

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2019, or fiscal year beginning, 2019, and ending, 20

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

2019

Department of the Treasury
Internal Revenue Service

Name of exempt organization	Northeast Consumer's Electric Systems Association, Inc.	Employer identification number	04-2440855
Name and title of officer	Bonnie Biocchi Executive Director		

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	2,621,215
2a Form 990-EZ check here <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **S&G LLP** to enter my PIN as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature *Bonnie Biocchi* Date **11/12/20**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

04601101608
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature **Joshua P. LaBan, CPA** Date **11/12/20**

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2019)

Form **990**
 (Rev. January 2020)
 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.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
 Open to Public Inspection

A For the 2019 calendar year, or tax year beginning , and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization **Northeast Consumer's Electric Systems Association, Inc.**
 Doing business as **Northeast Public Power Association**
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
200 New Estate Road
 City or town, state or province, country, and ZIP or foreign postal code
Littleton MA 01460

D Employer identification number
**** - ***0855**

E Telephone number
978-540-2200

G Gross receipts \$ **2,893,965**

F Name and address of principal officer:
Bonnie Biocchi
200 New Estate Rd
Littleton MA 01460

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) (**6**) (insert no.) 4947(a)(1) or 527

J Website: **u www.neppa.org**

K Form of organization: Corporation Trust Association Other **u**

L Year of formation: **1965** **M** State of legal domicile: **MA**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: To develop and unite public utility professionals by advancing their knowledge, capabilities, and voice in the industry and workplace.		
	2 Check this box <input type="checkbox"/> 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)	3	21
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	21
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	17
	6 Total number of volunteers (estimate if necessary)	6	21
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 39	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 747,581	Current Year 759,048
	9 Program service revenue (Part VIII, line 2g)	1,545,108	1,783,974
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	88,818	57,733
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	27,231	20,460
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,408,738	2,621,215
	Expenses	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)		954,794	1,191,193
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25) u		0	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,320,484	1,517,648
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,275,278	2,708,841	
19 Revenue less expenses. Subtract line 18 from line 12	133,460	-87,626	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 2,482,875	End of Year 2,643,255
	21 Total liabilities (Part X, line 26)	240,110	346,458
	22 Net assets or fund balances. Subtract line 21 from line 20	2,242,765	2,296,797

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 Here
 Signature of officer: **Bonnie Biocchi**
 Date: _____
 Type or print name and title: **Executive Director**

Paid Preparer Use Only
 Print/Type preparer's name: **Joshua P. LaPan, CPA**
 Preparer's signature: **Joshua P. LaPan, CPA**
 Date: **11/13/20**
 Check if PTIN self-employed: *********
 Firm's name: **S&G LLP**
 Firm's EIN: **** - ***1070**
 Firm's address: **100 Front Street, 16th Floor Worcester, MA 01608**
 Phone no.: **508-757-3311**

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

To develop and unite public utility professionals by advancing their knowledge, capabilities, and voice in the industry and workplace.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ including grants of\$) (Revenue \$)

Education and training

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4b (Code:) (Expenses \$ including grants of\$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of\$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of\$) (Revenue \$)

4e Total program service expenses **u**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
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? <i>If "Yes," complete Schedule C, Part III</i>	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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 in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		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 foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules *(continued)*

		Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
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 to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part I</i>		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V 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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a <u>17</u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>		
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)?		X
b	If "Yes," enter the name of the foreign country u 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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	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).		
a	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?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	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		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	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.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
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 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X

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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section 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 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 on Schedule O.		
1a	21		
1b	Enter the number of voting members included on line 1a, above, who are independent		
1b	21		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	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?	X	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	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 on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		X
11b	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	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		X
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?		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?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
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?		X
16b	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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u None**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on 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.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **u**

Bonnie BIOCCHI **200 New Estate Road** **MA 01460** **978-540-2200**
Littleton

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

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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Bonnie Biocchi	37.50									
Executive Director	0.00			X			143,344	0	11,211	
(2) Steven Socoby	37.50									
Director of Training	0.00				X		121,785	0	8,291	
(3) William Hesson	16.73									
Trainer	0.00				X		112,556	0	0	
(4) James Bakas	1.00									
Past President	0.00	X		X			0	0	0	
(5) Reginald Beliveau	1.00									
Director	0.00	X					0	0	0	
(6) William Bottiggi	1.00									
Director	0.00	X					0	0	0	
(7) Jeffrey Cady	1.00									
President	0.00	X		X			0	0	0	
(8) Michael Cloutier	1.00									
Secretary	0.00	X		X			0	0	0	
(9) Justin Connell	1.00									
1st Vice President	0.00	X		X			0	0	0	
(10) John Driscoll	1.00									
Director	0.00	X					0	0	0	
(11) Jonathan Elwell	1.00									
Director	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) Jonathan Fitch	1.00									
Director	0.00	X					0	0	0	
(13) Scott Hallowell	1.00									
Director	0.00	X					0	0	0	
(14) Paul Heanue	1.00									
Director	0.00	X					0	0	0	
(15) Richard Hendershot	1.00									
Director	0.00	X					0	0	0	
(16) Michael Kirkwood	1.00									
Treasurer	0.00	X		X			0	0	0	
(17) James Lavelle	1.00									
Director	0.00	X					0	0	0	
(18) Nicholas Lawler	1.00									
Director	0.00	X					0	0	0	
(19) Craig Myotte	1.00									
Director	0.00	X					0	0	0	
1b Subtotal							377,685		19,502	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							377,685		19,502	

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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u3**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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 **u**

0

Part VIII 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 exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b	759,048			
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f	1g \$				
	h Total. Add lines 1a-1f	u	759,048			
	Program Service Revenue	2a Education and Training	Business Code	1,510,548	1,510,548	
b Conferences			268,051	268,051		
c Other Program Income			5,375	5,375		
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f		u	1,783,974			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	43,373		43,373	
	4 Income from investment of tax-exempt bond proceeds	u				
	5 Royalties	u				
	6a Gross rents	(i) Real				
		(ii) Personal				
		6a				
	b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c				
	d Net rental income or (loss)	u				
	7a Gross amount from sales of assets other than inventory	(i) Securities	287,110			
		(ii) Other				
		7a				
	b Less: cost or other basis and sales exps.	7b	272,750			
	c Gain or (loss)	7c	14,360			
d Net gain or (loss)	u	14,360	14,360			
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
	8b					
c Net income or (loss) from fundraising events	u					
9a Gross income from gaming activities. See Part IV, line 19	9a					
	9b					
c Net income or (loss) from gaming activities	u					
10a Gross sales of inventory, less returns and allowances	10a					
	10b					
c Net income or (loss) from sales of inventory	u					
Miscellaneous Revenue	11a Miscellaneous	Business Code	20,460	20,460		
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	u	20,460			
12 Total revenue. See instructions	u	2,621,215	1,818,794	0	43,373	

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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, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	144,344			
6 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	879,654			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	78,755			
10 Payroll taxes	88,440			
11 Fees for services (nonemployees):				
a Management				
b Legal	13,584			
c Accounting	10,200			
d Lobbying	90,000			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	8,170			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	139,803			
12 Advertising and promotion	1,211			
13 Office expenses	151,321			
14 Information technology				
15 Royalties				
16 Occupancy	239,404			
17 Travel	134,150			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	74,959			
23 Insurance	45,697			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Facilities Rent	231,401			
b Consultants	143,896			
c Meals	105,667			
d Miscellaneous	54,466			
e All other expenses	73,719			
25 Total functional expenses. Add lines 1 through 24e	2,708,841	0	0	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	495,389	1	263,780
	2	Savings and temporary cash investments	126,741	2	444,051
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	198,377	4	154,401
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	69,309	9	85,945
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 730,582		
	b	Less: accumulated depreciation	10b 353,775	10c	376,807
	11	Investments—publicly traded securities	1,058,406	11	1,185,278
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	132,013	15	132,993
16	Total assets. Add lines 1 through 15 (must equal line 33)	2,482,875	16	2,643,255	
Liabilities	17	Accounts payable and accrued expenses	63,667	17	181,144
	18	Grants payable		18	
	19	Deferred revenue	47,406	19	32,321
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	129,037	25	132,993
	26	Total liabilities. Add lines 17 through 25	240,110	26	346,458
	Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
27		Net assets without donor restrictions	2,242,765	27	2,296,797
28		Net assets with donor restrictions		28	
Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
29		Capital stock or trust principal, or current funds		29	
30		Paid-in or capital surplus, or land, building, or equipment fund		30	
31		Retained earnings, endowment, accumulated income, or other funds		31	
32		Total net assets or fund balances	2,242,765	32	2,296,797
33	Total liabilities and net assets/fund balances	2,482,875	33	2,643,255	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,621,215
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,708,841
3	Revenue less expenses. Subtract line 2 from line 1	3	-87,626
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,242,765
5	Net unrealized gains (losses) on investments	5	141,658
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 on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,296,797

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) Patricia Richards	1.00									
2nd Vice President	0.00	X		X			0	0	0	
(21) David Schofield	1.00									
Director	0.00	X					0	0	0	
(22) Todd Shea	1.00									
Director	0.00	X					0	0	0	
(23) Panos Tokadjian	1.00									
Director	0.00	X					0	0	0	
(24) John Tzimirangas	1.00									
Director	0.00	X					0	0	0	
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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 **u**

**SCHEDULE C
(Form 990 or 990-EZ)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

2019

Department of the Treasury
Internal Revenue Service

U Complete if the organization is described below. **U** Attach to Form 990 or Form 990-EZ.
U Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

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

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

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization **Northeast Consumer's Electric Systems Association, Inc.** Employer identification number ****_**0855**

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) **u** \$
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 **u** \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 **u** \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities **u** \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities **u** \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b **u** \$
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes		No	
	1	X	2	X
1 Were substantially all (90% or more) dues received nondeductible by members?				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?				

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

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Part IV Supplemental Information *(continued)*

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u 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. u Attach to Form 990.

u Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

Employer identification number

Northeast Consumer's Electric Systems Association, Inc.

** - ***0855

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 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.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 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, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u, 4 Number of states where property subject to conservation easement is located u, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u \$, 8 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)?, 9 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.

Table with 2 columns: u \$. Rows include: 1a If the organization elected, as permitted under FASB 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 FASB 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, 2 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 FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------------|--------|
| c Beginning balance | 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 Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment **u**
- b Permanent endowment **u**
- c Term endowment **u**

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations	3a(i)	
(ii) Related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		401,795	115,532	286,263
d Equipment		256,294	183,049	73,245
e Other		72,493	55,194	17,299
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	u			376,807

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	u	

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	u	

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Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Restricted cash - special assessment	132,993
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	u 132,993

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Special assessment fund	132,993
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	u 132,993

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part XIII Supplemental Information *(continued)*

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**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

u Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

u Attach to Form 990.

u Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization

**Northeast Consumer's Electric
Systems Association, Inc.**

Employer identification number

**** - ***0855**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a** **X**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b** **X**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c** **X**
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Bonnie Biocchi	(i)	143,344	0	0	0	11,211	154,555	0
1 Executive Director	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

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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.

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

u Attach to Form 990 or 990-EZ.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization	Northeast Consumer's Electric Systems Association, Inc.	Employer identification number **_***0855
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Form 990, Part VI, Line 6 - Classes of Members or Stockholders

The Organization has over 70 consumer-owned electric utilities,
cooperatives and joint action agencies. Additionally, there is a large
number of non-utility members (associate and corporate members).

Form 990, Part VI, Line 7a - Election of Members and Their Rights

The board of directors is elected by the members.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members

Members elect officers and directors, and must approve amendments to the
bylaws.

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Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The organization's policies do not require the governing body to review the
form 990 prior to filing; however, the Form 990 is reviewed by the
executive director and administrative director prior to filing, and is
reviewed by the governing body at its next regularly scheduled meeting.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Executive Committee reviews performance and compares compensation to that
of other association executives. Board approves changes to compensation.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Documents, policies, and financial statements are available to the public
upon request.

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)
u Attach to your tax return.

u Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2019

Attachment Sequence No. **179**

Name(s) shown on return **Northeast Consumer's Electric Systems Association, Inc.** Identifying number ****_***0855**

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,550,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	74,942

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/> u <input type="checkbox"/>		

Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	74,942
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2019)

DAA

-*0855

Federal Asset Report

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:										
2	LHI	11/01/12	261,984			261,984	20	MO S/L	80,778	13,099
3	FF old	1/01/05	7,761			7,761	5	MO S/L	7,761	0
4	Refrigerator	7/01/12	1,750			1,750	5	MO S/L	1,750	0
5	Tables & Chairs	8/01/12	956			956	5	MO S/L	956	0
6	Refrigerator & 2 Microwaves	9/01/12	2,456			2,456	5	MO S/L	2,456	0
7	Desks/ Chairs/ Bookcases/ Files	9/01/12	5,396			5,396	5	MO S/L	5,396	0
8	Desk	10/01/12	1,019			1,019	5	MO S/L	1,019	0
9	Chairs & Round Tables	10/01/12	3,389			3,389	5	MO S/L	3,389	0
10	Dishwasher, Range & Rangehood	10/01/12	2,100			2,100	5	MO S/L	2,100	0
11	Couch/Sofa/ Tables	10/01/12	1,814			1,814	5	MO S/L	1,814	0
12	Database	1/01/00	1,530			1,530	3	MO S/L	1,530	0
14	ERT Associates	10/12/12	1,508			1,508	3	MO S/L	1,508	0
15	Digital Cameta	11/01/12	743			743	3	MO S/L	743	0
18	Safety Eq-t old	1/01/98	10,270			10,270	5	MO S/L	10,270	0
19	Wire Racks for Garage	8/01/12	1,289			1,289	5	MO S/L	1,289	0
24	Shed & Meter Tab	9/01/12	3,595			3,595	5	MO S/L	3,595	0
27	Mitchell Electric	2/01/13	612			612	20	MO S/L	181	31
28	Goldsmith Pres & Ringwall	4/13/13	1,175			1,175	20	MO S/L	338	59
29	Shea Concrete Products	5/13/13	5,517			5,517	20	MO S/L	1,563	276
30	Vault Excavation	6/13/13	4,819			4,819	20	MO S/L	1,345	241
31	Picnic Tables (3)	5/01/13	1,826			1,826	5	MO S/L	1,826	0
32	Laptops & Projector	1/01/13	3,469			3,469	3	MO S/L	3,469	0
33	HP Color Printer	2/13/13	425			425	3	MO S/L	425	0
36	Laptops & Projectors	4/01/13	2,956			2,956	3	MO S/L	2,956	0
37	Computer	11/01/13	1,297			1,297	3	MO S/L	1,297	0
38	Meter Test Bench	3/01/13	9,563			9,563	5	MO S/L	9,563	0
40	Rescue Dummy	6/01/13	868			868	5	MO S/L	868	0
41	Garage Doors	9/01/13	796			796	5	MO S/L	796	0
42	Computer for video storage	9/01/13	994			994	5	MO S/L	994	0
43	Pro AV Systems (Cameras)	10/01/13	31,671			31,671	5	MO S/L	31,671	0
44	Pro AV Systems (Cameras)	11/01/13	8,640			8,640	5	MO S/L	8,640	0
45	Tables and Chairs	7/01/12	3,666			3,666	5	MO S/L	3,666	0
47	Receptionist chair	2/01/14	229			229	5	MO S/L	225	4
48	Desk Chair (CC)	4/01/14	230			230	5	MO S/L	219	11
49	Credenza	5/01/14	266			266	5	MO S/L	248	18
50	Desk Chair (JL)	7/01/14	244			244	5	MO S/L	220	24
51	Fire Proof Safe	8/01/14	244			244	5	MO S/L	216	28
53	Round tables	10/01/14	1,083			1,083	5	MO S/L	920	163
55	iPad Air	5/01/14	754			754	3	MO S/L	754	0
56	Laptop/docking station	7/01/14	1,392			1,392	3	MO S/L	1,392	0
57	Laptop (WH)	10/01/14	1,753			1,753	3	MO S/L	1,753	0
58	Pro AV Systems (wireless mike)	2/01/14	1,874			1,874	5	MO S/L	1,843	31
60	Hydron Donation	7/01/14	3,517			3,517	5	MO S/L	3,166	351
61	Folding and Nesting Tables	9/01/15	946			946	5	MO S/L	631	189
63	Laptop	7/01/15	912			912	3	MO S/L	912	0
64	Computer (KD)	7/01/15	1,447			1,447	3	MO S/L	1,447	0
65	Wireless Access/Router	7/01/15	963			963	3	MO S/L	963	0
66	Laptop (BH)	8/01/15	1,467			1,467	3	MO S/L	1,467	0
67	Laptop (DW)	10/01/15	2,548			2,548	3	MO S/L	2,548	0
69	Carpenter & Assoc (GP Upgrade)	8/01/15	660			660	3	MO S/L	660	0
71	Epson Projector	5/01/15	400			400	5	MO S/L	293	80
72	Replacement bulbs	7/01/15	1,173			1,173	5	MO S/L	821	235
75	Hydron Equipment	9/30/15	3,751			3,751	5	MO S/L	2,438	750
76	Electric Service Install - Trailer	5/01/16	20,270			20,270	16	MO S/L	3,378	1,267
77	Desks, Cubicles	5/01/16	21,239			21,239	5	MO S/L	11,328	4,247
78	Reception Desk	8/01/16	3,256			3,256	5	MO S/L	1,574	651
79	Laptop (S Socoby)	1/01/16	1,826			1,826	3	MO S/L	1,826	0
80	Projector	8/01/16	425			425	3	MO S/L	342	83
81	Insulation Resistance Test Set	1/01/16	2,513			2,513	5	MO S/L	1,508	502
82	Transformer Tester	9/01/16	2,824			2,824	5	MO S/L	1,318	565
83	Donation - Hydron Equip	12/01/16	4,370			4,370	5	MO S/L	1,821	874
84	RD Fence Company - Fence in front	4/01/17	4,860			4,860	15	MO S/L	567	324
85	JuiceBox Electric Vehicle Chargers	10/01/17	1,050			1,050	15	MO S/L	88	70
86	Steps for Bunker	11/01/17	1,700			1,700	15	MO S/L	132	114
87	Platform for Underground	12/01/17	10,600			10,600	15	MO S/L	766	706
88	Blueprints (for building upgrades)	12/01/17	5,000			5,000	15	MO S/L	361	333
91	Telephones - 8x8	2/01/17	1,932			1,932	3	MO S/L	1,234	644
92	Laptop - Lonovo ThinkPad	5/01/17	2,297			2,297	3	MO S/L	1,276	766

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Dep'r	PerConv Meth	Prior	Current
93	Scanner	6/01/17	157			157	3 MO S/L	83	52
94	Laptop - HP 15-CC561ST Note	7/01/17	510			510	3 MO S/L	255	170
95	HardDrive - VisionTek 900613	8/01/17	478			478	3 MO S/L	226	159
96	GoPro Camera	9/01/17	449			449	3 MO S/L	200	149
97	Laptop - HP 15-CC561ST Note	9/01/17	570			570	3 MO S/L	253	190
98	Projector - Epson EX5240 XGA 3	9/01/17	460			460	3 MO S/L	204	154
99	Projector - Epson EX5240 SVGA	12/01/17	460			460	3 MO S/L	166	153
100	Altec- Bucket Truck Repairs	3/01/17	7,888			7,888	5 MO S/L	2,892	1,578
101	Mannequin - Linda's First Aid	4/01/17	638			638	5 MO S/L	223	128
102	Load Trainer	11/01/17	9,050			9,050	5 MO S/L	2,112	1,810
103	Hydron Donation	12/01/17	3,200			3,200	5 MO S/L	693	640
104	Hydron Donation	12/01/17	513			513	5 MO S/L	111	103
105	Ductor: Model 6240	12/01/17	2,601			2,601	5 MO S/L	564	520
109	2017 Chevy Volt	1/31/17	34,102			34,102	5 MO S/L	13,073	6,820
110	Blueprints for building upgrades	2/01/18	2,300			2,300	14 MO S/L	151	164
111	AV Systems in Training Rooms	2/01/18	20,000			20,000	14 MO S/L	1,310	1,428
112	AV Systems in Training Rooms	7/01/18	56,213			56,213	14 MO S/L	2,008	4,015
113	Entrance Window to Office	11/01/18	2,428			2,428	13 MO S/L	31	187
115	Abila	1/01/18	16,025			16,025	3 MO S/L	5,342	5,341
116	Projector Epson EX3260	4/01/18	521			521	3 MO S/L	130	174
117	Projector - Epson EX5240	4/01/18	621			621	3 MO S/L	155	207
118	Laptop - HP ProBook 15.6"	10/01/18	1,503			1,503	3 MO S/L	125	501
119	Laptop - HP ProBook Series 15.6"	10/01/18	1,503			1,503	3 MO S/L	125	501
120	Laptop - HP EliteBook Series 15.6"	10/01/18	1,631			1,631	3 MO S/L	136	543
121	Projector - Epson EX3260	11/01/18	435			435	3 MO S/L	24	145
122	Laptop	12/01/18	1,595			1,595	3 MO S/L	44	532
123	Laptop - ThinkPad P52	12/01/18	2,054			2,054	3 MO S/L	57	685
124	2015 Toyota Rav4	11/01/18	17,568			17,568	2 MO S/L	1,464	8,784
125	Entrance Window to Office	2/01/19	3,268			3,268	13 MO S/L	0	230
126	Walls, Office Interior	1/01/19	5,953			5,953	5 MO S/L	0	1,191
127	Desk Chair	2/01/19	240			240	5 MO S/L	0	44
128	Walls, Office Interior	3/01/19	1,570			1,570	5 MO S/L	0	262
129	Chairs For Training Room	5/01/19	4,285			4,285	5 MO S/L	0	571
130	Archival Shelf For Accounting	7/01/19	554			554	5 MO S/L	0	55
131	Program Development - PUMP	4/01/19	20,750			20,750	2 MO S/L	0	7,781
132	Carpenter & assoc. (GP Upgr)	5/01/19	1,138			1,138	3 MO S/L	0	253
133	Rescue Dummy	10/01/19	714			714	5 MO S/L	0	36
134	MSA Altair Multi Gas Detector	12/01/19	1,670			1,670	5 MO S/L	0	28
135	Laptop - HP ProBook 15.6'	2/01/19	1,652			1,652	3 MO S/L	0	505
136	Laptop - HP ProBook 14'	3/01/19	1,887			1,887	3 MO S/L	0	524
137	Trash Cans/ Recycling Bins	5/01/19	946			946	3 MO S/L	0	210
138	Speaker System (Portable)	5/01/19	901			901	3 MO S/L	0	200
139	Epsom Projector	5/01/19	610			610	3 MO S/L	0	135
140	Light Bulbs for Training Room Proj.	6/01/19	437			437	3 MO S/L	0	85
141	POE Switch - 24 ports	8/01/19	443			443	3 MO S/L	0	62
142	Laptop - HP ProBook 14"	9/01/19	1,711			1,711	3 MO S/L	0	190
143	Projector - Epson EX3260	12/01/19	404			404	3 MO S/L	0	11
Total Other Depreciation			<u>730,475</u>			<u>730,475</u>		<u>278,764</u>	<u>74,942</u>
Total ACRS and Other Depreciation			<u>730,475</u>			<u>730,475</u>		<u>278,764</u>	<u>74,942</u>
Grand Totals			730,475			730,475		278,764	74,942
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>730,475</u>			<u>730,475</u>		<u>278,764</u>	<u>74,942</u>

Bonus Depreciation Report

Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
84	RD Fence Company - Fence in front	4/01/17	4,860		0	0	0	4,860
85	JuiceBox Electric Vehicle Chargers	10/01/17	1,050		0	0	0	1,050
86	Steps for Bunker	11/01/17	1,700		0	0	0	1,700
Grand Total			<u>7,610</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>7,610</u>

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Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

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Future Depreciation Report**FYE: 12/31/20**

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
2	LHI	11/01/12	261,984	13,100	0
3	FF old	1/01/05	7,761	0	0
4	Refrigerator	7/01/12	1,750	0	0
5	Tables & Chairs	8/01/12	956	0	0
6	Refrigerator & 2 Microwaves	9/01/12	2,456	0	0
7	Desks/ Chairs/ Bookcases/ Files	9/01/12	5,396	0	0
8	Desk	10/01/12	1,019	0	0
9	Chairs & Round Tables	10/01/12	3,389	0	0
10	Dishwasher, Range & Rangehood	10/01/12	2,100	0	0
11	Couch/Sofa/ Tables	10/01/12	1,814	0	0
12	Database	1/01/00	1,530	0	0
14	ERT Associates	10/12/12	1,508	0	0
15	Digital Cameta	11/01/12	743	0	0
18	Safety Eq-t old	1/01/98	10,270	0	0
19	Wire Racks for Garage	8/01/12	1,289	0	0
24	Shed & Meter Tab	9/01/12	3,595	0	0
27	Mitchell Electric	2/01/13	612	30	0
28	Goldsmith Pres & Ringwall	4/13/13	1,175	58	0
29	Shea Concrete Products	5/13/13	5,517	276	0
30	Vault Excavation	6/13/13	4,819	241	0
31	Picnic Tables (3)	5/01/13	1,826	0	0
32	Laptops & Projector	1/01/13	3,469	0	0
33	HP Color Printer	2/13/13	425	0	0
36	Laptops & Projectors	4/01/13	2,956	0	0
37	Computer	11/01/13	1,297	0	0
38	Meter Test Bench	3/01/13	9,563	0	0
40	Rescue Dummy	6/01/13	868	0	0
41	Garage Doors	9/01/13	796	0	0
42	Computer for video storage	9/01/13	994	0	0
43	Pro AV Systems (Cameras)	10/01/13	31,671	0	0
44	Pro AV Systems (Cameras)	11/01/13	8,640	0	0
45	Tables and Chairs	7/01/12	3,666	0	0
47	Receptionist chair	2/01/14	229	0	0
48	Desk Chair (CC)	4/01/14	230	0	0
49	Credenza	5/01/14	266	0	0
50	Desk Chair (JL)	7/01/14	244	0	0
51	Fire Proof Safe	8/01/14	244	0	0
53	Round tables	10/01/14	1,083	0	0
55	iPad Air	5/01/14	754	0	0
56	Laptop/docking station	7/01/14	1,392	0	0
57	Laptop (WH)	10/01/14	1,753	0	0
58	Pro AV Systems (wireless mike)	2/01/14	1,874	0	0
60	Hydron Donation	7/01/14	3,517	0	0
61	Folding and Nesting Tables	9/01/15	946	126	0
63	Laptop	7/01/15	912	0	0
64	Computer (KD)	7/01/15	1,447	0	0
65	Wireless Access/Router	7/01/15	963	0	0
66	Laptop (BH)	8/01/15	1,467	0	0
67	Laptop (DW)	10/01/15	2,548	0	0
69	Carpenter & Assoc (GP Upgrade)	8/01/15	660	0	0
71	Epson Projector	5/01/15	400	27	0
72	Replacement bulbs	7/01/15	1,173	117	0
75	Hydron Equipment	9/30/15	3,751	563	0
76	Electric Service Install - Trailer	5/01/16	20,270	1,267	0
77	Desks, Cubicles	5/01/16	21,239	4,248	0
78	Reception Desk	8/01/16	3,256	651	0
79	Laptop (S Socoby)	1/01/16	1,826	0	0
80	Projector	8/01/16	425	0	0
81	Insulation Resistance Test Set	1/01/16	2,513	503	0
82	Transformer Tester	9/01/16	2,824	565	0
83	Donation - Hydron Equip	12/01/16	4,370	874	0
84	RD Fence Company - Fence in front	4/01/17	4,860	324	0
85	JuiceBox Electric Vehicle Chargers	10/01/17	1,050	70	0
86	Steps for Bunker	11/01/17	1,700	113	0
87	Platform for Underground	12/01/17	10,600	707	0
88	Blueprints (for building upgrades)	12/01/17	5,000	334	0
91	Telephones - 8x8	2/01/17	1,932	54	0

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Future Depreciation Report**FYE: 12/31/20**

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
92	Laptop - Lonovo ThinkPad	5/01/17	2,297	255	0
93	Scanner	6/01/17	157	22	0
94	Laptop - HP 15-CC561ST Note	7/01/17	510	85	0
95	HardDrive - VisionTek 900613	8/01/17	478	93	0
96	GoPro Camera	9/01/17	449	100	0
97	Laptop - HP 15-CC561ST Note	9/01/17	570	127	0
98	Projector - Epson EX5240 XGA 3	9/01/17	460	102	0
99	Projector - Epson EX5240 SVGA	12/01/17	460	141	0
100	Altec- Bucket Truck Repairs	3/01/17	7,888	1,577	0
101	Mannequin - Linda's First Aid	4/01/17	638	128	0
102	Load Trainer	11/01/17	9,050	1,810	0
103	Hydron Donation	12/01/17	3,200	640	0
104	Hydron Donation	12/01/17	513	102	0
105	Ductor: Model 6240	12/01/17	2,601	520	0
109	2017 Chevy Volt	1/31/17	34,102	6,821	0
110	Blueprints for building upgrades	2/01/18	2,300	164	0
111	AV Systems in Training Rooms	2/01/18	20,000	1,429	0
112	AV Systems in Training Rooms	7/01/18	56,213	4,015	0
113	Entrance Window to Office	11/01/18	2,428	187	0
115	Abila	1/01/18	16,025	5,342	0
116	Projector Epson EX3260	4/01/18	521	174	0
117	Projector - Epson EX5240	4/01/18	621	207	0
118	Laptop - HP ProBook 15.6"	10/01/18	1,503	501	0
119	Laptop - HP ProBook Series 15.6"	10/01/18	1,503	501	0
120	Laptop - HP EliteBook Series 15.6"	10/01/18	1,631	544	0
121	Projector - Epson EX3260	11/01/18	435	145	0
122	Laptop	12/01/18	1,595	532	0
123	Laptop - ThinkPad P52	12/01/18	2,054	685	0
124	2015 Toyota Rav4	11/01/18	17,568	7,320	0
125	Entrance Window to Office	2/01/19	3,268	252	0
126	Walls, Office Interior	1/01/19	5,953	1,190	0
127	Desk Chair	2/01/19	240	48	0
128	Walls, Office Interior	3/01/19	1,570	314	0
129	Chairs For Training Room	5/01/19	4,285	857	0
130	Archival Shelf For Accounting	7/01/19	554	111	0
131	Program Development - PUMP	4/01/19	20,750	10,375	0
132	Carpenter & assoc. (GP Upgr)	5/01/19	1,138	379	0
133	Rescue Dummy	10/01/19	714	142	0
134	MSA Altair Multi Gas Detector	12/01/19	1,670	334	0
135	Laptop - HP ProBook 15.6'	2/01/19	1,652	551	0
136	Laptop - HP ProBook 14'	3/01/19	1,887	629	0
137	Trash Cans/ Recycling Bins	5/01/19	946	316	0
138	Speaker System (Portable)	5/01/19	901	301	0
139	Epsom Projector	5/01/19	610	204	0
140	Light Bulbs for Training Room Proj.	6/01/19	437	145	0
141	POE Switch - 24 ports	8/01/19	443	147	0
142	Laptop - HP ProBook 14"	9/01/19	1,711	570	0
143	Projector - Epson EX3260	12/01/19	404	135	0
Total Other Depreciation			<u>730,475</u>	<u>75,517</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>730,475</u>	<u>75,517</u>	<u>0</u>
Grand Totals			<u>730,475</u>	<u>75,517</u>	<u>0</u>

Form 990	Two Year Comparison Report	2018 & 2019
For calendar year 2019, or tax year beginning _____, ending _____		

Name **Northeast Consumer's Electric Systems Association, Inc.** Taxpayer Identification Number ****_***0855**

		2018	2019	Differences
Revenue	1. Contributions, gifts, grants			
	2. Membership dues and assessments	747,581	759,048	11,467
	3. Government contributions and grants			
	4. Program service revenue	1,545,108	1,783,974	238,866
	5. Investment income	34,892	43,373	8,481
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	53,926	14,360	-39,566
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	27,231	20,460	-6,771
	12. Total revenue. Add lines 1 through 11	2,408,738	2,621,215	212,477
Expenses	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	61,021	144,344	83,323
	16. Salaries, other compensation, and employee benefits	893,773	1,046,849	153,076
	17. Professional fundraising fees			
	18. Other professional fees	191,762	261,757	69,995
	19. Occupancy, rent, utilities, and maintenance	147,056	239,404	92,348
	20. Depreciation and Depletion	62,397	74,959	12,562
	21. Other expenses	919,269	941,528	22,259
	22. Total expenses. Add lines 13 through 21	2,275,278	2,708,841	433,563
	23. Excess or (Deficit). Subtract line 22 from line 12	133,460	-87,626	-221,086
Other Information	24. Total exempt revenue	2,408,738	2,621,215	212,477
	25. Total unrelated revenue			
	26. Total excludable revenue	1,661,157	1,862,167	201,010
	27. Total assets	2,482,875	2,643,255	160,380
	28. Total liabilities	240,110	346,458	106,348
	29. Retained earnings	2,242,765	2,296,797	54,032
	30. Number of voting members of governing body	21	21	
	31. Number of independent voting members of governing body	21	21	
	32. Number of employees	18	17	
	33. Number of volunteers	21	21	

Form 990	Tax Return History	2019
Name Northeast Consumer's Electric Systems Association, Inc.		Employer Identification Number ** - ***0855

	2015	2016	2017	2018	2019	2020
Contributions, gifts, grants						
Membership dues	676,613	725,802	749,828	747,581	759,048	
Program service revenue	1,522,870	1,422,213	1,562,210	1,545,108	1,783,974	
Capital gain or loss	-4,340	1,837	-7,921	53,926	14,360	
Investment income	28,820	27,783	26,760	34,892	43,373	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	23,809	46,773	32,452	27,231	20,460	
Total revenue	2,247,772	2,224,408	2,363,329	2,408,738	2,621,215	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	115,002	113,275	144,472	61,021	144,344	
Other compensation	433,044	471,513	888,604	893,773	1,046,849	
Professional fees	127,558	138,044	185,639	191,762	261,757	
Occupancy costs	135,881	177,808	163,487	147,056	239,404	
Depreciation and depletion	75,917	61,164	57,158	62,397	74,959	
Other expenses	1,142,772	1,186,507	832,289	919,269	941,528	
Total expenses	2,030,174	2,148,311	2,271,649	2,275,278	2,708,841	
Excess or (Deficit)	217,598	76,097	91,680	133,460	-87,626	
Total exempt revenue	2,247,772	2,224,408	2,363,329	2,408,738	2,621,215	
Total unrelated revenue						
Total excludable revenue	1,571,159	1,498,606	1,613,501	1,661,157	1,862,167	
Total Assets	2,156,920	2,347,630	2,549,244	2,482,875	2,643,255	
Total Liabilities	203,653	239,061	250,859	240,110	346,458	
Net Fund Balances	1,953,267	2,108,569	2,298,385	2,242,765	2,296,797	

Federal Statements

Taxable Dividends from Securities

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
	\$ 43,373		14			
			14			
Total	<u>\$ 43,373</u>					

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Federal Statements

FYE: 12/31/2019

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Other Fees for Services	\$ 139,803	\$ 139,803	\$	\$
Total	\$ 139,803	\$ 139,803	\$ 0	\$ 0

Form 990, Part IX, Line 24e - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Equipment and Maintenance	\$ 40,746	\$ 40,746	\$	\$
Training and Education	16,359	16,359		
Dues and Subscriptions	10,659	10,659		
Taxes and Fees	5,955	5,955		
Total	\$ 73,719	\$ 73,719	\$ 0	\$ 0

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Federal Statements

FYE: 12/31/2019

Cash - EOY

<u>Description</u>	<u>Amount</u>
Operating	\$ 263,592
Petty	188
Total	<u>\$ 263,780</u>

Savings - EOY

<u>Description</u>	<u>Amount</u>
TD	\$ 28,904
Century	109,646
MM	305,501
Total	<u>\$ 444,051</u>

Accounts payable - EOY

<u>Description</u>	<u>Amount</u>
AP	\$ 129,864
Accruals	51,282
Total	<u>\$ 181,146</u>

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