQUIRED

FIN 48 (ASC 740) FOOTNOTE SCHEDULE D, PART X, LINE 2 EPRI ADOPTED FIN 48 (CODIFIED AS ASC 740) IN 2009 THE ADOPTIO N IN 2009 DID NOT HAVE A MATERIAL IMPACT ON THE EPRI FINANCIAL STATEMENTS. THERE WAS NO CH

ANGE IN 2015 OR 2016 AS A RESULT, THE FINANCIAL STATEMENTS DO NOT HAVE AN ASC740 LIABILIT

efile GRAPHIC print	- DO NOT PROCESS	As Filed Data	-	DLN	: 93493249011537		
SCHEDULE F (Form 990)	Statement o	of Activities	Outside the Un	ited States	OMB No 1545-0047		
(1 31111 333)	► Comp	plete if the organization	on answered "Yes" to Form	990,	2016		
			14b, 15, or 16.				
Department of the Treasury Internal Revenue Service Attach to Form 990. ► See separate instructions. Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.					Open to Public Inspection		
Name of the organization Electric Power Research Ins	.h.hh. T.			Employer ide	ntification number		
Electric Power Research Ins	stitute Inc			23-7175375			
	formation on Activit Part IV, line 14b.	ies Outside the l	Jnited States. Comple	ete if the organization a	answered "Yes" to		
other assistance, the to award the grants	other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No. For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance						
3 Activites per Region	(The following Part I, line	e 3 table can be dupl	cated if additional space is	needed)			
(a) Region	(b) Number offices in th region			(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	a (f) Total expenditures for and investments in region		
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continuation Part I c Totals (add lines 3a a	and 3b)			No 50082W Schedu	74,210,837 74,210,837		

(4) (5) (6)

(7) (8) (9)

(10) (11) (12) (13) (14) (15) (16)

(17) (18) Page **3**

Schedule F (Form 990) 2016

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 Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Type of grant or assistance (b) Region (a) Description

(a) Type of grant of assistance	(D) Region	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)							
(2)	•						

			assistance	assistance	(book, FMV, appraisal, other)
(1)					
(2)					

(1)				
(2)				
(3)				

Sche	dule F (Form 990) 2016		Page 4
Par	t 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)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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)		
	2.1.3.1. decidens for 1 5.1.1.5 GS2G and GS2G Try	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Corporations (see Instructions for Form 5471)	\square Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Instructions for Form 6003)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713)	∐ Yes	✓ No

chedule F (Form 990) 2016 Page				
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (account amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (account method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part any additional information (see instructions).				
Return Reference	Explanation			
rtotam rtororonoo	Explanation			

Additional Data

East Asia and the Pacific

Greenland)

Europe (Including Iceland and

Software ID: Software Version:

EIN: 23-7175375

Name: Electric Power Research Institute Inc

Form 990 Schedule F Part I - Activities Outside Th	e 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)	describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the			Program Services	R&D Project	317

Program Services

Program Services

R&D Project

R&D Project

3,244,719

16,225,941

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Middle Fast and North Africa Program Services R&D Project 31.743 North America Program Services R&D Project 3,777,469 South America Program Services R&D Project 49,482

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) South Asia R&D Project Program Services 13.882 Sub-Saharan Africa Program Services R&D Project 27,732 East Asia and the Pacific Unrelated Trade or 358,006 Business

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) Europe (Including Iceland and Unrelated Trade or 620,404 Greenland) **IBusiness** North America Unrelated Trade or 137.689 lBusiness South America Unrelated Trade or 493 Business

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) South Asia Unrelated Trade or 142 Business Sub-Saharan Africa Unrelated Trade or 2.899 lBusiness East Asia and the Pacific 7,940,952 Investments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to reaion recipients located in the region) Europe (Including Iceland and 23,946,209 Investments Greenland) North America 17,832,758 Investments

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -					DLN: 93493249011537
Schedule I (Form 990) Department of the Treasury	Co	Governments mplete if the organiza	Other Assistand and Individuals ation answered "Yes," o Attach to Form le I (Form 990) and its	s in the Unite on Form 990, Part IV 990.	d States , line 21 or 22.		OMB No 1545-0047 2016 Open to Public Inspection
Internal Revenue Service Name of the organization						Employer idei	ntification number
Electric Power Research Institut	e Inc					23-7175375	
Part I General Inform	nation on Grants	and Assistance				'	
			the grants or assistance,		for the grants or assistance	e, and	☑ Yes ☐ No
2 Describe in Part IV the or	ganızatıon's procedur	es for monitoring the us	se of grant funds in the Ur	ited States			
		nestic Organizations a can be duplicated if add		nts. Complete if the or	rganızatıon answered "Yes"	on Form 990, Part IV,	line 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description o non-cash assistani	
2 Enter total number of sec	tion 501(c)(3) and go	overnment organizations	s listed in the line 1 table .				7
3 Enter total number of oth	er organizations liste	d in the line 1 table .				•	5
For Paperwork Reduction Act Not	ice, see the Instructio	ns for Form 990.		Cat No 50055	SP.		Schedule I (Form 990) 2016

Schedule I (Form 990) 2016					Page 2
			anization answered "Yes"	on Form 990, Part IV, line 22	
(a) Type of grant or assistance	d if additional space is needer (b) Number of recipients		(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) PARTICIPATION ON ADVISORY CO	.OUNCIL	9 20,000			
(2) PRESENTATION AT ENV ADVISORY M	1EETING	1,000			
(3) PRESENTATION AT PROGRAM 55 MEE	ETING	1 500			
(4) PARTICIPATION ON COMMITTEE		3 15,000			
(5) PRESENTATION AT PROGRAM 195 ME	EETING	1 500			
(5)					
(6)			1		
(7)			1		
Part IV Supplemental Info	ormation. Provide the	information required in '	Part I, line 2, Part III	I, column (b), and any other ad	dditional information.
Return Reference Ex	xplanation				
USE OF GRANT FUNDS IN THE ma	ade only to entities that are	e well known to EPRI and aft	fter appropriate due dilige		n and furthers EPRIs charitable purpose Grants are ranted funds are enumerated to the grantee and EPRI the granted funds

Additional Data

5000 FORBES AVENUE PITTSBURGH, PA 15213 **ENERGY STORAGE**

ASSOCIATION 1155 15TH ST NW WASHINGTON, DC 20005

Software ID: **Software Version:**

EIN: 23-7175375 Name: Electric Power Research Institute Inc

7,500

Form 990,Schedule 1, Part	11, Grants and	Otner Assistance to	o Domestic Organiza	tions and Domest	ic Governments.	
(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	

or government				assistance	other)	
CARNEGIE MELLON UNIVERSITY	25-0969449	501(c)(3)	255,000			

501(c)(6)

(g) Description of

non-cash assistance

(h) Purpose of grant

or assistance

CONTRIBUTION

CONTRIBUTION

if applicable grant (book, FMV, appraisal, cash organization

52-1984047

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-1624158 501(c)(3) 10.000 ROCKEFELLER UNIVERSITY CONTRIBUTION 1230 YORK AVENUE

1230 YORK AVENUE
NEW YORK, NY 10065

TEXAS A&M UNIVERSITY 74-1974733 501(c)(3) 12,000
400 HARVEY MITCHELL

CONTRIBUTION

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

PARKWAY

COLLEGE STATION, TX 77845

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) THE BIOFI ECTROMAGNETICS 51-0229774 501(c)(3) 10.000 CONTRIBUTION SOCIETY 7101 GUILFORD DRIVE FREDERICK, MD 21704 THE UNIVERSITY OF 94-6002123 501(c)(3) 15.000 CONTRIBUTION

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

CALIFORNIA BERKELEY 2195 HEARST AVENUE BERKELEY, CA 94720

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (e) Amount of non-(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) THE UNIV OF CALIFORNIA LOS 95-6006143 115 50.000 CONTRIBUTION ANGELES. 405 HILGARD AVENUE LOS ANGELES, CA 90095 THE UNIVERSITY OF NORTH 56-6001393 115 90.000 CONTRIBUTION CAROLINA

9201 UNIVERSITY BLVD CHARLOTTE, NC 28223

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government assistance other) THE UNIVERSITY OF 62-6001636 170(c) 81.256 CONTRIBUTION TENNESSEE 201 ANDY HOLT TOWER KNOXVILLE, TN 37996 THE UNIVERSITY OF 95-2872494 115 340.750 CONTRIBUTION CALIFORNIA SAN DIEGO 9500 GILMAN DRIVE

LA JOLLA, CA 92093

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance UNIVERISTY OF KENTUCKY 61-6033693 501(c)(3) 200,000 CONTRIBUTION RESEARCH CONTRIBUTION

109 KINKEAD HALL LEXINGTON, KY 40506 UNIVERSITY OF TEXAS AT 74-6000203 501(c)(3) 65.000 AUSTIN

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

110 INNER CAMPUS DRIVE AUSTIN, TX 78705

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493249011537 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest 2016 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 Open to Public Department of the Treasury www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Name of the organization Electric Power Research Institute Inc 23-7175375 Questions Regarding Compensation Yes No 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 Personal services (e g , maid, chauffeur, chef) Discretionary spending account 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 **1**b Yes 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 Yes 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 $\overline{\mathbf{v}}$ Compensation committee Written employment contract $\overline{\mathbf{v}}$ Independent compensation consultant Compensation survey or study $\overline{\mathbf{v}}$ Form 990 of other organizations Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment? 4a No 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Yes 4c Participate in, or receive payment from, an equity-based compensation arrangement? No If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 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 No The organization? 5a 5b No Any related organization? If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of The organization? 6a No 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 Yes 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 ın Part III 8 No If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2016 Cat No 50053T

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 (D) (E) Total of (F) columns and other Nontaxable Compensation in (ii) deferred benefits (B)(i)-(D)column(B) (i) (iii) Bonus & reported as compensation Other reportable Base incentive deferred on prior compensation compensation compensation Form 990 See Additional Data Table

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 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 Ithe 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

Page 3

following officers accepted a voluntary financial planning benefit offered by EPRI, which in 2016 resulted in taxable income to the officers. Michael W. Howard \$13,295 Arshad Mansoor \$13,295 Pamela J Keefe \$13,295 Anda Ray \$13,295 Charles T Alley, Jr \$13,295 Salvador A Casente, Jr \$13,295 Robert N Chapman \$13,295 Robin E Manning \$13,295 Carolyn R Shockley \$13,295

Schedule J (Form 990) 2016

Supplemental Information

Part III

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 Iterminations, as required in the program.

SUPPLEMENTAL NONQUALIFIED 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 RETIREMENT PLAN form of an employer contribution to its retirement plans. However, if the calculated retirement contribution exceeds the retirement plan employer contribution limit Schedule J. Part II, Column (B)(III) as follows Michael W Howard \$78,697 Arshad Mansoor \$16,621 Pamela J Keefe \$1,204 Anda Ray \$107 Neil M Wilmshurst

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 \$2,277

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

NON-FIXED PAYMENTS 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

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

at December 31, 2016 in connection with the organizations long term incentive program and other specific retention Schedule J (Form 990) 2016 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) Brookdown	of W-2 and/or 1099-MIS			(D) Nontaxable	(E) Total of columns	(F) Compensation in
(A) Name and Title		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1MICHAEL W HOWARD PRESIDENT AND CEO	(1)	611,650	932,900	94,854	411,495	22,837	2,073,736	321,200
	(11)	0	0	0	0	0	0	0
1ARSHAD MANSOOR SVP RESEARCH AND	(1)	371,745	328,600	30,918	241,436	28,350	1,001,049	98,400
DEVELOPMENT	(11)	0	0	0	0	0	0	0
2PAMELA J KEEFE SVP CFO AND TREASURER	(1)	283,878	228,800	22,798	144,821	20,837	701,134	60,900
	(11)	0	0	0	0	0	0	0
3ANDA RAY SVP ENERGY ENVIRON &	(1)	292,071	183,700	16,521	143,303	30	635,625	29,700
EXT RELAT	(11)	0	0	0	0	0	0	0
4CHARLES T ALLEY JR VP GENERATION	(1)	258,388	193,300	14,401	102,060	11,758	579,907	62,500
	(11)	0	0	0	0	0	0	0
5 SALVADOR A CASENTE JR VP GEN COUNSEL AND	(1)	260,197	194,900	14,196	106,140	22,770	598,203	58,500
SECRETARY	(11)	0	0	0	0	0	0	0
6ROBERT N CHAPMAN VP MEMBER AND	(1)	248,493	196,000	14,417	101,480	29,350	589,740	60,200
TECHNICAL SVCS	(11)	0	0	0	0	0	0	0
7 ROBIN E MANNING VP TRANSMISSION	(1)	268,063	143,600	15,319	108,515	21,579	557,076	0
THUMS NOTE OF	(11)	0	0	0	0	0	0	0
8MARK MCGRANAGHAN VP DISTRIB AND ENERGY	(1)	260,361	198,300	1,748	105,375	21,712	587,496	63,000
UTIL	(11)	0	0	0	0	0	0	0
9CAROLYN R SHOCKLEY VP PEOPLE AND	(1)	279,348	218,600	14,530	113,482	29,350	655,310	67,400
PERFORMANCE	(11)	0	0	0	0	0	0	0
10NEIL M WILMSHURST VP NUCLEAR & CHIEF NUC	(1)	306,243	230,200	3,619	118,854	15,837	674,753	69,300
OFFICER	(11)	0	0	0	0	0	0	0
11JANIS G MENDELSON ASSISTANT CORP	(1)	110,551	20,936	949	13,246	7,209	152,891	0
SECRETARY	(11)	0	0	0	0	0	0	0
12HENRY A COURTRIGHT EXECUTIVE ADVISOR	(1)	230,154	265,700	7,456	40,430	19,528	563,268	101,400
	(11)	0	0	0	0	0	0	0
13ROSA L YANG SENIOR TECHNICAL	(1)	240,452	139,503	3,029	38,755	22,837	444,576	0
ADVISOR	(11)	0	0	0	0	0	0	0
14ANDREW J PHILLIPS DIRECTOR RESEARCH &	(1)	233,915	97,867	338	33,855	28,350	394,325	0
DEVELOP	(11)	0	0	0	0	0	0	0
15KURT W EDSINGER DIRECTOR RESEARCH &	(1)	232,601	88,503	523	32,775	28,350	382,752	0
DEVELOP	(11)	0	0	0	0	0	0	0
16 SEAN P BUSHART DIRECTOR RESEARCH &	(1)	212,194	90,787	476	30,794	9,334	343,585	0
DEVELOP	(11)	0	0	0	0	0	0	0
								•

efile GRAPHI	C print - DO NC	T PROCESS	S As Fi	led Data -					DL	N: 93	4932	490:	11537
Schedule L (Form 990 or 990	' I		► Compl m 990, Pa	OS With II ete if the orga ert IV, lines 2! 990-EZ, Part	anization ans 5a, 25b, 2 <mark>6</mark> , 3	swered 27, 28a, 28b,		ic,			мв No 20		
Department of the Tre Internal Revenue Serv	asurv	ormation abo	► Attac	th to Form 99 ile L (Form 99 <u>www.irs.gov</u>	0 or Form 99 90 or 990-EZ	O-EZ.	ructio	ns is	at		Dpen i	to Pı	ıblic
Name of the org Electric Power Rese	anızatıon							•	yer ide 5375	entifica			
	ss Benefit Trar						rganız	ation	s only)	ne 40b			
1 (a) Name of disquali	fied person	(b)	Relationship be	etween disqua organization	lified person a	nd		escripi ansacti		<u> </u>) Corr es	rected? No
2 Enter the a	mount of tax incur	red by organiz	ation mana	igers or disqual	lified persons	during the yea	ır unde	r sec	tion				
Part II Los Cor	mount of tax, if and ans to and/or I and ans to and/or I and	From Interestation answer	ested Per ed "Yes" or	r sons. n Form 990-EZ,						\$ \$ 5, or if	the org	anıza	tion
(a) Name of interested person	(b) Relationship with organization			to or from the nization?	(e)Original principal amount	(f) Balance due		In ult?	Appro boa	h) ved by rd or nittee?		i)Writ ireem	
			То	From			Yes	No	Yes	No	Yes	İ	No
Total				•	> \$								
	ints or Assistar					line 27.							
(a) Name of inter	rested person (b	Relationship erested persor organizati	n and the	(c) Amount	of assistance	(d) Type	of assi	stand	ce	(e) Pu	rpose c	f assi	stance
For Danaswark Dos	luction Act Notice s	ee the Instruc	tions for Ea	rm 000 or 000-	7 C-	at No. 500564		C - 1		L /F	000	. 000	EZ\ 2016

	organization		reven	ues?
			Yes	No
See Addıtıonal Data Table				
Part V Supplemental Information	•			

						l
Part V Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions)						
Return Reference			Explanati	on		
	"Fundin unrelate employ organize organize transac	g for Services" shown as t ed business activities An i ee listed in EPRIs Form 99 ations All of the listed tra ations listed in Schedule L tion in column (d) An indi	the description of transact individual that served as a 10, Part VII, Section A ma nsactions were on an arm , Part IV with "Payment fo ividual that served as a cu	ganizations listed in Schedule L, Parlion in column (d) for work associate is current or former officer, director, ty have served in a similar position fos-length basis EPRI made payment or Public Interest R&D" shown as the irrent or former officer, director, trusy have served in a similar position for the contraction for th	d with trustee or or the list to the descrip stee or k	or key sted stion of key

organizations All of the listed transactions were on an arms-length basis EPRI made payment for employment compensation to the individual listed in Schedule L, Part IV with "Son of Director" shown as the relationship in column (b) Director Jeffrey J. Lyash did not participate in EPRI's management's hiring and compensation decisions regarding Nathaniel Lyash

Additional Data

(7) Exelon Corporation

(11) PGE Corporation

(12) Southern Company

(13) American Electric Power

(15) Duke Energy Corporation

(16) Electricite de France

(17) Edison International

(18) Exelon Corporation

(19) FirstEnergy Corporation

(22) SOUTHERN COMPANY

(23) Nathaniel Lyash

(20) HAWAIIAN ELECTRIC INDUSTRIES INC

(21) Korea Hydro Nuclear Power Co LTD

(14) Bonneville Power Administration

(8) FirstEnergy Corporation

(9) Hawaiian electric Industries Inc

(10) Korea Hydro Nuclear Power Co Ltd

Software ID: **Software Version:**

EIN: 23-7175375

Name: Electric Power Research Institute Inc

172,000

117,002

18,500

22,490

113,789

184,623

195,506

489,404

5,613,360

25,480

124,202

262,556

260,667

4,027,841

56,795 | Employment

Funding for Services

Pymnt for Public Interest R&D

701,069 Pymnt for Public Interest R&D

160,229 Funding for Services

revenues?

No

No

Nο

No

No

Nο

Nο

Nο

No

No

No

No

No

No

Nο

No

No

No

No

No

No

No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization Yes 702,187 | Funding for Services (1) American Electric Power Overlapping Director/Mgmt (2) Edison International 414,600 Funding for Services Overlapping Director/Mgmt (3) Duke Energy Corporation Overlapping 240,000 Funding for Services Director/Mgmt (4) Electricite de France Overlapping 25,000 Funding for Services Director/Mgmt (5) Enel SpA Overlapping 231,600 | Funding for Services Director/Mgmt (6) Entergy Corporation 731,760 Funding for Services Overlapping Director/Mgmt

Overlapping

Overlapping Director/Mgmt

Overlapping

Overlapping

Overlapping Director/Mgmt

Overlapping

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efile GRAPHI	C print - DO NOT PROCESS	DLN	: 93493249011537			
SCHEDULI (Form 990 or 9 EZ)	Complete to provide information for responses to sperouse form 990 or 990-EZ or to provide any additional Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) an www.irs.gov/form990.	tion to Form 990 or 990-EZ of for responses to specific questions on rovide any additional information. Form 990 or 990-EZ. orm 990 or 990-EZ) and its instructions is at				
Name of the orga Electric Power Resea	rch Institute Inc	23-7175375	ification number			
Return Reference						
Organization's Mission and Most Important Activities	ion and tute (EPRI) conducts research and development relating to generation, delivery and use of electricity for the benefit of the public. An independent, nonprofit organization, EPRI brungs together its scientists and engineers as well as experts from academia and industry t					

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 a gency, authority or instrumentality of the federal government, which is engaged to a subst antial 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 non-profit organization operating pursuant to governmental oversight or regulation, which is engaged to a substantial degree in the production, transmission or distribution of electric power for public use within the United States, (4) Any corporation, a ssociation 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 instrumental ity within the United States which is engaged to a substantial degree in operating fluiding 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 or other entity. (2) Any person, firm, corporation or other entity (2) Any person, firm, corporation or other entity (2) Any person, firm, corporation or other entity (2) Any person, firm, corporation or other entity regulated as a public utility, or any person controlling such person, firm or corporation or other entity regula

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Member's	Form 990, Part VI, Section A, Line 7a In 2016, the members of EPRIs Board of Directors we
Power to	re elected and appointed as follows Class I members may elect seven members of the Board
Elect or	The Tennessee Valley Authority and the Bonneville Power Administrator may each appoint on
Appoint the	e member of the Board Class II members may elect fifteen members of the Board Class III
Governing	members may elect five members of the Board The EPRI Governance and Nominating Committee
Body	may appoint six members of the Board

Return Explanation

Governance
Decisions
Reserved to
Members

Form 990, Part VI, Section A, Line 7b Members have the power to amend the articles of inc orporation and may have other powers conferred by the Nonprofit Corporation Code of the District of Columbia

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990	Form 990, Part VI, Section B, Line 11b An external tax firm and EPRI staff work together
Review	to gather the required tax information necessary to complete the tax return. The tax firm
Process	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 reflecte
	d in the return and a draft tax return is prepared. The draft tax return is presented to t
	he Audit Committee of the Board of Directors for their review and a copy is provided throu
	gh a secure link to all members of the Board of Directors The Audit Committee may questio
	n EPRI management and the external tax firm or ask for clarification on any item on the re
	turn After the Committee has reviewed the tax return, the return is filed with the approp
	riate governing tax authorities

Return Explanation
Reference

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

Return Reference	Explanation							
Process for	Form 990, Part VI, Section B, Lines 15a and 15b Officers' compensation decisions for thos							
Determining	e at the level of Vice President and above are determined by the Compensation and Leadersh							
Compensation	p Development Committee of EPRI's Board of Directors, with the exception of determination							
of CEO,	of compensation levels for the CEO and new officers, which are usually determined by the							
Officers, and	Executive Committee of the Board of Directors The Committees obtain and act in reliance u							
Key	pon appropriate comparability and benchmarking data for the officer positions from a natio							
Employees	nally recognized independent source to support determinations of fair market value of offi							
	cers compensation for the services rendered The Committees vote on officer compensation a							
	t 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 v enture 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 eventure or arrangement EPRI performs services work and other unrelated business activities and reports that work as unrelated business income for appropriate tax treatment. Part icular 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 Explanation
Reference

	Form 990, Part VI, Section C, Line 19 EPRI makes its governing documents, conflict of int erest policy, and audited financial statements for the past three years available to the p
Available to	ublic through its own website
the Public	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493249011537 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships 2016** (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Electric Power Research Institute Inc 23-7175375 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity (b) Primary activity (c) Legal domicile (state (d) Total income (e) End-of-year assets or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.		l Janization answered	"Yes" on Form 990	, Part IV, line 34 be	ecause it had one or	more	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 (13) con entit	512(b) trolled
(1)Electricity Innovation Institute 3420 Hillview Avenue	DORMANT	CA	501(c)(3)	9	EPRI Inc	Yes Yes	No_
Palo Alto, CA 94304 77-0562327							
For Paperwork Reduction Act Notice, see the Instructions for Form	990.	Cat No 5013	5Y	I	Schedule R (Form	990) 20:	16

because it had one or more related organizations treated at (b) Name, address, and EIN of related organization EPRI Solutions Inc Corridor Park xville, TN 37932 0449454 EPRI International Inc O Hillview Avenue Alto, CA 94304	s a corporati			514)			Yes	No		Yes	No	
because it had one or more related organizations treated at (b) Name, address, and EIN of related organization IEPRI Solutions Inc Corridor Park oxville, TN 37932 0449454 IEPRI International Inc Other Holling School organization Intl Sales	s a corporati											
because it had one or more related organizations treated a (a) Name, address, and EIN of related organization Primary activity Primary activity Primary activity R&D Applic 2 Corridor Park oxville, TN 37932 -0449454 PERI International Inc Intl Sales 20 Hillview Avenue lo Alto, CA 94304	s a corporati											
because it had one or more related organizations treated at (a) Name, address, and EIN of related organization Primary activity Primary activity R&D Applic 2 Corridor Park oxville, TN 37932 -0449454 PEPRI International Inc Intl Sales 20 Hillview Avenue of Alto, CA 94304	s a corporati											
because it had one or more related organizations treated at (a) Name, address, and EIN of related organization Primary activity Primary activity Primary activity R&D Applic 2 Corridor Park exille, TN 37932 -0449454 PERI International Inc Intl Sales 20 Hillview Avenue lo Alto, CA 94304	s a corporati											
because it had one or more related organizations treated at (b) Name, address, and EIN of related organization Primary activity 2. Corridor Park (a) 2	s a corporati											
because it had one or more related organizations treated at (a) Name, address, and EIN of related organization Name, address, and EIN of related organization Primary activity R&D Applic R&D Applic 12 Corridor Park 10 Avoille, TN 37932 7-0449454 PEPRI International Inc 120 Hillview Avenue 131 Alto, CA 94304	s a corporati											
because it had one or more related organizations treated at (a) Name, address, and EIN of related organization 1) EPRI Solutions Inc 42 Corridor Park noxville, TN 37932 7-0449454 2) EPRI International Inc 420 Hillview Avenue alo Alto, CA 94304	s a corporati			Cilcana							\vdash	
(a) Name, address, and EIN of related organization 1) EPRI Solutions Inc 42 Corridor Park noxville, TN 37932 7-0449454 2) EPRI International Inc 420 Hillview Avenue alo Alto, CA 94304	s a corporati			C. U								
because it had one or more related organizations treated at (a) Name, address, and EIN of related organization 1) EPRI Solutions Inc 42 Corridor Park noxville, TN 37932 7-0449454 2) EPRI International Inc 420 Hillview Avenue alo Alto, CA 94304	s a corporati											
related organization 1)EPRI Solutions Inc 42 Corridor Park noxville, TN 37932 7-0449454 2)EPRI International Inc 420 Hillview Avenue alo Alto, CA 94304			st during th			nswered "Yes	s" on Fo	orm 99	90, Part IV	, line	34	
42 Corridor Park 10 Avrille, TN 37932 7-0449454 2) EPRI International Inc Intl Sales 120 Hillview Avenue 10 Alto, CA 94304	Le dor	(c) Legal domicile (state or foreign			(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	Share o	(g) of end-o ear ssets		ntage ership	Se (1	(ı) ection 512 13) contro entity?
42 Corridor Park noxville, TN 37932 7-0449454 2) EPRI International Inc Intl Sales 420 Hillview Avenue alo Alto, CA 94304	country)		NA		C Corp	-18,046	1	,866,19	0 100 00	00.0/		Yes No
420 Hillview Avenue alo Alto, CA 94304	DE		IVA		ССОГР	-10,046	1,000,		30,190			res
420 Hillview Avenue alo Alto, CA 94304 2-2357247	Г	ÞΕ	NA	C Corp		310,246		,628,01	3,019 100 000		Y	Yes
											+	
				1							+	\longrightarrow

Schedule R (Form 990) 2016		Pa	age 3
Part V Transactions With Related Organizations Complete if the organization answered "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 the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1 b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1 q		No
r Other transfer of cash or property to related organization(s)	1r		No

l Performance of services or membership or fundraising solicitations for related organization(s)				1l Yes	
$f m$ Performance of services or membership or fundraising solicitations by related organization(s) \ldots \ldots				1m Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n Yes	
o Sharing of paid employees with related organization(s)				1o Yes	
p Reimbursement paid to related organization(s) for expenses				1p	No
q Reimbursement paid by related organization(s) for expenses				1q	No
r Other transfer of cash or property to related organization(s)				1r	No
s Other 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 this line,	, including covered re	elationships and trai	nsaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount involve	ed .
(4) EDDY THIEDHATTONIAL THIC		6 464 466	A CTUAL EVENEE		

(1)EPRI INTERNATIONAL INC 6,464,166 ACTUAL EXPENSE (2)EPRI INTERNATIONAL INC 60,397 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

-												
(a) Name, address, and EIN of entity	(b) Primary activity	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	01	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		g >	(k) Percentage ownership
		514)	Yes	No			Yes	No		Yes	No	
									Schedul	e R (Form	1 99	0) 2016

