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DLN: 93493129019154

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A			endar year, or tax year beginning 01-	01-2013 ,2013, and ending 12-			
B Ch	eck ıf a	applicable	C Name of organization CONSUMER ENERGY ALLIANCE INC			D Employer	identification number
☐ Ad	dress c	change	Doing Business As			_ 26-1658	339
∏ Na	me cha	nange	Doing Business As				
Inr	tıal retu	turn	Number and street (or P O box if mail is i	not delivered to street address) Room/s	uite	E Telephone	number
Гте	rmınate	ted	2211 NORFOLK			(713)33	
☐ Am	nended	d return	City or town, state or province, country, a	nd ZIP or foreign postal code		(/13)33	7-8800
Гар	plicatio	on pending	HOUSTON, TX 77098			G Gross recei	pts \$ 3,014,746
			F Name and address of principal	lofficer	H(a) Is t	:hıs a group ret	curn for
			DAVID HOLT 2211 NORFOLK		sub	ordinates?	ΓYes Γ No
			HOUSTON,TX 77098		 H(b) ∆re	all subordinat	es
					incl	luded?	
I Ta	ıx-exer	empt status	501(c)(3) ✓ 501(c) (4) ◀ (insert	no) 4947(a)(1) or 527	If"	No," attach a l	ist (see instructions)
J W	ebsit	te:► ww	v consumerenergyalliance org		H(c) Gr	oup exemption	number ►
K For	m of or	organization	Corporation Trust Association C	Other 🕨	L Year of	formation 2008	M State of legal domicile TX
	rt I		mary		<u> </u>		
	1	Briefly d	escribe the organization's mission or	most significant activities			
		To expa	nd the dialogue between the energy &	consuming sectors to improve o			
			al development and utilization of ener	gy resources to help create sour	d energy pol	icy and mainta	ın stable energy prıces
ပ္		for cons	imers				
₫							
E E							
Governance	2	Check th	is box 🚩 if the organization discont	inued its operations or disposed	of more than	25% of its ne	t assets
						1	ı
<u>କ</u>			of voting members of the governing b			<u> </u>	3 8
Activities &	1		of independent voting members of the				4 8
ू ब			mber of individuals employed in calen	, , , , , ,			5 0
			mber of volunteers (estimate if neces			· · · ⊢	6 0 7a 0
	1		elated business revenue from Part V lated business taxable income from F			⊢	7a 0 7b
	Н В) Net unite	iated pusifiess taxable income from F	om 990-1, me 34	1		T
		Contr	hutions and grants (Bart VIII June 1h	. 1		ior Year	Current Year
ē	8		butions and grants (Part VIII, line 1h			3,115,250	3,013,908
Aenne	9	Progra	m service revenue (Part VIII, line 2ç	g)		3,115,250	3,013,908
Revenue		Progra Inves	m service revenue (Part VIII, line 2g ment income (Part VIII, column (A),	j)			3,013,908
Revenue	9 10	Progra Inves Other	m service revenue (Part VIII, line 2ç	Innes 3, 4, and 7d)		3,115,250 1,639	3,013,908 0 9 838 0
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	9 10 11 12 13 14 15	Progra Inves Other Total 12). Grants Benefi Salari 5-10	m service revenue (Part VIII, line 20 ment income (Part VIII, column (A), revenue (Part VIII, column (A), lines evenue—add lines 8 through 11 (mustain and similar amounts paid (Part IX, cots paid to or for members (Part IX, cots, other compensation, employee be sional fundraising fees (Part IX, columns).	Innes 3, 4, and 7d)	ne	3,115,250 1,639 3,116,889	3,013,908 0 838 0 3,014,746 0 0
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Use Only

Fırm's address ► 12814 John Reynolds Cırcle

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

Phone no (409) 737-4868

✓ Yes ☐ No

Form	990 (2	2013)					Page :
Par	t III	Statement of Check if Schedule			lishments o any line in this Part	:III	٦
1	Briefl	y describe the orga	anization's missio	n			
<u>Our</u>	missior	n is to expand the c	lialogue between t	the energy & cor	nsuming sectors		
_							
2	the pr	or Form 990 or 99	0-EZ?		= -	ar which were not listed on	
	If"Ye	s," describe these	new services on S	Schedule O			
3		e organization cea				onducts, any program	
	If"Ye	s," describe these	changes on Sche	dule O			
4	expen		c)(3) and 501(c)(4) organizations	are required to repo	hree largest program services, rt the amount of grants and allo	
4a	(Code	<u> </u>) (Expenses \$	508,374	ıncludıng grants of \$) (Revenue \$)
	REGU	LATIONS, TECHNOLOGY	AND ROLE OF PUBLIC	C POLICY IN HELPI		INFORM BUSINESSES AND CONSUMER NT AND FUTURE NEEDS THIS PROGR OLICY	
4b	(Code	2) (Expenses \$	976,470	ıncludıng grants of \$) (Revenue \$)
		GY ADVOCACYEFFOR ING US ENERGY NEEDS		TE EDUCATIONAL PI	ROGRAMS AND MEDIA OPI	ERATIONS TO ENSURE A THOUGHTFU	L, BALANCED APPROACH TO
4c	(Code	2) (Expenses \$	329,886	ıncludıng grants of \$) (Revenue \$)
	NATU FUTU		A'S NATIONAL MISSIO	N FOR A BALANCED	ENERGY FOR AMERICA,	FOCUSING ON THE USE OF NATURAL	GAS IN THE NATION'S ENERGY
	(Code	2) (Expenses \$	300,036	including grants of \$) (Revenue \$)
		GY DAYAcademic fest oportance competitions				cate about the importance competition	s to highlight and educate abou
4d	Othe	er program services	(Describe in Sch	nedule O)			
	(Exp	enses \$	300,036 in	cluding grants o	f\$) (Revenue \$)
4e	Tota	l program service e	xpenses 🕨	2,114,766			

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)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 60	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Νo
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
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? If "Yes," complete Schedule D, Part VII	11b		No
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? If "Yes," complete Schedule D, Part VIII	11c		Νo
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? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1^7 If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32		32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

a Enter the number reported in Box 3 of Form 1098 Enters - 0 - in face applicable 1a 0 0		Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
Either the number of Forms W-20 included in line 1.0 Enter-0-1 fact applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable parming (simbling) enterings for prize within the payments to vendors and reportable parming (simbling) enterings for prize within the war covered payment of the called an application of the called an application of the called and payments within the year covered payments of amplicate an expected on from W-3, Transmittation of whose and payments of the called an application of the called an application of the called and payments of the payments of the called and payments of the called and payments of the payment		Estantla number resorted in Day 2 of Farm 1000 Finter 0 of materializable 1.4-1		Yes	N
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Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? Did the organization notify the donor of the value of the goods or services provided? To but the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizatione maintaining donor advised funds and section 509(c)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(c)(3) supporting organizations. Did the organization make a distribution to a donor, donor advisor, or related person? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Did the organization make any taxable distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Did the organization must be organization filing Form 990 in lieu of Form 1041? Did the organization while any taxable distribution to the organization filing Form 990 in lieu of Form 1041? Did the organization in the organization is required to maintain by the	b				
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file Form 8.28.27	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
a Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f 7d 7e 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 7d 7f 7f	С				
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contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "ves," enter the amount of tax-exempt interest received or accrued during the year 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 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 14a	-	11 Test, indicate the number of forms of 202 med during the year 1 1 1 1	1		
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Form 1098-C?	y				
the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	h		7h		
Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?	3	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
Did the organization make any taxable distributions under section 4966?			8		
b Did the organization make a distribution to a donor, donor advisor, or related person?)				
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 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	а	·			
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 Section 501(c)(12) organizations. Enter Gross income from members or shareholders	b		9ь		
Section 501(c)(12) organizations. Enter Gross income from members or shareholders	_	1 1			
Section 501(c)(12) organizations. Enter a Gross income from members or shareholders			-		
Gross income from members or shareholders	_		1		
Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	L	Section 501(c)(12) organizations. Enter			
against amounts due or received from them)	a	Gross income from members or shareholders			
Section 501(c)(29) qualified nonprofit health insurance issuers. 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 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand	b	` '			
year	a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Section 501(c)(29) qualified nonprofit health insurance issuers. 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 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	b	1 126 1			
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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 c Enter the amount of reserves on hand			12-		
In which the organization is licensed to issue qualified health plans			138		
a Did the organization receive any payments for indoor tanning services during the tax year? 14a		In which the organization is licensed to issue qualified health plans			
			 	ļ ļ	
h. If "Yes," has it filed a Form 7.20 to report these payments? If "No," provide an explanation in Schedule 0.					N

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

Check if Schedule O contains a response or note to any line in this Part VI														.J.
---	--	--	--	--	--	--	--	--	--	--	--	--	--	-----

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 8			
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
h	Enter the number of voting members included in line 1a, above, who are			
ט	Independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No.
-	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	H		110
, u	more members of the governing body?	7a		Νo
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se		eveni	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod	e.) No
	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu 10a		
10a		10a		No
10a b	Did the organization have local chapters, branches, or affiliates?			No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes	No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official O ther officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official O ther officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No No No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

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

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►DAVID E HOLT III 2211 NORFOLK HOUSTON,TX 77098 (713)522-2414

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot rect	not box h ar	chec (, unle n offic	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) DAVID HARBOUR	0 00	х						0	0	
DIRECTOR/APR								ŭ	ŭ .	
(2) JENNIFER DIGGINS VICE CHAIRWOMAN	0 00	x						0	0	(
(3) JOHN HEIMLICH	0 00	<u> </u>								
CHAIRMAN		Х						0	0	•
(4) WAYNE ZEMKE	0 00	+								
DIRECTOR		X						0	0	•
(5) TROY BREDENKAMP	0 00	 								
DIRECTOR		X						0	0	(
(6) BRETT VASSEY	0 00	 								
DIRECTOR		X						0	0	•
(7) MARK PULLIAM	0 00									
		X						0	0	(
TREASURER (8) DAVID HOLT EX-OFFICIO	0 00	-								
DIRECTOR/PRESIDENT		X		Х				0	0	•
DIRECTOR/FRESIDENT										
		<u> </u>								
		 				 				
							_			
							-			
					l					

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

	(A) Name and Title	(B) Average hours per week (list any hours	more t	tion (han (on is	one l both	oox, an	heck unless officer stee)	;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	С	(F) Estima mount of ompens from t	other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganizatio relate organiza	d
1b	Sub-Total				•		Ī	F			_		
c d	Total from continuation sheet Total (add lines 1b and 1c) .	s to Part VII, S			•	•	•	-					
2	Total number of individuals (in \$100,000 of reportable compe	cluding but not	limited	to the		ıste	d abov	e) w	I ho received more th	<u>I</u> nan			
										-		Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete</i> S					key •	emplo	yee, •	, or highest compen	sated employee	3		No
4	For any individual listed on lin- organization and related organ individual										4		No
5	Did any person listed on line 1 services rendered to the organ									or individual for	5		No No
										L	_		
Se	ection B. Independent Co Complete this table for your five		ancato.	d ind	anar	den	t contr	acto	re that received mo	re than \$100 000	of.		
	compensation from the organiz											ax year	

(A) Name and business address	(B) Description of services	(C) Compensation
HBW Resources LLC 2211 Norfolk Ste 410 Houston TX 77098	Management & Professional	1,327,500
Advocacy Group 1411 K Street NW STe 1400 Washington DC 20005	Consulting	232,800
FTI Consulting PO Box 418005 Boston MA 02241	Professional	440,000
Staging Solutions PO Box 1759 Dept 957 Houston TX 77251	Production specialists	166,250
SmartMark Comm 140 Terry Dr S 105 Newtown PA 18940	Communications	140,376
	\	

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 ►5

Part V.	77.	Statement of Revenue Check if Schedule O contains a response or note to ar	v line in thic Part VIII			_
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
क क	1a	Federated campaigns 1a	_			
s, Grants Amounts	b	Membership dues 1b				
בַּ בַּ	c	Fundraising events 1c				
ž Z	d	Related organizations 1d	_			
5 ≅		Government grants (contributions)	—			
Sin	е		_			
₽ <u>-</u>	f	All other contributions, gifts, grants, and similar amounts not included above 3,013,9	08			
tributions, Gift Other Similar	g	Noncash contributions included in lines	j			
Contributions, Gifts, Grants and Other Similar Amounts	L	1a-1f \$	3,013,908			
ರ ಹ	n	Iotal. Add lines 1a-1f	>			
e e	_	Business Cod	e			
Ken Ken	2a					
윤	b					
95	С					
Program Serwce Revenue	d					
Ę	е					
Ď	f	All other program service revenue				
Δ	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest, and other similar amounts)	_ 838			
	4	and other similar amounts)				
	5	Royalties	-			
		(ı) Real (ıı) Personal				
	6a	Gross rents				
	b	Less rental expenses				
	С	Rental income				
	d	or (loss) Net rental income or (loss)	<u>-</u>			
		(i) Securities (ii) Other				
	7a	Gross amount				
		from sales of assets other				
	ь	than inventory Less cost or	_			
		other basis and sales expenses				
	c	Gain or (loss)				
	d	Net gain or (loss)	-			
ά l	8a	Gross income from fundraising events (not including				
Other Revenue		\$				
ě		of contributions reported on line 1c) See Part IV, line 18				
<u>.</u>		a				
<u> </u>	b	Less direct expenses b				
5	c	Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities				
		See Part IV, line 19				
	b	Less direct expenses b	┥			
		Net income or (loss) from gaming activities	.			
		Gross sales of inventory, less returns and allowances .				
		a	_			
	b	Less cost of goods sold b				
}	С	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Cod				
}	11a	I II Scenario de Nevenue Dusiness Cou	`			
	ь					
	c		_			
		All other revenue				
	d e	All other revenue	•			
			-			
	12	Total revenue. See Instructions	3,014,746	838		

Part IX Statement of Functional Expenses

	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All	other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this				г
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	1,473,750	770,750	703,000	0
b	Legal	27,303	0	27,303	0
С	Accounting	2,756	0	2,756	0
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,057,909	882,666	175,243	0
12	Advertising and promotion	21,926	10,230	11,696	0
13	Office expenses	2,799	1,993	806	0
14	Information technology	100,049	1,973	98,076	0
15	Royalties	223,232	_,	,	
16	Occupancy				
17	Travel	165,503	109,002	56,501	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,	,	
19	Conferences, conventions, and meetings	286,853	283,061	3,792	0
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Meals & entertainment	33,715	18,489	15,226	0
b	Dues & subscriptions	27,165	15,719	11,446	0
С	Printing & Reproductions	17,194	9,184	8,010	0
d	Postage & shipping	4,311	2,262	2,049	0
e	All other expenses	12,657	9,437	3,220	0
25	Total functional expenses. Add lines 1 through 24e	3,233,890	2,114,766	1,119,124	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	106,991	1	88,521
Assets	2		288,063	2	94,068
		Savings and temporary cash investments	200,003	3	94,000
	3	Pledges and grants receivable, net			
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
Ą	8	Inventories for sale or use		8	
				9	
	9 10a	Prepaid expenses and deferred charges		9	
	ь	Less accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14				
		Intangible assets		14	
	15	Other assets See Part IV, line 11	205.054	15	102 500
	16	Total assets. Add lines 1 through 15 (must equal line 34)	395,054	16	182,589
	17	Accounts payable and accrued expenses	-6,515	17	164
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Liabilities	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
		persons Complete Part II of Schedule L		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		25	
	26	D	-6,515		164
	26	Total liabilities. Add lines 17 through 25	-0,515	26	104
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	401,569	27	182,425
	28	Temporarily restricted net assets	,	28	
	29	Permanently restricted net assets		29	
	23	Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	401,569	33	182,425
			· ·		
	34	Total liabilities and net assets/fund balances	395,054	34	182,589

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3 ()14,746
2	Total expenses (must equal Part IX, column (A), line 25)	2 3,233,890			
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			101,569
5	Net unrealized gains (losses) on investments	5			<u> </u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))			182,425	
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. ୮</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revial separate basis, consolidated basis, or both	ewed o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	1e 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
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?		3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O, and describe any steps taken to undergo such audits.		3b		

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SCHEDULE 0 (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 to provide any additional information.

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

OMB No 1545-0047 2013 Open to Public Inspection

Employer identification number Name of the organization CONSUMER ENERGY ALLIANCE INC 26-1658339

990 Schedule O, Supplemental Information

Return Reference	Explanation
Pt III, Line 2	CEA ADDED A FOURTH AREA OF PROGRAM SERVICES ENERGY ADVOCACY PROGRAMS WERE ADDED TO
Pt III, Line 2	1)EDUCATIONAL PROGRAMS AND DIALOGUE PROGRAMS, 2)NATURAL GAS PROGRAMS, AND 3)ENERGY DAY
Pt VI, Line 10b	EXECUTIVE MANAGEMENT AND BOARD REVIEWED THE TAX RETURN AND ALL POLICIES
Pt VI, Line 10b	DESCRIBED HERE IN, PRIOR TO FILING WITH IRS
Pt VI, Line 18	ALL POLICIES, FINANCIAL STATEMENTS AND TAX RETURNS WILL BE POSTED
Pt VI, Line 18	ON BOTH THE ORGANIZATION'S WEBSITE AND ARE AVAILABLE BY REQUEST
Pt VI, Line 19	ALL POLICIES, FINANCIAL STATEMENTS AND TAX RETURNS WILL BE POSTED
Pt VI, Line 19	ON BOTH THE ORGANIZATION'S WEBSITE AND ARE AVAILABLE BY REQUEST
Pt VI, Line 11b	ALL POLICIES, FINANCIAL STATEMENTS AND TAX RETURNS WILL BE POSTED
Pt VI, Line 11b	ON BOTH THE ORGANIZATION'S WEBSITE AND ARE AVAILABLE BY REQUEST
Pt VI, Line 12c	COPIES OF EACH BOARD MEMBERS STATEMENT AND MINUTES ARE RETAINED
Form 990, Part III, Line 4d	ENERGY DAYACADEMIC FESTIVAL AND RELATED K-12 ACADEMIC 300036 0 0