Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

► Information about Form 990 and its instructions is at www.irs.gov/form990.

2016 Open to Public Inspection

OMB No. 1545-0047

For the 2016 calendar year, or tax year beginning 07/01/16, and ending 06/30/17 C Name of organization Check if applicable: Energy Consumers Alliance of New D Employer identification number Address change England, Inc. Doing business as 04-2791314 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 284 Amory Street Initial return 617-524-3950 Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated Jamaica Plain MA 02130 2,566,251 G Gross receipts \$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Application pending Lawrence Chretien 284 Amory Street H(b) Are all subordinates included? Jamaica Plain MA 02130 If "No." attach a list, (see instructions) X 501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 527 www.massenergy.org Website: H(c) Group exemption number Form of organization: X Corporation Trust Association Year of formation: 1982 Part I Summary 1 Briefly describe the organization's mission or most significant activities: See Schedule O Activities & Governance 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 14 4 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 24 5 6 Total number of volunteers (estimate if necessary) 0 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 . . **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 137,323 160,951 Revenue 9 Program service revenue (Part VIII, line 2g) 2,704,394 2,394,042 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 13,355 11,258 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,855,072 2,566, 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,153,842 1,087,044 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17,435 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,602,499 1,542,480 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 2,756,341 2,629,524 19 Revenue less expenses. Subtract line 18 from line 12 98,731 -63,273 Assets or Balances Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 2,717,678 2,521,250 21 Total liabilities (Part X, line 26) 1,296,346 1,163,191 22 Net assets or fund balances. Subtract line 21 from line 20 . 1,421,332 1,358,059 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here Lawrence Chretien Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Paid Lillian Gonzalez, CPA MST CSEP CSRP Lillian Gonzalez, CPA MST CSEP CSRP 02/24/18 self-employed P00675366 Preparer Gonzalez and Associates, P.C. Firm's name 27-2630858 Firm's EIN Use Only 14 Page Terrace Stoughton, MA 02072 781-344-1040 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	1	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	X	
	candidates for public office? If "Yes," complete Schedule C, Part I			x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-	41	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	Ť		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			t
	"Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Minas Street	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
а	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		7.5	
b		11a	x	
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	446		x
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		<u></u>
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d		110		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
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			
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	-	<u>x</u>
	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			v
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15	-	<u>x</u>
	assistance to or for foreign individuals? If "Ves " complete Schedule F. Parts III and IV	16		x
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		44
	Part IX. column (A) lines 6 and 11e7 If "Ves." complete Schedule G. Part I (see instructions)	17		x
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	.,		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		x

			Yes	No
20a	The state of the s	20a		x
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		x
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		х
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? If "Yes," complete Schedule J	23		x
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		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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		х
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		94	
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
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		x
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	600000000000000000000000000000000000000	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	-23		
	conservation contributions? If "Ves " complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	-00		
	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-01		
	complete Schodule N. Part II.	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- OZ		
	sections 301 7701-2 and 301 7701-32 If "Ves." complete Schedule R. Part I.	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	- 55		
	or IV and Part V line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	SSA		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	25h		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
	related organization? If "Voc." complete School-le P. Port V. line O.	20		x
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u>~</u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	27		v
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		X
	19? Note. All Form 990 filers are required to complete Schedule O.	.		
-	10. Have the form ode more are required to complete acriedule O.	38	X	_

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 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable b 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 2a If at least one is reported on line 2a, did the organization file all required federal employment tax returns? x Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 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 X 4a 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). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 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? X If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 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 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7f** If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g 7a If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? a 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b 9b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders a 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year _____ 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand C Did the organization receive any payments for indoor tanning services during the tax year? x 14a 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O b

04-2791314 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? x Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 x 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a Each committee with authority to act on behalf of the governing body? b х Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Did the organization have local chapters, branches, or affiliates? х If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a x 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a x Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? x 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done х 12c Did the organization have a written whistleblower policy? 13 x 13 Did the organization have a written document retention and destruction policy? 14 x 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official x 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . X Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: Energy Consumers Alliance of NE

284 Amory Street

MA 02130

617-524-3950

Jamaica Plain

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensation 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	

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

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

(A) Name and Title	(B) Average		(C) Position					(D) Reportable	(E) Reportable	(F) Estimated
	hours per week					than one is both ar		compensation from	compensation from related	amount of other
	(list any hours for	- 10				or/trustee)		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highe		(W-2/1099-MISC)	(**-21035-141130)	organization
	organizations below dotted	dual ector	utiona	14	mplo	est co	1			and related organizations
	line)	truste	al trus		yee	mpen				
		ě	stee			Highest compensated employee				
(1) Daniel Ruben							+			
	5.00			i j						
Clerk	0.00	x		x				0	0	0
(2) Liz Tiley										
<u> </u>	5.00									
Treasurer	0.00	X		X			4	0	0	0
(3) Sandi Bagley	F 00									
President	5.00	x		x						
(4) Richard Rudolph	0.00	^		_			+	. 0	0	0
(4) The character induces plan	2.00									
Director	0.00	x						0	0	0
(5) Bruce Biewald		1					+			
	2.00									
Director	0.00	X						0	0	0
(6) Debra Perry										
	2.00								22-3	
Director	0.00	x		-	_		+	0	0	0
(7) Yuki Yamamoto	5.00						1			
Asst. Treasurer	0.00	x		x						•
(8) Deborah Donovan	0.00	^		^	-	-	+	0	0	0
(-,	2.00									
Director	0.00	x						0	0	0
(9) Robert Shatten							†			
	2.00									
Director	0.00	x						0	0	0
(10) David Jacobson	7. T. S.	(* A) (****)								
<u> </u>	5.00									
Vice-President	0.00	X		х	_		1	0	0	0
(11) Tom Reid	0.00									
Director	2.00	,,								2
DAA	0.00	X						0	0	Form 990 (2016)

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Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII ... (A) Total revenue (B) Related or Revenue Unrelated exempt function business excluded from tax revenue under sections revenue 1a Federated campaigns b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e 15,000 f All other contributions, gifts, grants, and similar amounts not included above 1f 145,951 g Noncash contributions included in lines 1a-1f: h Total. Add lines 1a-1f. 160,951 Program Service Revenue Busn. Code Contract Service Fees 894,958 894,958 Green Energy 807,564 807,564 Bulk Buying Service Fees 501,101 501,101 d Member Fees 142,470 142,470 Consulting Fees 30,665 30,665 f All other program service revenue 17,284 17,284 g Total. Add lines 2a-2f..... 2,394,042 3 Investment income (including dividends, interest, and other similar amounts) 11,258 11,258 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents b Less: rental exps. c Rental inc. or (loss) d Net rental income or (loss) (i) Securities (ii) Other sales of assets other than inventor b Less: cost or other basis & sales exps. c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events . 9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 2,566,251 2,394,042 11,258

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete 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, (A) Total expenses (B) (C) (D) Fundraising Program service Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 118,285 70,280 44,446 3,559 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 778,586 588,125 183,876 6,585 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 115,678 85,058 29,619 1,001 74,495 Payroll taxes 55,126 18,624 Fees for services (non-employees): Management Legal 37,579 34,061 3,518 Accounting 20,017 20,017 Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees _____ Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 166,619 109,260 57,359 Advertising and promotion 48,516 3,713 12 44,803 Office expenses 94,216 74,572 15,901 3,743 Information technology 11,213 14 8,298 2,803 15 Royalties 16 Occupancy 129,880 96,112 32,470 1,298 17 Travel 5,808 5,311 497 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 39,274 19 3,924 35,350 524 Interest 524 Payments to affiliates 21 Depreciation, depletion, and amortization 22,130 16,376 22 5,533 221 15,338 23 Insurance 7,646 7,589 103 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.) Renewable Energy Certific 771,581 771,581 Bank Charges 27,369 27,286 83 Data Management 27,000 27,000 Heat Pump Program 25,600 25,600 All other expenses 99,816 77,375 22,373 68 Total functional expenses. Add lines 1 through 24e 2,629,524 2,127,794 25 484,295 17,435 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

	art	Check if Schedule O contains a response or no	ote to any line i	n this Part Y			П
		Silver in Contraction of Contraction of Cooperate of The	ste to uny mie i	THE TAIL A	(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			846,521	1	809,762
	2	Savings and temporary cash investments		2			
	3	rieuges and grants receivable, net				3	25,000
	4	Accounts receivable, net			601,455	4	491,928
	5	Loans and other receivables from current and former	officers, direct	ors,			
		trustees, key employees, and highest compensated e					
		Complete Part II of Schedule L				5	100 - 10 - 4 - 10 - 10 - 10 - 10 - 10 -
	6	Loans and other receivables from other disqualified p	ersons (as def	ined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B					
		sponsoring organizations of section 501(c)(9) volunta	ry employees'	beneficiary			
ts		organizations (see instructions). Complete Part II of S	Schedule L			6	
Assets	7		****		471,114	7	471,114
Ä	8	inventories for sale or use		CONTRACTOR		8	
	9	Prepaid expenses and deferred charges			48,406	9	39,884
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	49,236			
	b	Less: accumulated depreciation	10b	33,777	17,651	10c	15,459
3	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11		·····		13	
	14	Intangible assets		103,500	14	138,992	
	15	Other assets. See Part IV, line 11			629,031	15	529,111
	16	Total assets. Add lines 1 through 15 (must equal line	34)		2,717,678		2,521,250
	17	Accounts payable and accrued expenses			1,109,049		1,048,086
	18	Grants payable			18		
- 1	19	Deferred revenue			90,410	19	113,805
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete Part IV		21			
Se	22	Loans and other payables to current and former office	ers, directors,				
Liabilities		trustees, key employees, highest compensated employees					
iab		disqualified persons. Complete Part II of Schedule L		<u> </u>		22	5478-W878-BECKSSN4NESSN000600-00000000000000
-	23	Secured mortgages and notes payable to unrelated th	ird parties		95,587	23	
	24	Unsecured notes and loans payable to unrelated third	parties			24	
	25	Other liabilities (including federal income tax, payable	d				
- 1		parties, and other liabilities not included on lines 17-24	art X				
		of Schedule D		1,300	25	1,300	
	26	Total liabilities. Add lines 17 through 25			1,296,346	26	1,163,191
		Organizations that follow SFAS 117 (ASC 958), che	eck here 🕨	X and			
ces		complete lines 27 through 29, and lines 33 and 34.					
lan	27	Unrestricted net assets			1,276,370	27	1,118,166
Ba	28	Temporarily restricted net assets	144,962	28	239,893		
밀	29	Permanently restricted net assets			29		
E		Organizations that do not follow SFAS 117 (ASC 9)					
0 8		complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds			30		
As	31	Paid-in or capital surplus, or land, building, or equipme	ent fund			31	
Net	32	Retained earnings, endowment, accumulated income,	or other funds			32	
	33	Total net assets or fund balances			1,421,332	33	1,358,059
	34	Total liabilities and net assets/fund balances		***************	2,717,678	34	2,521,250

Form 990 (2016)

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

Form 990 (2016)

x

2c X

3a

Schedule O.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Open to Public ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection

Internal Revenue Service Name of the organization

Part I

Department of the Treasury

Energy Consumers Alliance of New

Employer Identification number

OMB No. 1545-0047

England, Inc. 04-2791314 Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The	orga			ise it is: (For lines 1 through 12,							
1				sociation of churches described							
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3	Ц	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
	_	city, and state:									
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
		section 170	(b)(1)(A)(iv). (Complete Par	t II.)				¥.			
6	Ц	A federal, st	ate, or local government or	governmental unit described in	section 1	70(b)(1)(/	A)(v).				
7	Ш	An organiza described in	tion that normally receives a section 170(b)(1)(A)(vi). (0	substantial part of its support f	rom a gov	ernmenta	al unit or from the general publi	С			
8				170(b)(1)(A)(vi). (Complete Pa	rt II.)						
9				scribed in section 170(b)(1)(A)		ted in con	iunction with a land-grant colle	ege			
		or university	or a non-land grant college	of agriculture (see instructions)	. Enter the	e name, c	ity, and state of the college or	30			
		university:									
10	X	An organiza	tion that normally receives: ((1) more than 33 1/3% of its sur	port from	contribut	ions, membership fees, and gr	oss			
		receipts from	n activities related to its exer	mpt functions—subject to certain	n exception	ons, and (no more than 33 1/3% of its				
		acquired by	the organization after lune ?	and unrelated business taxable in 30, 1975. See section 509(a)(2	ncome (le	ess section	n 511 tax) from businesses				
11	П			exclusively to test for public sa							
12	H			exclusively for the benefit of, to				200			
		of one or mo	ore publicly supported organi	zations described in section 50	09(a)(1) or	section	509(a)(2). See section 509(a)	(3)			
		Check the bo	ox in lines 12a through 12d t	hat describes the type of suppo	orting orga	nization a	and complete lines 12e, 12f, an	d 12g.			
	a	Type I. A	A supporting organization op	erated, supervised, or controlle	d by its su	apported of	organization(s), typically by givi				
		the supp	orted organization(s) the po-	wer to regularly appoint or elect	a majorit	y of the di	rectors or trustees of the				
	757			complete Part IV, Sections A							
	b	Type II.	A supporting organization su	pervised or controlled in conne	ction with	its suppo	rted organization(s), by having				
		control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.									
	С			supporting organization operate	d in sonn	antian with					
	•	its suppo	orted organization(s) (see ins	structions). You must complete	e Part IV.	Sections	A. D. and E.	itn,			
	d			d. A supporting organization op				on(s)			
		that is no	ot functionally integrated. The	e organization generally must s	atisfy a di	stribution	requirement and an attentiven	ess			
				must complete Part IV, Section							
	е	Check th	is box if the organization rec	ceived a written determination fr	om the IF	S that it is	s a Type I, Type II, Type III				
	f		mber of supported organizat	n-functionally integrated suppor	ting organ	nization.					
				ne supported organization(s).							
/I)		of supported	(ii) EIN		(ha) to the						
(1)		anization	(ii) Eliv	(ill) Type of organization (described on lines 1–10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see			
				above (see instructions))	MIDS AND ROUGH PACK	ment?	instructions)	instructions)			
					Yes	No					
(A)											
(B)											
	-				-						
(C)											
(D)											
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Schedule A (Form 990 or 990-EZ) 2016 Energy Consumers Alliance of New 04-2791314 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total Amounts from line 4 7 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 12 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, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2015 Schedule A, Part II, line 14 15 15 %

16a	33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this
	box and stop here. The organization qualifies as a publicly supported organization
b	33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check
	this box and stop here. The organization qualifies as a publicly supported organization
17a	
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in
	Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported
	organization
b	10%-facts-and-circumstances test—2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

supported organization

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions Schedule A (Form 990 or 990-EZ) 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.)

Sec	ction A. Public Support	quality direct th	e tests listed be	slow, please co	implete Fait II.		
	endar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	390,878	267,761				
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,793,554	2,586,769	2,428,660	137,323 2,687,110	2,376,758	1,200,282
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	3,184,432	2,854,530	2,672,029	2,824,433	2,537,709	14,073,133
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	280,000	150,000	125,000	25,000	79,200	659,200
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						
С	Add lines 7a and 7b	280,000	150,000	125,000	25,000	79,200	659,200
8	Public support. (Subtract line 7c from line 6.)						13,413,933
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	3,184,432	2,854,530	2,672,029	2,824,433	2,537,709	14,073,133
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	14,641	17,565	15,259	13,355	11,258	72,078
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	14,641	17,565	15,259	13,355	11,258	72,078
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						H (0 - 25
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	3,199,073	2,872,095	2,687,288	2 937 700	2 540 057	14 145 011
14	First five years. If the Form 990 is for the				2,837,788	2,548,967	14,145,211
	organization, check this box and stop here						▶ □
Sec	tion C. Computation of Public Su	pport Percenta	ge		2007 H-0.000		
15	Public support percentage for 2016 (line 8,	column (f) divided b	y line 13, column	(f))		15	94.83%
16	Public support percentage from 2015 Sche	dule A, Part III, line	15			16	93.69%
	tion D. Computation of Investmen	nt Income Perc	entage				
17	Investment income percentage for 2016 (lin	ne 10c, column (f) d	ivided by line 13, o	olumn (f))			1%
18	Investment income percentage from 2015 S						%
19a	33 1/3% support tests—2016. If the organ 17 is not more than 33 1/3%, check this box						▶ X
b	33 1/3% support tests—2015. If the organ						🗸 🗀
	line 18 is not more than 33 1/3%, check this						▶ 🗆
20	Private foundation. If the organization did						

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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

- Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 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 in section 509(a)(1) or (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.
- 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.
- 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.
- 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.
- 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.
- c 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.
- 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).
- 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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 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 organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 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 substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1	-10	
2		
3a		
3b 3c		
4a		
4b		
4c		
5a 5b		
5c		
6		
8		
0		
9a		
9b 9c		0 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
10a		

Section E. Type III Functionally-Integrated Supporting Organiza	itions

- 2 Activities Test. Answer (a) and (b) below.

supported organizations played in this regard

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in 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.

income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's

- 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.
- 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 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.

	Yes	No
2a		
2b		100000000000000000000000000000000000000
3a		
3b		///

3

Schedule A (Form 990 or 990-EZ) 2016 Energy Consumers All Part V Type III Non-Functionally Integrated 509(a)(3) Supply			L314 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supp 1 Check here if the organization satisfied the Integral Part Test as a qualify instructions. All other Type III non-functionally integrated supporting org	ing trust on Nov. 20, 19	70 (explain in Part VI).	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		To provide the second
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
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	(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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e 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 amour	nt,	With the second	
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		V-11.00000000000000000000000000000000000
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		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

4

5

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

4 Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

emergency temporary reduction (see instructions).

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016

Breakdown of line 7:

c Excess from 2014 .d Excess from 2015 .e Excess from 2016 .

b Excess from 2013

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2016

Open to Public Inspection

Department of the Treasury Internal Revenue Service Same and the same tax of all contains of the c

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 II							
Nam	e of organization Energy Consumers Al	liance of New			tification number			
-	England, Inc.			04-27913	14			
-	t I-A Complete if the organization is exen				on.			
1	Provide a description of the organization's direct and indire	ect political campaign activities	in Part IV. (see in	structions for				
-	definition of "political campaign activities")							
2	Political campaign activity expenditures (see instructions)			▶\$				
3	Volunteer hours for political campaign activities (see instru	uctions)						
	t I-B Complete if the organization is exen							
1	Enter the amount of any excise tax incurred by the organiz	zation under section 4955		▶\$				
2	Enter the amount of any excise tax incurred by organization	on managers under section 495	55	▶ \$				
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No			
4a	Was a correction made?				Yes No			
D	If "Yes," describe in Part IV.				- Walley			
	t I-C Complete if the organization is exen			ion 501(c)(3).				
1	Enter the amount directly expended by the filing organization							
_	activities Enter the amount of the filing organization's funds contributed to other organizations for section							
2								
_	527 exempt function activities Total exempt function expenditures Add lines 1 and 2. Fatar have and a Fatar have have a fatar							
3	The state of the s							
- 2	line 17b Did the filing organization file Form 1120-POL for this year? Yes No							
4	Did the filing organization file Form 1120-POL for this yea	r?			Yes No			
5	Enter the names, addresses and employer identification no	umber (EIN) of all section 527	political organization	ons to which the filing				
	organization made payments. For each organization listed	, enter the amount paid from th	e filing organization	n's funds. Also enter				
	the amount of political contributions received that were pro-							
	as a separate segregated fund or a political action commit	tee (PAC). If additional space i	s needed, provide	information in Part IV.				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political			
		1		filing organization's	contributions received and promptly and directly			
				funds. If none, enter -0	delivered to a separate			
					political organization. If			
					none, enter -0			
(1)								
(2)								
(3)								
(4)								
(5)								
·->					,			
(6)			æ					

						1497.5	ENERGY 05576010 0.701
36,8525106	edule C (Form 990 or 990-EZ) 2016 Energart II-A Complete if the organizes section 501(h)).						Page 2 tion under
	Check ► ☐ if the filing organization name, address, EIN, Check ► ☐ if the filing organization	expenses, and	share of excess lo	bbying expen	ditures).	ited group	member's
	Limits on Lob (The term "expenditures" r	bying Expend neans amounts	itures paid or incurred.)		(a) Filing organization's total	als	(b) Affiliated group totals
t c c		egislative body (di nd 1b) es 1c and 1d)	rect lobbying)	·····			
	If the amount on line 1e, column (a) or (b) is:	The lobbying n	ontaxable amount is:				
	Not over \$500,000	20% of the amou	int on line 1e.				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15	5% of the excess over \$50	00,000.			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10	0% of the excess over \$1,	,000,000.			
- 1	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 59	% of the excess over \$1,5	600,000.		100	
	Over \$17,000,000	\$1,000,000.					
h	Grassroots nontaxable amount (enter 25% Subtract line 1g from line 1a. If zero or less Subtract line 1f from line 1c. If zero or less, If there is an amount other than zero on eith reporting section 4911 tax for this year?	enter -0- enter -0- ner line 1h or line 1	i, did the organization	file Form 4720			Yes No
	(Some organizations that made	4-Year Average a section 501(ging Period Under	section 501(h) nave to comple	te all of the fiv		
	Lot	bying Expendi	tures During 4-Year	r Averaging Pe	eriod		
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2	2016	(e) Total
2a	Lobbying nontaxable amount						Ojum-somes
b	Lobbying ceiling amount (150% of line 2a, column(e))						
С	Total lobbying expenditures						

d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2016

(election under section 501(h)).	1 1	2)	/	,,	_
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(4	a)	(b	"	
description of the lobbying activity.	Yes	No	Amo	unt	
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: a Volunteers?		x			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	x				
c Media advertisements?		x		Santa Arresto	Lagrania
d Mailings to members, legislators, or the public?		x			
e Publications, or published or broadcast statements?		х			
f Grants to other organizations for lobbying purposes?		x			
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X			2,	965
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		x		and the sec	
i Other activities?	х				808
j Total. Add lines 1c through 1i				3,	773
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			A company of the comp		NO BUS
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 5			•		
501(c)(6).	001(0)(5),	or sect	ion		
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	103	140
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior	vear?		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Nanswered "Yes."	i01(c)(5),	or sect	ion	3, is	
Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
political expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b		1.691	
c Total		2c		1-0-25me	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV Supplemental Information					
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, lin	es 1 and			
(see instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
Schedule C, Part II-B, Line 1					
Discuss legislation with allies and legislators about	locial:	a+ i a-		ا ترس	~ ~
registration with allies and legislators about	redizi	ation	rega	ıra1	ng
energy efficiency and utility procurement of energy su	227				
one of the state o	λħΤΧ •				
***************************************		emeneral e la selección de	compartioners are content		

Schedule C (Fo	rm 990 or 990-EZ) 2	2016 Energy	Consumers	Alliance	of New	04-2791314	Page 4
Part IV	Suppleme	ntal Informatio	n (continued)	W			

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							20
		*****************	*****************		• • • • • • • • • • • • • • • • • • • •	***************************************	
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				,		***************************************	

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization Employer Identification number Energy Consumers Alliance of New England, Inc. 04-2791314 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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)? 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. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a 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. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

1400004250	art III Organizations Maintaining					/ STST4	nanta (aar	tinung	Page ∡
3		on and other recor	de check any of the	following that a	or Otne	icenture of its	ssets (cor	unuec	1)
	collection items (check all that apply):	on, and other record	us, check any or the	ionowing that a	ire a sigrili	icani use oi iis			
a	Public exhibition	d 🗌	Loan or exchange p	rograme					
b		e H		A DESCRIPTION OF THE PROPERTY					
c		• 🗆	Other						
4	Provide a description of the organization's co	llections and evolai	in how thay further th	o organization	lo ovomet	numana in Dad			
	XIII.	nections and explai	in now they further th	le organization	s exempt	purpose in Pan	Ë		
5	During the year, did the organization solicit or	receive donations	of art historical trace	ouros or other	olmilar				
•	assets to be sold to raise funds rather than to							v [_ N.
P	art IV Escrow and Custodial Arra		part of the organizati	on's collection	<u> </u>			Yes	No
Estable	Complete if the organization		" on Form 990 F	Part IV line	O or ron	orted on om	ount on E	orm	
	990, Part X, line 21.	answered res	5 OH I OHH 990, F	art iv, inte	e, or rep	orted arram	bunt on F	ווווכ	
12	Is the organization an agent, trustee, custodia	an or other intermed	diany for contributions	or other sees	to not				- 1
								V	N
h	included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a	and complete the fe	lowing table:				Ц	Yes	No
~	in 165, explain the arrangement in Fart XIII a	and complete the ic	mowing table.				Λm	ount	
	Beginning halance						AIII	Julit	_
4	Beginning balance	****************				1c			
	Additions during the year		*******************			1d			
f	Distributions during the year					1e			
22	Ending balance	orm 000 Part V line				1f		F	
h	Did the organization include an amount on Fo	Chaek bara if the a	e 21, for escrow or cu	ustodiai accour	nt liability?		Ц	Yes	_ No
	art V Endowment Funds.	Check here if the e	xpianation has been	provided on P	art XIII				
Minde	Complete if the organization	answered "Ves	" on Form 000 E	Opt IV line	10				
	Complete if the organization	(a) Current year						_	
1-	Paginning of year halance	TOTAL CONTRACTOR OF THE STATE O	(b) Prior year	(c) Two yea	ars back	(d) Three years	back (e)	Four year	s back
h									
0	Contributions			-				-77	
·	Net investment earnings, gains, and								
	losses					- 19 ₀₀₋₁₀₀			-
	Grants or scholarships							.elie.	
е	Other expenditures for facilities and								
	programs								
g	***************************************								
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, column (a)) held as:					
a h	Board designated or quasi-endowment	%							
	Permanent endowment ▶ %								
C	Temporarily restricted endowment ▶	%							
20	The percentages on lines 2a, 2b, and 2c should be a sh								
3a	Are there endowment funds not in the possess	sion of the organiza	ation that are held an	d administered	for the				1
	organization by:							Yes	No
	(i) unrelated organizations						3a		-
	(ii) related organizations						3a(ii)	
D	If "Yes" on line 3a(ii), are the related organizat	ions listed as requi	red on Schedule R?				31)	
	Describe in Part XIII the intended uses of the		wment funds.				- "		
Pa	Land, Buildings, and Equip			100 22 12 11 22 11 11		725 00 00 00 0			
-	Complete if the organization				1a. See	Form 990, I	art X, line	<u> 10.</u>	
	Description of property	(a) Cost or other b	2011 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	r other basis		ccumulated	(d) B	ook value	
		(investment)	(ot	ther)	dep	preciation ·			
1a	Land								
b	Buildings								
	Leasehold improvements			10,681		10,681			
d	Equipment			38,555		23,096		15,	459
<u>e</u>	Other	I					L		
otal	. Add lines 1a through 1e. (Column (d) must ed	ual Form 990, Part	X, column (B), line	10c.)		•		15.	459

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Tenant Security Deposit	1,300
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Tota	II. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,300

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.....

	edule D (Form 990) 2016 Energy Consumers Alliance of New 04-27913:	L#	Page 4
Pa	art XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	tera 1995 i Maranolo es a entretan 1996 i Maranolo
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	2,614,504
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	5	-	
b		-	
c			
d	7-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3	-	40 252
e		2e	48,253
3 4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	2,566,251
a			
b	The state of the s		
	Add lines for and the	55555	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4c	2,566,251
	art XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	neturi	1.
1	Total expenses and lesses per sudited financial statements	1	2,696,140
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		2/050/140
a			
b		1	
c		1	
d			
е	Add lines 2a through 2d	2e	66,616
3	Subtract line 2e from line 1	3	2,629,524
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	- produce and the production of the complete and the comp		
b			
С	Add lines 4a and 4b	4c	
		1 40	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,629,524
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information.		2,629,524
Pa Provi	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; F	5	
Pa Provi 2; Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Furt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	5 Part X, li	ne
Pa Provi 2; Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; F	5 Part X, li	ne
Pa Provi 2; Pa Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Bart XI, Line 2d - Revenue Amounts Included in Financials -	5 Part X, li	ne er
Pa Provi 2; Pa Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. In XI, Line 2d - Revenue Amounts Included in Financials -	5 Part X, li	ne
Pa Provi 2; Pa Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. In XI, Line 2d - Revenue Amounts Included in Financials -	5 Part X, lii	ne er
Pa Provi 2; Pa Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. In XI, Line 2d - Revenue Amounts Included in Financials -	5 Part X, lii	ne er
Pa Provi 2; Pa Pa St	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. In XI, Line 2d - Revenue Amounts Included in Financials - Subsidiary's income	5 Part X, lii	ne er 48,253
Pa Provi 2; Pa Pa St	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. In XI, Line 2d - Revenue Amounts Included in Financials -	5 Part X, lii	ne er 48,253
Pa Provi 2; Pa Pa St	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. In XII, Line 2d - Revenue Amounts Included in Financials - Subsidiary's income Art XII, Line 2d - Expense Amounts Included in Financials -	5 Part X, lii Othe	ne er 48,253 ner
Pa Provi 2; Pa Pa St	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. In XI, Line 2d - Revenue Amounts Included in Financials - Subsidiary's income	5 Part X, lii Othe	ne er 48,253
Pa Provi 2; Pa Pa St	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. Ide 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; Fart XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. In XII, Line 2d - Revenue Amounts Included in Financials - Subsidiary's income Art XII, Line 2d - Expense Amounts Included in Financials -	5 Part X, lii Othe	ne er 48,253 ner
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Schedule D	(Form 990) 20	16 Energ	y Consume	ers All	iance o	of New	04-2791	.314	Page 5
Part XII	I Suppler	nental Inforn	nation (contin	ued)					
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2016

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Energy Consumers Alliance of New England, Inc.

Employer identification number 04-2791314

Form 990 - Organization's Mission
Promotion of energy affordability and environmental sustainability. ECANE
eases the burden of high energy costs through discount heating oil,
education on energy efficiency, public advocacy, and an "Oil Bank" for
households in need. ECANE also promotes the development and usage of
renewable energy sources by members of the organization and the public at
large.
Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
The Executive Director and Board of Directors review a draft copy prior to
filing.
Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Periodic reviews are completed and the governing board must complete annual
statements and disclosures forms.
Form 990, Part VI, Line 15a - Compensation Process for Top Official
The review and approval of compensation for the Executive Director is
completed annually by the Board of Directors.
Form 990, Part VI, Line 15b - Compensation Process for Officers
All staff members' compensation is reviewed at least annually against
salary survey information for nonprofits in the Boston/Providence area.
Salary and hourly rates are set based on this information and cost of
living adjustments.

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Related Organizations and Unrelated Partnerships

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

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

Energy Consumers Alliance of New

Department of the Treasury Internal Revenue Service Name of the organization

SCHEDULE R (Form 990)

OMB No. 1545-0047

Open to Public Inspection 2016

Employer identification number

(f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. 04-2791314 (e) End-of-year assets Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income Legal domicile (state or foreign country) (b) Primary activity (a)Name, address, and EIN (if applicable) of disregarded entity England, Inc. Part Part II Ξ 8 ල 4 (2)

(g) Section 512(b)(13) controlled entity? 9 Yes (f) Direct controlling entity (e)
Public charity status
(if section 501(c)(3)) (d) Exempt Code section (c) Legal domicile (state or foreign country) (b) Primary activity (a)Name, address, and EIN of related organization Ξ 3 3 (2) ල

Schedule R (Form 990) 2016

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

04-2791314

Energy Consumers Alliance of New

Schedule R (Form 990) 2016

Page 2 Schedule R (Form 990) 2016 Percentage ownership (i) Section 512(b)(13) controlled entity? 8 3 (J) General or managing Yes No partner? 355,348 100.000000 Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Percentage ownership Ξ amount in box 20 of Schedule K-1 Code V-UBI (Form 1065) Share of end-of-year assets (h) Dispro-portionate Yes No alloc.? Share of end-of-year assets -18,363 Share of total (f) Share of total (C corp, S corp, Type of entity Ü (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) Direct controlling Ð (d)
Direct controlling
entity foreign country) Legal domicile (state or M (c) Legal domicile foreign country) (state or Primary activity Primary activity Energy 9 (1)Amory Street Energy Ventures Inc. MA 02130 Name, address, and EIN of related organization Name, address, and EIN of related organization (a) 284 Amory Street Jamaica Plain 35-2431128 Part III Part IV DAA E (2) 4 3 3 3 4

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× × × × × × × × × Yes × × × Method of determining amount involved E 16 10 19 1 19 19 4 10 10 16 19 18 d Loans or loan guarantees to or for related organization(s) Reimbursement paid to related organization(s) for expenses Lease of facilities, equipment, or other assets to related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Reimbursement paid by related organization(s) for expenses Cash receipt Cash receipt No payment 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. Gift, grant, or capital contribution to related organization(s) 805 5,000 Amount involved 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? Transaction type (a-s) F p Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity Amory Street Energy Ventures, Inc. Amory Street Energy Ventures, Inc. Amory Street Energy Ventures, Inc. Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. k Lease of facilities, equipment, or other assets from related organization(s) Gift, grant, or capital contribution from related organization(s) s Other transfer of cash or property from related organization(s) Name of related organization r Other transfer of cash or property to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Sale of assets to related organization(s) Dividends from related organization(s) Ξ 4 (2) 9 3 3

Schedule R (Form 990) 2016

Page 4

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

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	(c) Legal domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?		(k) Percentage ownership
			country)	sections 512-514)	Yes No		100				9	
(3) (4) (5) (6) (7) (7) (9) (10) (11)												
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Schedule R (Form 990) 2016

Schedule R (Form 990) 2016	Energy	Consumers	Alliance	of New	04-2791314	Page 5
Part VII	Supplemen	ntal Informat	ion			R (See instructions).	
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