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Department of the Treasury

DLN: 93493213010727 OMB No 1545-0047

# **Return of Organization Exempt From Income Tax**

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

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

▶ Information about Form 990 and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>

**Open to Public** Inspection

Interna	l Reve	nue Service	F Information about	. FOITH 990 and its instructions is at wi	1113 GOV/101	111230		Inspection			
A F	or th	e <b>2016</b> ca		ning 01-01-2016 , and ending 12-	31-2016	_					
☐ Ad	dress	pplicable change	C Name of organization NATIONAL OILHEAT RESEARCH ALLIA	NNCE		<b>D Employ</b> 54-202		ication number			
☐ Ini _ Fir		turn	Doing business as			_	ne number				
☐ An	nende	minated d return on pending	600 CAMERON STRÈET NO 206								
		F	City or town, state or province, count ALEXANDRIA, VA 22314	ry, and ZIP or foreign postal code		<b>G</b> Gross re	eceipts \$ 8,	696,623			
			<b>F</b> Name and address of principal JOHN HUBER	officer	H(a) Is th	is a group re	turn for				
			600 CAMERON STREET NO 206 ALEXANDRIA, VA 22314			rdinates? all subordina ded?	tes	□Yes <b>☑</b> No □Yes □No			
I Ta	x-exer	mpt status	☐ 501(c)(3) <b>☑</b> 501(c)(6) <b>◄</b> (	insert no )		•		instructions)			
J W	ebsit	te:▶ WW	W NORAWEB ORG		H(c) Grou	p exemption	number	<b>&gt;</b>			
<b>K</b> Forr	n of o	rganızatıon	✓ Corporation ☐ Trust ☐ Assoc	lation  Other	L Year of form	nation 2001	M State	of legal domicile DC			
Pa		Sum:	mary cribe the organization's mission or	most significant activities			•				
e.			2, PART III, LINE 1	Those significant activities							
Activities & Governance	-							_			
ven	ੵ	Chaple bloo	- hav <b>&gt;</b>	continued its operations or disposed of		·					
Ĝ				p body (Part VI, line 1a)		orits net a	3	43			
<b>≫</b>	4	Number o	of independent voting members of	the governing body (Part VI, line 1b)			4	43			
Ţē,	5	Total num	nber of individuals employed in cale	endar year 2016 (Part V, line 2a) .			5	3			
čt	6	Total num	nber of volunteers (estimate if nece	essary)		•	6	43			
ď	l			VIII, column (C), line 12			7a	0			
	b	Net unrela	ated business taxable income from	Form 990-T, line 34			7b	0			
		Cambridge	one and supple (Doub VIII June 1h)		Pr	ior Year	0	Current Year			
ξ	l		ions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g)			9,728,		0 8,653,421			
Rəvenue	l	-	nt income (Part VIII, inie 29)		<u>' '</u>	136	1,730				
æ	l		enue (Part VIII, column (A), lines !			111	-2,047				
	l		, , , , , , , , , , , , , , , , , , , ,	t equal Part VIII, column (A), line 12)		9,747,		8,653,104			
	-		nd similar amounts paid (Part IX, co			6,228,	592	6,340,440			
	14	Benefits p	oald to or for members (Part IX, co	lumn (A), line 4)			0	0			
82	15	Salaries,	other compensation, employee ber	nefits (Part IX, column (A), lines 5–10)	)	361,	904	394,604			
Expenses	16a	Professio	nal fundraising fees (Part IX, colum	nn (A), line 11e)			0	0			
xb e	b	Total fundra	aising expenses (Part IX, column (D), lin	e 25) ▶ <u>0</u>							
ш	17	Other exp	penses (Part IX, column (A), lines 1	.1a-11d, 11f-24e)		1,220,	978	1,741,031			
	l	·	enses Add lines 13–17 (must equa	, ,,		7,811,	474	8,476,075			
(0	19	Revenue	less expenses Subtract line 18 fro	m line 12		1,936,		177,029			
Net Assets or Fund Balances					Beginning	g of Current Y	'ear	End of Year			
sset 3afa	20	Total asse	ets (Part X, line 16)			11,186,	104	12,387,040			
₹ Z Z	21	Total liabi	ilities (Part X, line 26)			7,080,	586	8,104,493			
žZ	22	Net asset	s or fund balances Subtract line 2	1 from line 20		4,105,	518	4,282,547			
know	r pena ledge	alties of pe and belief		ned this return, including accompanyir Declaration of preparer (other than of							
any k	nowle	edge I k									
		Signatu	re of officer		20 Da	17-07-31 te					
Sign Here		јони н	HUBER PRESIDENT r print name and title								
		Pr	rınt/Type preparer's name	Preparer's signature MARK D MYERS	Date		PTIN				
Paid	k		IARK D MYERS	sel	self-employed						
Pre	pare	ਰ। <u>⊢</u>	rm's name ► ROSS LANGAN & MCKEN		Firm's EIN ► 52-0901831						
Use	On	ıly   Fi	irm's address ► 7900 WESTPARK DR STE	: 142U	Ph	one no (703)	893-2660				
			MCLEAN, VA 22102								
			this return with the preparer show	<u> </u>			<b>✓</b> Y	es No			
ror P	aper	work Rec	duction Act Notice, see the sepa	rate instructions.	Cat No	11282Y		Form <b>990</b> (2016)			

Form	990 (2	016)				Page <b>2</b>
Par	t III	Statement of	of Program Service Acc	omplishments		
		Check If Sched	lule O contains a response or	note to any line in this Part III .		🗹
1	Briefly	describe the or	ganızatıon's mıssıon			
				T, PERFORM RESEARCH AND DEVIVE BETTER CUSTOMER SERVICE	/ELOPMENT, ENCOURAGE HEATING CE	G OIL EFFICIENCY AND
	Did th	ie organization u	indertake any significant prog	ram services during the year whi	ch were not listed on	
_	the pr	or Form 990 or	, , , ,			☐ Yes ☑ No
3		•		nificant changes in how it conduc	ts any program	
-	servic	es <sup>?</sup>	se changes on Schedule O	-		☐ Yes ☑ No
4	Sectio	on 501(c)(3) and		required to report the amount of	rgest program services, as measu grants and allocations to others, tl	
4a	(Code		) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Ad	ldıtıonal Data				
4b	(Code		) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Ad	ldıtıonal Data				
4c	(Code		) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Ad	ldıtıonal Data				
-	(Code		) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
	WHICH NORA I HEATIN	l IS 24 PERCENT O PUBLIC LAW 113-7 NG OIL EFFICIENC	PF NET 2016 ASSESSMENTS REVEN PS THE ALLIANCE PLANS TO ALLO Y AND UPGRADE PROGRAMS STA	IUE, FOR STATE REBATES THAT HAVE CATE THESE STATE REBATES TO THE I TE ORGANIZATIONS DEVELOP DETAILE	JSSED PREVIOUSLY, THE ALLIANCE HAS NOT YET BEEN ALLOCATED TO A PROGF RESEARCH, DEVELOPMENT, AND DEMON D PLANS FOR USE OF THE REBATES TO HE REQUIREMENTS OF NORA PUBLIC LA	RAM SPECIFIED IN THE NSTRATION AND/OR DO WORK UNDER THESE
	Other	program service	es (Describe in Schedule O )			
		nses \$	including g	rants of \$	) (Revenue \$	)
4e	Total	program servi	ice expenses ▶			

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Page 3

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Form **990** (2016)

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates Section 501(c)(3) organizations.

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

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

assessments, or similar amounts as defined in Revenue Procedure 98-19? Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? 

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? 

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,

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . . . .

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 🕏

b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

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? . . .

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . .

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

12a Did the organization obtain separate, independent audited financial statements for the tax year?

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

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

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,"

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . . 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, If "Yes," 23 

the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

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

301 7701-2 and 301 7701-3? 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)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

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

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 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.

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

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of 24a

24b

24c

24d

25a

25b

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28a

28b

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Yes

Form 990 (2016)

Yes

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Nο

No

Nο

Nο

Nο

Nο

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Page 4

orm	990 (2016)			Page
Par	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 12  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
<b>L</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 <sub>b</sub>	Yes	
U	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
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, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	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 which it was required to file Form 8282?	7c		
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter	]		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
		. –		

01111	(-	· ·			· age •						
Par	t VI	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	' respo	nse to li	nes						
		Check if Schedule O contains a response or note to any line in this Part VI			<b>✓</b>						
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 a la la 43									
	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 43									
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other r, director, trustee, or key employee?	2		No						
3	Did th	ne organization delegate control over management duties customarily performed by or under the direct supervision cers, directors or trustees, or key employees to a management company or other person?	3		No						
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?										
5	Did th	ne organization become aware during the year of a significant diversion of the organization's assets?	5		No						
6	Did th	ne organization have members or stockholders?	6	Yes							
7a		ne organization have members, stockholders, or other persons who had the power to elect or appoint one or more									
		pers of the governing body?	7a		No						
b		ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ns other than the governing body?	7b		No						
8		ne organization contemporaneously document the meetings held or written actions undertaken during the year by illowing									
а	The g	overning body?	8a	Yes							
b	b Each committee with authority to act on behalf of the governing body?										
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the ization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No						
Se	ction	B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	2.)							
				Yes	No						
10a	Did th	ne organization have local chapters, branches, or affiliates?	10a		No						
b		s," did the organization have written policies and procedures governing the activities of such chapters, affiliates, ranches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has tl form?	ne organization provided a complete copy of this Form 990 to all members of its governing body before filing the	11a		No						
b	Descr	ibe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did th	ne organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	Yes							
b	Were confli	officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	12b	Yes							
С		ne organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done	12c	Yes							
13	Did th	ne organization have a written whistleblower policy?	13		No						
14	Did th	ne organization have a written document retention and destruction policy?	14		No						
15		ne process for determining compensation of the following persons include a review and approval by independent									
_		ns, comparability data, and contemporaneous substantiation of the deliberation and decision?									
d	The o	ns, comparability data, and contemporaneous substantiation of the deliberation and decision? rganization's CEO, Executive Director, or top management official	15a	Yes							
			15a 15b	Yes	No						
	Other	rganization's CEO, Executive Director, or top management official		Yes	No						
b	Other If "Ye Did th	officers or key employees of the organization		Yes	No No						
b 16a	Other If "Ye Did th taxab	officers or key employees of the organization	15b	Yes							
b 16a	Other If "Ye Did th taxab If "Ye in joir	officers or key employees of the organization	15b	Yes							
b 16a b	Other If "Ye Did th taxab If "Ye in joir status	rganization's CEO, Executive Director, or top management official	15b 16a	Yes							
b 16a b	Other If "Ye Did th taxab If "Ye in join status	officers or key employees of the organization	15b 16a	Yes							
b 16a b	Other If "Ye Did th taxab If "Ye in join status ction List th Section	rganization's CEO, Executive Director, or top management official	15b 16a	Yes							
b 16a b Se 17	Other If "Ye Did th taxab If "Ye in join status  ction List th Section availa	rganization's CEO, Executive Director, or top management official	15b 16a	Yes							
b 16a b Se 17	Other If "Ye Did th taxab If "Ye In join status ection List th Section Description	rganization's CEO, Executive Director, or top management official	15b 16a	Yes							

compensated employees, and former such persons

(A)

Name and Title

(F)

Estimated

Form 990 (2	2016) Page <b>7</b>
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 <b>current</b> 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

Page **8** 

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	than o	one b	oox, u an off ctor/tr	ot che unles fficer truste	<del></del>	rson a	(D) Reportable compensation from the organization (W- 2/1099-MISC)	ortable Reportable compensation from related ation (W- organizations (W-			(F) Estimated amount of other compensation from the organization and		
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2,1033 1135,	2,1033 1125		relat organiz	ted		
See Additional Data Table										$\exists$				
				$\Box'$										
		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>				_				
			<u> </u>	<u>                                     </u>	<u> </u>		<u>                                     </u>	1		$\dashv$				
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1b Sub-Total			<del></del>	<u>بـــ</u>	<u></u> '	<u> </u>	بــــــــــــــــــــــــــــــــــــ			7_				
c Total from continuation sheet d Total (add lines 1b and 1c)			٠.	٠.	•	<b>▶</b>	_	277,682		0		12,394		
Total number of individuals (in of reportable compensation fro	ncluding but not limited	to thos			bove	e) who	rece	· · · · · · · · · · · · · · · · · · ·	00,000					
3 Did the organization list any for line 1a? If "Yes," complete Sch			ee, k	ey e	mpl	oyee,	or h	ghest compensated	employee on	3	Yes	No No		
For any individual listed on line organization and related organ individual									n the	4		110		
5 Did any person listed on line 1- services rendered to the organ								_	ıvıdual for		1			
Section B. Independent Cor	<u> </u>		euare		-1 3u	ich per	50,,			5		No		
Complete this table for your five from the organization. Report of the complete that the complete	ve highest compensated									mper	nsation			
HOIII the Organization (1600)	(A)  Name and business addre		yeu.	Enu	ling	With C	TVVIL	T	(B)		(Compet			
WARM THOUGHTS COMMUNICATIONS	Name and pusiness dudic	:55						MARKETING	S SERVICES		Comper	861,908		
4 BRIGHTON ROAD SUITE 300 CLIFTON, NJ 07012 JL360 MEDIA LLC								MARKETING	CERVICEC			721 667		
JL360 MEDIA LLC 1600 ROUTE 22 2ND FLOOR UNION, NJ 07083								MAKKETINO	SERVICES			721,667		
BOSTON ENVIRONMENTAL								CONSULTIN	IG SERVICES			424,836		
600 STATE STREET SUITE 7 PORTSMOUTH, NH 03801	_													
PRIMEDIA 401 FRANKLIN AVENUE SUITE 310								MARKETING	SERVICES			286,208		
GARDEN CITY, NY 11530 OILHEAT ASSOCIATES INC								CONSULTIN	IG SERVICES			284,040		
1597 EARL ROAD								CONSOLIZA	G SERVICES			284,040		
WANTAGH, NY 11793  2 Total number of independent con	ntractors (including but	not lim	uted	to th		listed	abo	ve) who received m	ore than \$100.00	ົາດ of	<u> </u>			

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

compensation from the organization ▶ 16

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

Part '	<del></del>						
	Check if Schedule O contains a res	ponse or note to a	any line in thi ( <b>A</b> Total re	1)	(B) Related or exempt function	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections
s 2	1a Federated campaigns 1a				revenue	Tevende	512-514
Grants mounts	<b>b</b> Membership dues <b>1b</b>		_				
F	c Fundraising events 1c	+	_				
ifts ar A	d Related organizations 1d	1					
s, G	e Government grants (contributions)	1	_				
ion	f All other contributions, gifts, grants, and similar amounts not included above						
Contributions, Giffs, Grants and Other Similar Amounts	g Noncash contributions included in lines 1a-1f \$		_				
Col	h Total.Add lines 1a-1f	🕨	_				
<u> 1</u>		Busin	ess Code	•			
¥5.∏	2a OILHEAT ASSESSMENTS		900099	•	<u> </u>	04,725	
2 <u>₹</u>	<b>b</b> RESEARCH CONTRACTS		900099		48,696	48,696	
Š	c ———						
₹	<b>a</b>						
Itan	<b>f</b> All other program service revenue						
Program Service Revenue	<b>9Total.</b> Add lines 2a-2f		8,653,421				
_	3 Investment income (including dividends	interest and oth	ner				<u> </u>
	sımılar amounts)		· ►	1,730			1,730
	4 Income from investment of tax-exempt		<b>&gt;</b>				
	5 Royalties	(II) Persona	<u>▶ </u>				
	6a Gross rents	(II) I CI SOIId	<u>'</u>				
	<b>b</b> Less rental expenses						
	D Less Terrial expenses						
	c Rental income or (loss)						
	<b>d</b> Net rental income or (loss)		<b>•</b>				
	(ı) Securities	(II) Other					
	7a Gross amount from sales of						
	assets other than inventory						
	h Less cost or						
	other basis and sales expenses						
	C Gain or (loss)						
	d Net gain or (loss)	-	<b>&gt;</b>				
a)	<b>8a</b> Gross income from fundraising events (not including \$ of						
æ	contributions reported on line 1c) See Part IV, line 18	 a					
ě		b					
er	$oldsymbol{c}$ Net income or (loss) from fundraising $oldsymbol{c}$	events	•				
Other Revenue	<b>9a</b> Gross income from gaming activities See Part IV, line 19						
		a					
	<b>b</b> Less direct expenses	b					
	c Net income or (loss) from gaming activ	vities	<u> </u>				
	10aGross sales of inventory, less returns and allowances						
			397				
	•		519	2 122	2.13	12	
	Net income or (loss) from sales of inve	ntory • Business Cod	<u> </u>	-2,122	-2,12	.2	
	11a	Dusiness cou					
	b						
	с	<b>†</b>					
	d All other revenue			75	5	75	
	e Total. Add lines 11a-11d		•	75	5		
	12 Total revenue. See Instructions .	,	•	8,653,104		74	0 1,730
			<u> </u>	_,000,104	0,031,37	-1	Form <b>990</b> (2016)

Form 990 (2016)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	nızatıons must com	plete column (A)	_
Check if Schedule O contains a response or note to any	line in this Part IX			🗆
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	6,340,440	·		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	290,076			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	85,662			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
<b>10</b> Payroll taxes	18,866			
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	104,153			
c Accounting	198,962			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	677,560			
12 Advertising and promotion	490,648			
13 Office expenses	87,672			
14 Information technology	27,636			
15 Royalties	,			
<b>16</b> Occupancy	96,824			
17 Travel	12,582			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	12,552			
<b>19</b> Conferences, conventions, and meetings	7,122			
<b>20</b> Interest	170			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	24,029			
23 Insurance	12,716			
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				
b				
С				
d				
e All other expenses	957			
25 Total functional expenses. Add lines 1 through 24e	8,476,075			

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)

Form 990 (2016)

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Liabilities 22

Fund Balances

Assets or 30

Net

Assets

Part II of Schedule L

Inventories for sale or use .

Less accumulated depreciation

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34.

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

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightleftarrows and

Investments—program-related See Part IV, line 11

basis Complete Part VI of Schedule D

Intangible assets . . . . .

Other assets See Part IV, line 11 .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

Cash-non-interest-bearing									
Savings and temporary cash investments									
Pledges and grants receivable, net									
Accounts receivable, net									
Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L									
Loans and other receivables from other disqualified persons (as defined under									

section 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

10a

10b

Notes and loans receivable, net . . . .

130,021

51.899

(A)

Beginning of year

8.209.832

2,575,553

37.345

21.145

659,676

764 19

6,420,146

7,080,586

4,105,518

4,105,518

11,186,104

11,186,104

10c

11 12

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Page **11** 

9.448.185

2,823,641

15,946

78.122

21,146

12,387,040

1,138,799

6,964,930

8,104,493

4.282.547

4,282,547

12.387.040

Form **990** (2016)

764

(B)

End of year

Form	990 (2016)				Page <b>12</b>
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		8	.653,104
2	Total expenses (must equal Part IX, column (A), line 25)	2		8	476,075
3	Revenue less expenses Subtract line 2 from line 1	3		177,029	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4	105,518
5	Net unrealized gains (losses) on investments	5			
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			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4	282,547
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<b>✓</b>
	· · · · · · · · · · · · · · · · · · ·			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	basis,			
	✓ 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 Si	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

Νo

Form **990** (2016)

Audit Act and OMB Circular A-133?

#### Additional Data

Software ID:

Software Version:

**EIN:** 54-2024246

Name: NATIONAL OILHEAT RESEARCH ALLIANCE

Form 990 (2016)

#### Form 990, Part III, Line 4a:

RESEARCH, DEVELOPMENT, AND DEMONSTRATION IN 2016. THE ALLIANCE GRANTED OR EXPENDED \$1,477,747 FOR THE RESEARCH, DEVELOPMENT, AND DEMONSTRATION PROGRAM, INCLUDING \$1,013,234 IN GRANTS AND SPENDING OF PAST YEARS ASSESSMENTS REVENUE THE ALLIANCE ALSO BUDGETED \$2,000,000 IN ADDITIONAL NATIONAL SPENDING FROM 2016 ASSESSMENTS REVENUE TO BE SPENT SUBSEQUENT TO YEAR END FOR THE RESEARCH, DEVELOPMENT, AND DEMONSTRATION PROGRAM MAKING THE TOTAL FOR 2016, 31 PERCENT OF NET ASSESSMENTS REVENUE ADDITIONALLY, UNALLOCATED STATE REBATES OF 2016 REVENUE WILL BE USED FOR THE RESEARCH, DEVELOPMENT, AND DEMONSTRATION PROGRAM THE NORA PUBLIC LAW 113-79 REQUIRES THE ALLIANCE TO ENSURE NOT LESS THAN 30 PERCENT OF THE ASSESSMENTS COLLECTED FOR EACH CALENDAR YEAR UNDER THE NORA PUBLIC LAW 113-79 ÅRE USED BY OUALIFIED STATE ASSOCIATIONS OR THE ALLIANCE TO CONDUCT RESEARCH, DEVELOPMENT, AND DEMONSTRATION ACTIVITIES RELATING TO OILHEAT FUEL, INCLUDING THE

DEVELOPMENT OF ENERGY-EFFICIENT HEATING SYSTEMS TO BE PLACED INTO THE MARKETPLACE. THIS ALSO INCLUDES THE ALLIANCE, IN CONJUNCTION WITH AN INSTITUTION OR ORGANIZATION ENGAGED IN BIOFUELS RESEARCH, TO DEVELOP CONSUMER EDUCATION MATERIALS DESCRIBING THE BENEFITS OF USING BIOFUELS AS OR IN OILHEAT FUEL BASED ON THE TECHNICAL INFORMATION DEVELOPED

#### Form 990, Part III, Line 4b: HEATING OIL EFFICIENCY AND UPGRADE IN 2016, THE ALLIANCE GRANTED OR EXPENDED \$1,373,239 FOR THE HEATING OIL EFFICIENCY AND UPGRADE PROGRAM, INCLUDING \$166,096 IN GRANTS AND SPENDING OF PAST YEARS ASSESSMENTS REVENUE THE ALLIANCE ALSO BUDGETED \$100,000 IN ADDITIONAL NATIONAL

SPENDING FROM 2016 ASSESSMENTS REVENUE FOR THE HEATING OIL EFFICIENCY AND UPGRADE PROGRAM. OF WHICH \$93,635 REMAINED UNSPENT AS OF DECEMBER 31, 2016, MAKING THE TOTAL FOR 2016, 15 PERCENT OF NET ASSESSMENTS REVENUE ADDITIONALLY, UNALLOCATED STATE REBATES OF 2016 ASSESSMENTS REVENUE WILL BE USED FOR THE HEATING OIL EFFICIENCY AND UPGRADE PROGRAM THE NORA PUBLIC LAW 113-79 REQUIRES THE ALLIANCE TO ENSURE NOT LESS THAN 15

PERCENT OF THE ASSESSMENTS COLLECTED FOR EACH CALENDAR YEAR UNDER THE NORA PUBLIC LAW 113-79 ARE USED BY OUALIFIED STATE ASSOCIATIONS OR THE

ALLIANCE TO CARRY OUT PROGRAMS TO ASSIST CONSUMERS (I) TO MAKE COST-EFFECTIVE UPGRADES TO MORE FUEL EFFICIENT HEATING OIL SYSTEMS OR OTHERWISE

MAKE COST-EFFECTIVE MODIFICATIONS TO AN EXISTING HEATING SYSTEM TO IMPROVE THE EFFICIENCY OF THE SYSTEM. (II) TO IMPROVE ENERGY EFFICIENCY OR

REDUCE ENERGY CONSUMPTION THROUGH COST-EFFECTIVE ENERGY EFFICIENCY PROGRAMS FOR CONSUMERS, OR (III) TO IMPROVE THE SAFE OPERATION OF A

HEATING SYSTEM

CONSUMER EDUCATION, SAFETY, AND TRAINING IN 2016, THE ALLIANCE GRANTED OR EXPENDED \$2,757,703 FOR THE CONSUMER EDUCATION, SAFETY, AND TRAINING PROGRAM, INCLUDING \$196,552 IN GRANTS AND SPENDING OF PAST YEAR'S ASSESSMENTS REVENUE THE ALLIANCE ALSO BUDGETED \$325,000 IN ADDITIONAL NATIONAL SPENDING FROM 2016 ASSESSMENTS REVENUE FOR THE CONSUMER EDUCATION, SAFETY, AND TRAINING PROGRAM. OF WHICH \$40,409 REMAINED UNSPENT AS OF DECEMBER 31, 2016, MAKING THE TOTAL FOR 2016, 30 PERCENT OF NET ASSESSMENTS REVENUE THE NORA PUBLIC LAW 113-79 REQUIRES THE ALLIANCE TO ENSURE NOT MORE THAN 30 PERCENT OF THE ASSESSMENTS COLLECTED FOR EACH CALENDAR YEAR UNDER THE NORA PUBLIC LAW 113-79 ARE USED (I) TO

Form 990, Part III, Line 4c:

CONDUCT CONSUMER EDUCATION ACTIVITIES RELATING TO OILHEAT FUEL. INCLUDING PROVIDING INFORMATION TO CONSUMERS ON ENERGY CONSERVATION STRATEGIES, SAFETY, NEW TECHNOLOGIES THAT REDUCE CONSUMPTION OR IMPROVE SAFETY AND COMFORT, THE USE OF BIOFUEL BLENDS, AND FEDERAL, STATE, AND

LOCAL PROGRAMS DESIGNED TO ASSIST OILHEAT FUEL CONSUMERS. (II) TO CONDUCT WORKER SAFETY AND TRAINING ACTIVITIES RELATING TO OILHEAT FUEL.

COLLECTION PROCESS TO TRACK EQUIPMENT, SERVICE, AND RELATED SAFETY ISSUES TO DEVELOP MEASURES TO IMPROVE SAFETY

INCLUDING ENERGY EFFICIENCY TRAINING, (III) TO CARRY OUT OTHER ACTIVITIES RECOMMENDED BY THE SECRETARY OF ENERGY, OR (IV) TO ESTABLISH A DATA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest 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 from related week (list from the compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W- 2/1099organization and Highest compen Former Individual truste or director Institutional MISC) organizations MISC) related below dotted organizations employee line)

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JOHN HUBER	40 00	v		v		277,682	0	12,394
PRESIDENT		^				277,002	0	12,394
STEVE CLARK	1 00	V				0	0	
DIRECTOR		^				0	0	
EDIC DECECEDO	1 00							

STEVE CLARK		x			l n	0	l
DIRECTOR							
ERIC DEGESERO	1 00	×	x		0	0	
TREASURER		, ,			·		
TOM DEVINO	1 00				0	0	
DIRECTOR		_ ^					

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CHAIRWOMAN

JEFF JENKINS

ROGER MARRAN

CHARLES MILLER

CHRISTOPHER DALY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

TED NOONAN

PAST CHAIRMAN

ERIC DEGESERO	1 00	X	х		0		
TREASURER		Α	^		3	3	
TOM DEVINO	1 00	X			0	0	
DIRECTOR		^			,	7	

ERIC DEGESERO		×	x		n	0	_
TREASURER		^	^		3	3	
TOM DEVINO	1 00				0	0	0
DIRECTOR					5	9	
ALLISON HEANEY	1 00						

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless 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 Officer Highest compens employee Former Individual trustee or director Institutional MISC) organizations MISC) related director below dotted organizations employee line)

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JEFF WITHAM	1 00					0	
DIRECTOR		,				J	
KEITH WRISLEY	1 00					0	
DIRECTOR		^					

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ED SCOTT

DIRECTOR

DIRECTOR

GEORGE MCQUEENEY

DAN DONOVAN

DANIEL SINGER

BRUCE O HARRIS

CHARLES UGLIETTO

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

			4		at e-d			
GREG ANDERSON	1 00	×				0	0	
DIRECTOR		^						
JAY BUEHLER	1 00	×				0	0	
DIRECTOR		, and the second					•	
JOE PHILLIPS	1 00							Г

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DIRECTOR					
JAY BUEHLER	1 00	x			
DIRECTOR		,			
JOE PHILLIPS	1 00	·			
DIRECTOR		^			

JOHN COMBS

JOHN MCCUSKER

DIRECTOR

DIRECTOR

DIRECTOR

KEN RUSS

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

LARRY GALGOCI

MATT MEEHAN

MICHAEL JANUARIO

KATE CHILDS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest 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 from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W- 2/1099organization and Office Highest compens employee Former Individual trustee or director key employee organizations Institutional MISC) MISC) related below dotted organizations line) Trust

			र्ग		) वा ६-त			
PETER AZIZ DIRECTOR	1 00	×				0	0	_
QUINCY W LONGACRE DIRECTOR	1 00	×				0	0	
RICK BOLOGNA	1 00	x				0	0	

DIRECTOR							
RICK BOLOGNA	1 00	v			0	0	
DIRECTOR		^			0	3	
STEPHEN SACK	1 00	×			0	0	
DIRECTOR		^			J	0	
STEVE MCCRACKEN	1 00	×			0	0	

DIRECTOR		^						0	0	
STEPHEN SACK	1 00							0	0	
DIRECTOR		^							7	
STEVE MCCRACKEN	1 00	×						0	0	
DIRECTOR		^							0	
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DIRECTOR

TOM SANTA

DIRECTOR

DIRECTOR

1ST VICE CHAIRMAN

WALTER BRICKOWSKI

SUSAN HAMMOND

DIRECTOR		X			0	0	0
STEVE MCCRACKEN	1 00	x			0	0	0
DIRECTOR		,			,	Ů	
SUSAN SANTOPIETRO	1 00	¥			0	0	0
DIRECTOR		^			0	Ŭ	ļ

DIRECTOR		^			0	0	U
SUSAN SANTOPIETRO	1 00	×			0	0	0
DIRECTOR		^			5	, and the second	Ü
TOM FLAHERTY	1 00	x			C	0	0

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

		istee	Trustee	<b>1</b>	pensated			
JEFF LYKINS	1 00	×				0	0	
DIRECTOR		,				,	, and the second	
JOHN MILES	1 00	×				0	0	
DIRECTOR		``						

1 00

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. . . . . . . . . . . . . . . . . .

................

NATALIF MONDSINI

DIRECTOR

DIRECTOR

DAVID NEILL

**SCHEDULE D** 

**Supplemental Financial Statements** 

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

➤ Attach to Form 990.

OMB No 1545-0047

DLN: 93493213010727

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

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

Inspection

Na	me of the organization FIONAL OILHEAT RESEARCH ALLIANCE		Employer identification number	
IVAI	TONAL OILHEAT RESEARCH ALLIANCE		54-2024246	
Pa	Organizations Maintaining Donor Complete if the organization answere	Advised Funds or Other Similar Fund d "Yes" on Form 990, Part IV, line 6.	ds or Accounts.	
		(a) Donor advised funds	(b)Funds and other accounts	
	Total number at end of year			_
2	Aggregate value of contributions to (during year)			_
3	Aggregate value of grants from (during year)			
Ļ	Aggregate value at end of year			_
i	Did the organization inform all donors and donor funds are the organization's property, subject to t		or advised	— No
•	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?		ny other purpose	No
Pa	rt III Conservation Easements. Complet	e 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)		
	$\square$ Preservation of land for public use (e g , rec	reation or education) $\qed$ Preservation $lpha$	of an historically important land area	
	Protection of natural habitat	Preservation of	of a certified historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization leasement on the last day of the tax year	neld a qualified conservation contribution in th	e form of a conservation  Held at the End of the Year	
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easemen	cs constant	2b	
c	Number of conservation easements on a certified	nistoric structure included in (a)	2c	
d	Number of conservation easements included in (c) structure listed in the National Register	acquired after 8/17/06, and not on a historic	2d	
3	Number of conservation easements modified, trar tax year ▶	sferred, released, extinguished, or terminated	d by the organization during the	
Ļ	Number of states where property subject to conse	rvation easement is located >	<u></u>	
5	Does the organization have a written policy regar and enforcement of the conservation easements i		ling of violations,	
<b>i</b>	Staff and volunteer hours devoted to monitoring,  •	inspecting, handling of violations, and enforci	ng conservation easements during the year	
,	Amount of expenses incurred in monitoring, inspe	cting, handling of violations, and enforcing co	nservation easements during the year	
3	Does each conservation easement reported on lin and section $170(h)(4)(B)(ii)$ ?	e 2(d) above satisfy the requirements of secti	on 170(h)(4)(B)(ı)	
)	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea:	of the footnote to the organization's financial	expense statement, and	
ar		ions of Art, Historical Treasures, or	Other Similar Assets.	
.a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIII, the text of the footnote to it	AS 116 (ASC 958), not to report in its revenuld for public exhibition, education, or research	n in furtherance of public service,	
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held for	AS 116 (ASC 958), to report in its revenue st	atement and balance sheet works of art,	
	following amounts relating to these items		<b>►</b> <i>↑</i>	
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$	
(i	ii)Assets included in Form 990, Part X		<b>&gt;</b> \$	
2	If the organization received or held works of art, lefollowing amounts required to be reported under			
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$	
b	Assets included in Form 990, Part X		<b>&gt;</b> \$	_

	Organizations Maintaining Col	lections of Art, I	HISTOFI	cai ii	<u>reasu</u>	res, or Otner	Similar Ass	<b>ets</b> (conti	nued)	
3	Using the organization's acquisition, accession items (check all that apply)	n, and other records	, check	any of	the fol	lowing that are a	significant use	of its coll	ection	
а	Public exhibition		d		Loan	or exchange prog	grams			
b	Scholarly research		е		Other					
c	Preservation for future generations									
4	Provide a description of the organization's col Part XIII	lections and explain	how the	ey furtl	ner the	organization's e	xempt purpose	ın		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than to						nılar	☐ Yes	□ N	0
Pai	rt IV Escrow and Custodial Arrange	ments					-			
	Complete if the organization answ X, line 21.		rm 990	, Part	IV, lır	ne 9, or reporte	ed an amount	: on Form	າ 990,	Part
1a	Is the organization an agent, trustee, custodincluded on Form 990, Part X?	an or other intermed	diary for	contri	butions	s or other assets	-	Yes	□ N-	0
ь	If "Yes," explain the arrangement in Part XIII	and complete the fe	ollowing	table			Am	ount		_
c	Beginning balance		9			1c				_
d	Additions during the year					1d				_
e	Distributions during the year					1e				_
f	Ending balance					1f				_
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21, for	escrow	v or cu:	stodial account li	ability? r	Yes	□ N	_
	•						' .			0
b									Ш	
ŀē	ert V Endowment Funds. Complete if									ll.
1 2	Beginning of year balance	(a)Current year	( <b>b</b> )P	rıor yea	<u>r   (</u>	(c)Two years back	(d) Inree years	раск (е)	our year	ѕ раск
	Contributions				_					
	Net investment earnings, gains, and losses				-+		-	-		
	Grants or scholarships				-+		-	-		
	Other expenditures for facilities and programs									
f	Administrative expenses							_		
	End of year balance							-		
_	·		. // 1			\	<u> </u>			
2	Provide the estimated percentage of the curre Board designated or quasi-endowment ►	ent year end balance	e (ime ri	g, colu	mm (a)	) neid as				
а	Permanent endowment ►									
b										
С	Temporarily restricted endowment ►	ldl 1000/								
3a	The percentages on lines 2a, 2b, and 2c shou Are there endowment funds not in the posses	·	tion that	t are h	eld and	d administered fo	r the			
<b>J</b> a	organization by	Sion of the organiza	COLL CITA	. 4,611	cia and	a administered fo	, circ		Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
	If "Yes" on 3a(II), are the related organization	·			? .			3b		
4	Describe in Part XIII the intended uses of the		wment f	runds						
Pa	rt VI Land, Buildings, and Equipmer Complete if the organization answ		m aan	Dart '	T\/ lin	o 11a Seo Eor	m 990 Part \	Y line 10		
	Description of property  (a) Cost or oth (investment)	ner basis (b)Cost	or other			(c)Accumulated of			ook value	2
1a	Land				$\dashv$					
	Buildings				-+					
	Leasehold improvements				$\overline{}$					
	Equipment				84,571		31,519			53,052
	Other				45,450		20,380			25,070
	Add lines 12 through 1e (Column (d) must e	gual Form 000 Part	V solur			0(a)	20,300			79 122

Part VII Investments—Other Securities. Complete if the org See Form 990, Part X, line 12.	ganization a	inswered '	Yes' on Form	990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)B			lethod of valuation nd-of-year market value
(1)Financial derivatives		-		,
(2)Closely-held equity interests				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related. Complete if the o	rganization	answered	'Ves' on For	m 990 Part IV line 11c
See Form 990, Part X, line 13.	_			
(a) Description of investment	(b) Book va	ilue		1ethod of valuation nd-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX  Other Assets. Complete if the organization answered 'Yes'	•  ' on Form 990	), Part IV, lı	ne 11d See Fo	orm 990, Part X, line 15
(1) (a) Description				(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )				•
<b>Part X Other Liabilities.</b> Complete if the organization answer See Form 990, Part X, line 25.	ered 'Yes' or	Form 99	), Part IV, lır	ne 11e or 11f.
(a) Description of liability     (1) Federal income taxes	(1	) Book val	ıe	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25 ) <b>2.</b> Liability for uncertain tax positions In Part XIII, provide the text of the f	footnote to th	le organizat	on's financial	etatements that reports the
organization's liability for uncertain tax positions and art XIII, provide the text of the r				_

Donated services and use of facilities . 2b b 2c c Recoveries of prior year grants . . . 2d

Other (Describe in Part XIII ) . d е Add lines 2a through 2d . . . . 3 Subtract line 2e from line 1 .

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b.

4 Other (Describe in Part XIII ) . . . . . . b

Total expenses and losses per audited financial statements .

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII ) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Other (Describe in Part XIII ) . . . . .

Supplemental Information

Schedule D (Form 990) 2016

Part XI

5

1

2

а b

d

е 3

а

b

c

Part XIII

5

4

Part XII

Add lines 4a and 4b . . .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

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

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

2a

2b 2c

2d

4b

Explanation

1,371

4c

2e

3

4c

5

1,371

2e

3

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

Page 4

8,651,733

8,651,733

1,371

8,653,104

8,474,704

8.474.704

1,371

8,476,075

Schedule D (Form 990) 2015

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

Schedule D (Form 990) 2016

### Additional Data

Software ID: Software Version:

**EIN:** 54-2024246

THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAX AUTHORITIES THE ALLIANCE RECORDE

Name: NATIONAL OILHEAT RESEARCH ALLIANCE

### **Supplemental Information**

Return Reference	Explanation
PART X, LINE 2	THE ALLIANCE IS REQUIRED TO MEASURE, RECOGNIZE, PRESENT, AND DISCLOSE IN ITS FINANCIAL STA TEMENTS UNCERTAIN INCOME TAX POSITIONS THE ALLIANCE HAS TAKEN IN THE TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION OR EXPECTS TO TAKE ON AN INCOME TAX RETURN THE ALLIANCE RECOGNIZE S THE TAX BENEFITS FROM UNCERTAIN INCOME TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT

D NO LIABILITY FOR UNCERTAIN INCOME TAX POSITIONS FOR ANY OPEN TAX YEARS

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	CONTRACT REVENUE REPORTED GROSS ON FORM 990 1,371

S

Supplemental Information		
Return Reference	Explanation	
PART XII, LINE 4B - OTHER ADJUSTMENTS	CONTRACT REVENUE REPORTED GROSS ON FORM 990 1,371	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493213010727 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number NATIONAL OILHEAT RESEARCH ALLIANCE 54-2024246 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes □ No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash other) or government assistance See Additional Data Table (1)(2)(3)(4)(6)(8)(9)(10)

(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . Schedule I (Form 990) 2016 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P

Page **2** 

(2) (3)

Schedule I (Form 990) 2016

(4) (5) (6)

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

(7)

Explanation

Return Reference GRANTEES SUBMIT AN ONLINE REQUEST FOR PAYMENT DIRECTLY TO THE THIRD PARTY VENDORS USED TO CONDUCT THE GRANT ACTIVITIES THE ONLINE

PART I, LINE 2 REQUEST INCLUDES A DESCRIPTION, INDICATION, AND CERTIFICATION OF HOW THE GRANT REBATE FULFILLS THE REQUIREMENTS OF THE NORA PUBLIC LAW

PRIOR TO PAYMENT, NORA MANAGEMENT REVIEWS THE REQUEST, ASK QUESTIONS AS APPROPRIATE, AND THEN APPROVES THE REQUEST, IF APPROPRIATE Schedule I (Form 990) 2016

## **Additional Data**

Form 990,Schedule I, Part	II, Grants and	Name	: : 54-2024246 : NATIONAL OILHEAT				
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	( <b>d)</b> Amount of cash grant	(e) Amount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONNECTICUT ENERGY MARKETERS ASSOCIATION 10 ALCAP RIDGE CROMWELL, CT 06416		501(C)(6)	665,944				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
MID-ATLANTIC PETROLEUM DISTRIBUTORS ASSOCIATION INC 3 CHURCH CIRCLE ANNAPOLIS, MD 21401		501(C)(6)	264,634				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
INDIANA PETROLEUM MARKETERS & CONVENIENCE STORE ASSOCIATION 600 EAST 96TH STREET SUITE 585 INDIANAPOLIS, IN 46240		501(C)(6)	11,174				RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING

if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) KENTUCKY PETROLEUM 501(C)(6) 70,554 RESEARCH & MARKETERS ASSOCIATION DEVELOPMENT, ENERGY 2365 HARRODSBURG ROAD EFFICIENCY.

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DEVELOPMENT, ENERGY

EFFICIENCY,

EDUCATION & TRAINING

SUITE A325 LEXINGTON, KY 40504				EDUCATION & TRAINING
MASSACHUSETTS ENERGY MARKETERS ASSOCIATION ONE VAN DE GRAAFF DRIVE	501(C)(6)	782,298		RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY,

MARKETERS ASSOCIATION
ONE VAN DE GRAAFF DRIVE
SUITE 100
BURLINGTON, MA 01803

MAINE ENERGY MARKETERS

DEVELOPMENT
EFFICIENCY,
EDUCATION &
TRAINING
RESEARCH &

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

ASSOCIATION

25 GREENWOOD ROAD BRUNSWICK, ME 04011 **(b)** EIN

ıf applıcable non-cash assistance organization grant cash (book, FMV, appraisal, or assistance or government assistance other)

(f) Method of valuation

(g) Description of

(h) Purpose of grant

MICHIGAN PETROLEUM ASSOCIATION 7521 WESTSHIRE DRIVE SUITE 200 LANSING, MI 48917	501(C)(6)	127,267		RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

(b) EIN

SUITE 200 LANSING, MI 48917				EDUCATION & TRAINING
OIL HEAT COUNCIL OF NEW HAMPSHIRE INC PO BOX 3898 CONCORD, NH 033023898	501(C)(6)	273,657		RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION &

GΥ

PO BOX 3898 CONCORD, NH 033023898				EFFICIENCY, EDUCATION & TRAINING
FUEL MERCHANTS	501(C)(6)	475,545		RESEARCH &

ASSOCIATION OF NEW JERSEY DEVELOPMENT, ENERGY 21 COMMERCE DRIVE SUITE EFFICIENCY,

202

EDUCATION & CRANFORD, NJ 07016 TRAINING

if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) EMPIRE STATE ENERGY 501(C)(6) 124,396 RESEARCH & ASSOCIATION DEVELOPMENT, ENERGY 250 JORDAN ROAD EFFICIENCY. TROY. NY 12180 FDUCATION &

(f) Method of valuation

(g) Description of

(h) Purpose of grant

11(01,111 12100				TRAINING
NEW YORK OIL HEATING ASSOCIATION INC 183 MADISON AVENUE SUITE 1403	501(C)(6)	337,320		RESEARCH & DEVELOPMENT, EN EFFICIENCY, EDUCATION &

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

**(b)** EIN

ENERGY TRAINING NEW YORK, NY 10016

501(C)(6) 282,131 RESEARCH &

UPSTATE NEW YORK ENERGY ASSOCIATION

DEVELOPMENT, ENERGY EFFICIENCY, 250 JORDAN ROAD

**EDUCATION &** 

TROY, NY 12065 TRAINING

if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) NORTH CAROLINA PETROLEUM 501(C)(6) 196,745 RESEARCH & & CONVENIENCE MARKETERS DEVELOPMENT, ENERGY ASSOCIATION EFFICIENCY.

(f) Method of valuation

(g) Description of

(h) Purpose of grant

**EDUCATION &** 

TRAINING

TRAINING RALEIGH, NC 27612

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

7300 GLENWOOD AVENUE

**(b)** EIN

HUDSON VALLEY OIL & ENERGY COUNCIL PO BOX 2550 NEWBURGH, NY 12550	501(C)(6)	165,696		RESEARCH & DEVELOPMENT, E EFFICIENCY, EDUCATION & TRAINING
				TIVATIVIO

ENERGY COUNCIL PO BOX 2550 NEWBURGH, NY 12550				DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
OT LIEAT INICTITUTE OF LONG	E04/6\/6\	200 642		DECEARCH 0

NEWBURGH, NY 12550				TRAINING
OIL HEAT INSTITUTE OF LONG	501(C)(6)	290,642		RESEARCH &

200 PARKWAY DR S SUITE 202

EFFICIENCY, **EDUCATION &** 

HAUPPAUGE, NY 11788

organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

(e) Amount of non-

(f) Method of valuation

(g) Description of

(h) Purpose of grant

DEVELOPMENT, ENERGY

EFFICIENCY,

TRAINING

**EDUCATION &** 

OHIO PETROLEUM MARKETERS & CONVENIENCE STORE ASSOCIATION 17 S HIGH STREET SUITE 810 COLUMBUS, OH 43215	501(C)(6)	191,227		RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
PENNSYLVANIA PETROLEUM	501(C)(6)	885,321		RESEARCH &

ASSOCIATION 911B SOUTH EISENHOWER BOULEVARD

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

RHODE ISLAND

A24

55 JOHN CLARKE ROAD UNIT

MIDDLETOWN, RI 02842

**(b)** EIN

MIDDLETOWN, PA 170340068

## DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING OIL HEAT INSTITUTE OF 501(C)(6) 166,128 RESEARCH &

**(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other)

RESEARCH &

MARKETERS ASSOCIATION 1809 GADSDEN STREET COLUMBIA, SC 29201				DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION & TRAINING
VERMONT FUEL DEALERS ASSOCIATION	501(C)(6)	149,764		RESEARCH & DEVELOPMENT, ENERGY

76,633

963 PAINE TURNPIKE NORTH EFFICIENCY. BERLIN, VT 05602 VIRGINIA PETROLEUM 501(C)(6) 217,804

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

501(C)(6)

(a) Name and address of

SOUTH CAROLINA PETROLEUM

RICHMOND, VA 23226

**EDUCATION &** TRAINING RESEARCH & CONVENIENCE AND GROCERY DEVELOPMENT, ENERGY ASSOCIATION EFFICIENCY, 7275 GLEN FOREST DRIVE **EDUCATION &** TRAINING SUITE 204

(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 if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance WASHINGTON OIL MARKETERS 501(C)(6) 17.173 RESEARCH & ASSOCIATION DEVELOPMENT, ENERGY

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

SUITE 101

MADISON, WI 53703

9390 ORCHARD AVE SE PORT ORCHARD, WA 98366				EFFICIENCY, EDUCATION & TRAINING
WISCONSIN PETROLEUM MARKETERS & CONVENIENCE STORE ASSOCIATION 122 W WASHINGTON AVE	501(C)(6)	166,177		RESEARCH & DEVELOPMENT, ENERGY EFFICIENCY, EDUCATION &

TRAINING

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Dat	ta -	DLN: 934	9321	3010	727
Sch	edule J	C	ompensat	ion Information	OM	IB No	1545-C	047
(Forr	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.						<u></u>
Depar	► Attach to Form 990.  Department of the Treasury  ► Information about Schedule J (Form 990) and its instructions is at							
Interna	al Revenue Service		<u>www.irs</u>	.gov/form990.	F		ectio	
	me of the organizational OILHEAT RES	SEARCH ALLIANCE			Employer identificat 54-2024246	ion nu	mber	
Pa	rt I Questi	ons Regarding Compensa	ition					
1a				of the following to or for a person listency ny relevant information regarding the			Yes	No_
	First-class	s or charter travel		Housing allowance or residence for	•			Ì
	_	companions	닏	Payments for business use of perso	onal residence			ì
		nification and gross-up payment	ts 📙	Health or social club dues or initiat				ì
	☐ Discretion	nary spending account	Ш	Personal services (e g , maid, chau	iffeur, chef)			Ì
b		xes in line 1a are checked, did t all of the expenses described ab		follow a written policy regarding payi nplete Part III to explain	ment or reimbursement	<b>1</b> b		Í
2				or allowing expenses incurred by all or, regarding the items checked in lin	e 1a <sup>?</sup>	2		
3	organization's C	CEO/Executive Director Check a	Il that apply Do	ed to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain				
	☑ Compens	ation committee	П	Written employment contract				Ì
		lent compensation consultant	Ä	Compensation survey or study				1
		of other organizations	<b>☑</b>	Approval by the board or compens	ation committee			Ì
4	During the year related organiza		990, Part VII, Se	ection A, line 1a with respect to the f	iling organization or a			
а	Receive a sever	rance payment or change-of-cor	itrol payment?			4a		No
b		r receive payment from, a supp		lified retirement plan?		4b		No
С		or receive payment from, an equ of lines 4a-c, list the persons an		nsation arrangement? plicable amounts for each item in Pai	rt III	4c		No
5	For persons liste	s), 501(c)(4), and 501(c)(29 ed on Form 990, Part VII, Section contingent on the revenues of		must complete lines 5-9. the organization pay or accrue any				
а	The organization	n?				5a		
b	Any related orga If "Yes," on line	anızatıon? : 5a or 5b, describe in Part III				5b		
6		ed on Form 990, Part VII, Section contingent on the net earnings o		the organization pay or accrue any				Í
а	The organization	n?				<b>6</b> a		
b	Any related orga					6b		
	•	6a or 6b, describe in Part III						1
7	For persons liste payments not d	ed on Form 990, Part VII, Section lescribed in lines 5 and 67 If "Ye	on A, line 1a, did s," describe in Pa	the organization provide any non-fix art III	red	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," o	describe	8		_
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in	Regulations section	9		
For F	Panerwork Redu	uction Act Notice, see the Ins	structions for Fo	orm 990. Cat No	50053T Schedule J	(Form	990)	2016

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

			rted on Schedule J, report					
instructions, on row (ii)	Do no	ot list any individuals that	at are not listed on Form 99	990, Part VII				
	ns (B	1	ndividual must equal the to					
(A) Name and Title		(B) Breakdown (i) Base compensation	n of W-2 and/or 1099-MISO (ii) Bonus & incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
1 JOHN HUBERPRESIDENT	(i)	277,682	0	0	12,394	0	290,076	0
	(ii)		0	0	0	0	0	0
See Additional Data Table	115.6					1	J	
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	<u></u> _ '							
	Ι'	'	1	1	'			

Schedule J (Form 990) 2016	Page <b>3</b>				
Part III Supplemental Information					
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation				

Schedule 1 (Form 990) 2016

efile GRAPH	IC print	- DO NOT PROCESS	As Filed Data -		DLI	N: 93493213010727		
SCHEDULE O (Form 990 or 990-		Supplement	OMB No 1545-0047 2016					
Form 990 or 990-EZ or to provide any additional information.  Attach to Form 990 or 990-EZ.  Department of the Treasury  Www.irs.gov/form990.						Open to Public Inspection		
Internal Revenue See Name of the org NATIONAL OILHEA					Employer identification numl 54-2024246			
990 Schedul	e O, Sup	pplemental Informatio	n					
Return Reference				Explanation				
FORM 990, PART VI, SECTION A,	LION GA	HE ALLIANCE IS COMPOSED OF MEMBERS FROM (1) STATES WITH OILHEAT SALES IN EXCESS OF 32 MIL ION GALLONS PER YEAR OR AT LEAST 24 STATES AND DISTRICTS, (2) RETAIL MARKETERS OF OILHEAT IALES, (3) WHOLESALE DISTRIBUTORS OF OILHEAT, AND (4) THE GENERAL PUBLIC NEW MEMBERS ARE						

LINE 6

APPROVED BY THE BOARD OF DIRECTORS

Return Explanation
Reference

FORM 990,	FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR PRIOR TO FILING IT IS NOT PROVIDED TO THE BOARD OF
PART VI,	DIRECTORS PRIOR TO ISSUANCE
SECTION B,	
LINE 11B	

Return Explanation
Reference

FORM 990, PART VI, ENTIAL CONFLICTS OF INTEREST THE EXECUTIVE DIRECTOR ALSO MONITORS COMPLIANCE WITH THE CON SECTION B, FLICT OF INTEREST POLICY

Return Explanation
Reference

FORM 990, COMPENSATION IS DETERMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS
PART VI,
SECTION B,
LINE 15A

Return Explanation
Reference

FORM 990, PART VI, SECTION C, LINE 19

Return Explanation
Reference

FORM 990,
PART XII,
LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR RELATED TO THE ORGANIZATION'S OVERSIGHT PR
OCESS OR SELECTION PROCESS IN CONNECTION WITH ITS AUDIT COMMITTEE'S ASSUMED RESPONSIBILITY
FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT AC
COUNTANT