WEGNER CPAS LLP 2921 LANDMARK PL STE 300 MADISON, WI 53713-4236

ENERGY COOPERATIVE ASSOCIATION OF PENNSYLVANIA 50 S. 16TH STREET, FLOOR 17 PHILADELPHIA, PA 19102

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ENERGY COOPERATIVE ASSOCIATION OF PENNSYLVANIA 50 S. 16TH STREET, FLOOR 17 PHILADELPHIA, PA 19102 ATTENTION: DIVYA DESAI

ENCLOSED IS THE ORGANIZATION'S 2023 EXEMPT ORGANIZATION RETURN.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

#### FORM 990 RETURN:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

TAX-EXEMPT ORGANIZATIONS ARE REQUIRED TO MAKE AVAILABLE FOR PUBLIC INSPECTION A COPY OF THEIR ANNUAL RETURNS UPON REQUEST. RETURNS MUST BE AVAILABLE FOR A PERIOD OF THREE YEARS BEGINNING ON THE DATE THE RETURNS ARE REQUIRED TO BE FILED (INCLUDING EXTENSIONS) OR ARE ACTUALLY FILED, WHICHEVER IS LATER. THE ENCLOSED COPY OF YOUR RETURN MAY BE USED TO COMPLY WITH THE PUBLIC INSPECTION REQUIREMENTS.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX RETURN.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THIS COPY INDEFINITELY.

SINCERELY,

BRUCE MAYER, CPA

Bruce Mayer

**PARTNER** 

# Form **8868**

(Rev. January 2024)

# Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

	onic filing (e-file). You can electronically file Form 8868 to			•					
listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension									
request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form									
8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.									
Caution	n: If you are going to make an electronic funds withdrawal (	direct deb	it) with this Form 8868, see Form 84	53-TE and	I Form 8879-TE for p	ayment			
instruc									
All corp	porations required to file an income tax return other than Fo	orm 990-T	(including 1120-C filers), partnership	s, REMICs	s, and trusts				
<u>must u</u>	se Form 7004 to request an extension of time to file incom-	e tax returi	ns.						
Part I -	Identification								
Type o				Taxpayer	identification numb	er (TIN)			
Print	ENERGY COOPERATIVE ASSOCIAT	TON O	F		00 01 5061				
File by the	PENNSYLVANIA				23-217261	1			
due date	for Number, street, and room or suite no. If a P.O. box, se		ions.						
filing your return. Se	e Jo D. Totti Dikumi, Thook in								
instructio	ors. City, town or post office, state, and ZIP code. For a for PHILADELPHIA, PA 19102	reign addr	ress, see instructions.						
Enter tl	ne Return Code for the return that this application is for (file	a senarat	re application for each return)			01			
	ation Is For	Return	Application Is For			Return			
Applica	ation is For	Code	Application is Fol			Code			
Form 0	90 or Form 990-EZ	01	Form 4720 (other than individual)			09			
	720 (individual)	03	Form 5227			10			
Form 9	,	03	Form 6069			11			
	90-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12			
	90-T (sec. 40 (a) of 400(a) trust)	06	Form 5330 (individual)			13			
	90-T (trust other trial above)	07	Form 5330 (other than individual)			14			
Form 1	• •	08	Form 5550 (other than individual)			14			
	you enter your Return Code, complete either Part II or Par		including signature is applicable of	nly for an	ovtonsion of				
	file Form 5330.	ı III. Fait III	, including signature, is applicable of	illy lor all	exterision of				
	application is for an extension of time to file Form 5330, y	ou must a	ater the following information						
_	Plan Name	ou must ei	tter the following information.						
	Plan Number								
	Plan Year Ending (MM/DD/YYYY)								
	Automatic Extension of Time To File for Exempt Organ	izatione (s	ee instructions)						
	books are in the care of DIVYA DESAI	izalions (S	ee iiisu uctioiis)						
1116		r. FLC	OR 17 - PHILADELPH	TA. F	A 19102				
Tolo	phone No. (215) 413-2122	.,	Fax No.	, _					
	e organization does not have an office or place of business	in the I Ini							
	is is for a Group Return, enter the organization's four-digit (					heck this			
box	. If it is for part of the group, check this box	_	ch a list with the names and TINs of						
	request an automatic 6-month extension of time until No				pt organization retu				
	ne organization named above. The extension is for the organization			the exem	ipt organization rote				
_	calendar year 20 23 or	ar ii Latioi i o	Totall' Total						
Ī		20	, and ending		. , 20	)			
		,	, and shaining			<i></i>			
<b>2</b> If	the tax year entered in line 1 is for less than 12 months, cl	heck reaso	on: Initial return	Final retur	n				
_ ;;	Change in accounting period			10101	••				
3a II									
	ny nonrefundable credits. See instructions.	,		За	\$	0.			
_									
	stimated tax payments made. Include any prior year overp			3b	\$	0.			
_	Balance due. Subtract line 3b from line 3a. Include your pa			"	,				
	sing EFTPS (Electronic Federal Tax Payment System). See			3с	\$	0.			
	J			,					

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2024)

**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.

OMB No. 1545-0047

Department of the Treasury

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

A For the 2023 calendar year, or tax year beginning and ending Check if applicable: C Name of organization D Employer identification number ENERGY COOPERATIVE ASSOCIATION OF Address change PENNSYLVANIA Name change THE ENERGY CO-OP 23-2172611 Doing business as Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ termin-ated (215) 413-2122 50 S. 16TH STREET, FLOOR 17 3,393,733. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return PHILADELPHIA, PA 19102 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: DIVYA DESAI Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status:  $\bigcirc$  501(c)(3)  $\boxed{\mathbf{X}}$  501(c) ( 12) 4947(a)(1) or (insert no.) If "No," attach a list. See instructions WWW.THEENERGY.COOP H(c) Group exemption number **K** Form of organization: X Corporation Trust Association Other L Year of formation: 1981 M State of legal domicile: PA Part I Summary Briefly describe the organization's mission or most significant activities: THE ENERGY CO-OP'S MISSION IS Activities & Governance BE A LEADER OF TODAY'S SUSTAINABLE ENERGY EVOLUTION. 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) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7h **Prior Year Current Year** 50. 4,319. Contributions and grants (Part VIII, line 1h) 108,348. 93,140. Program service revenue (Part VIII, line 2g) 193. 3,556. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 864,332. 1,134,915. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 972,923. 235,930. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 584,070. 584,241. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 227,895. 281,006. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 865,247. 811,965. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 160,958. 370,683. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 1,767,517. 1,791,937. Total assets (Part X, line 16) 1,003,664. 657,401 21 Total liabilities (Part X, line 26) 763,853. 134,536 22 Net assets or fund balances. Subtract line 21 from line 20 ...... 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. Signature of officer Date Sign DIVYA DESAI, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature BRUCE MAYER, CPA 10/15/24 P00187180 BRUCE MAYER, CPA Paid self-employed Firm's name WEGNER CPAS LLP Firm's EIN 39-0974031 Preparer Firm's address 2921 LANDMARK PL STE 300 Use Only MADISON, WI 53713-4236 Phone no. (608) 274-4020X Yes May the IRS discuss this return with the preparer shown above? See instructions

Pa	Statement of Program Service Accomplishments
1	Check if Schedule O contains a response or note to any line in this Part III  Briefly describe the organization's mission:
•	THE ENERGY CO-OP'S MISSION IS TO BE A LEADER OF TODAY'S SUSTAINABLE
	ENERGY EVOLUTION.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X 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 \$
	OF THE APPROXIMATELY 4300 ENERGY CO-OP MEMBERS, AS OF 12/31/23 WE HAD 2351 RENEWABLE ELECTRICITY MEMBERS IN THE PECO AND PPL SERVICE
	TERRITORIES WHO WANT TO USE RENEWABLE ELECTRICITY THAT IS SOURCED,
	EITHER REGIONALLY OR NATIONWIDE, FROM WIND AND SOLAR.
	ETTION REGIONALES ON MITTORWIDE, TROP WIND IMP BOUNCE
4b	(Code:) (Expenses \$ including grants of \$)      )
	OF THE APPROXIMATELY 4300 ENERGY CO-OP MEMBERS, AS OF 12/31/23 WE HAD
	2293 HEATING OIL MEMBERS WHO WERE ABLE TO AFFORDABLY HEAT THEIR HOMES
	AS A RESULT OF THE PROGRAM.
_	
4c	(Code:) (Expenses \$
	OF THE APPROXIMATELY 4300 ENERGY CO-OP MEMBERS, AS OF 12/31/23 WE HAD
	613 RENEWABLE NATURAL GAS MEMBERS IN THE PECO AND PGW SERVICE
	TERRITORIES USING NATURAL GAS SOURCED FROM DECOMPOSITION OF LANDFILL
	WASTE.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses
	Form <b>990</b> (2023)

Form 990 (2023) PENNSYLVANIA
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		_ <u>X</u> _
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		<u>X</u>
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		_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? If "Yes," complete Schedule C, Part II	4		
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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		_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? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	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? If "Yes," complete Schedule D, Part VII	11b		_X_
С	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		<u> </u>
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		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_X_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
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			v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_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			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	٠,-		v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		v
00	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	,		Х
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		47

# ENERGY COOPERATIVE ASSOCIATION OF PENNSYLVANIA

Form 990 (2023)

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? If "Yes," complete Schedule I, Parts I and III	22		_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? If "Yes," complete			
	Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		_X_
	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	24c		
d	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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		
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? If "Yes," complete Schedule L, Part II	26		_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			v
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the 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</i>			
-	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_ <u>X</u> _
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	00		Х
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
٠.	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	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		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	200	Х	
Pai	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	Ц
	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			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	000	
332004	4 12-21-23	Form	990	(2023)

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# ENERGY COOPERATIVE ASSOCIATION OF

Form 990 (2023)

PENNSYLVANIA

23-2172611 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

		_		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	7						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Х				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		_X_			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority ov	er, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		_X_			
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FE	BAR).						
			5a 5b		X			
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?								
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organizat							
	any contributions that were not tax deductible as charitable contributions?		6a	X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			ν,				
_	were not tax deductible?		6b	X				
7	Organizations that may receive deductible contributions under section 170(c).		_					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide	· · · · F	7a					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		_					
	to file Form 8282?		7с					
	If "Yes," indicate the number of Forms 8282 filed during the year  Did the exemplation receive any funds directly or indirectly to pay promiums on a personal heapfit contract?		7e					
_	<ul> <li>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</li> <li>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</li> </ul>							
g								
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	01111 1000 01	7h					
•	sponsoring organization have excess business holdings at any time during the year?		8					
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a					
b	Did the constraint of the first in the state of the first in the state of the state		9b					
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
		385,594.						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	8,139.						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	-	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
	Section 501(c)(29) qualified nonprofit health insurance issuers.	ŀ	40					
а	Is the organization licensed to issue qualified health plans in more than one state?	·····	13a					
h	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.							
D	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 consideration and in the consideration of the first of the contract of the constant of the constant of the contract of		14a		X			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b					
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?		15		Х			
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	ľ	16		Х			
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	[						
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17					
	If "Yes." complete Form 6069.							

12331015 788028 14615.1AU01

Form **990** (2023)

Page 6 PENNSYLVANIA Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line day day, or you solow, decorrise the directinated one of the direction of the direc			77
800	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			l
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9	-		
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			37
	officer, director, trustee, or key employee?	2		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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
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?	7a	X	
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	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		1	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedNONE			
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)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X 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	d financ	cial	
	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			
	DIVYA DESAI - (215) 413-2122			
	50 S. 16TH STREET, FLOOR 17, PHILADELPHIA, PA 19102			

### Form 990 (2023) 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization n		orga	niza			nper	sate		irector, or trustee.	
(A)	(B)	<b>(C)</b> Position					(D)	(E)	(F)	
Name and title	Average	(do				<b>)</b> than o	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	s both	an	compensation	compensation	amount of
	week		l a		d a director/truste			from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or 0	stee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee		1099-NEC)	10001120,	and related
	below	idual	ution	l la	Key employee	est co	ler	,		organizations
	line)	Indiv	Insti	Officer	Key	High emp	Former			
(1) DIVYA DESAI	40.00								_	
EXECUTIVE DIRECTOR				Х	L			113,620.	0.	20,068.
(2) ETHAN BIRCHARD	1.00								_	_
PRESIDENT		Х		X	L			0.	0.	0.
(3) WILLIAM O'DONNELL	1.00								_	_
VICE PRESIDENT/TREASURER (FROM JUNE)		Х		Х	L			0.	0.	0.
(4) DAMALI HARDING	1.00	1								_
TREASURER (THRU JUNE)		Х		X	<u> </u>			0.	0.	0.
(5) GLENN BERGMAN	1.00									
DIRECTOR	1	Х			<u> </u>			0.	0.	0.
(6) JAY REYNOLDS	1.00								•	•
DIRECTOR	1 00	Х			<u> </u>			0.	0.	0.
(7) ELOISE YOUNG	1.00								•	•
DIRECTOR	1 00	Х			<u> </u>			0.	0.	0.
(8) SARA SHANNON	1.00	.,								0
DIRECTOR (THRU DEC)	1 00	Х			⊢			0.	0.	0.
(9) RONALD FISHER	1.00	<b>.</b> ,							0	0
DIRECTOR	1.00	Х			┢			0.	0.	0.
(10) DEVIN MCDOUGALL DIRECTOR (FROM FEB)	1.00	Х						0.	0.	0.
(11) MAXINE DIXON	1.00	Δ			$\vdash$			0.	0.	0.
SECRETARY (FROM JUNE)	1.00	Х		Х				0.	0.	0.
SECRETARI (FROM DUNE)		Δ		^	┢			0.	0.	0.
		1								
		1								
					$\vdash$					
		1								
					T					
		1								
		1								
					L	L	L			
										- QQQ (0000)

Form 990 (2023)

Part VII   Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,	and	ΙΗiς	ghes	t C	ompensated Employee	s (continued)	
<b>(A)</b> Name and title	(B) Average hours per week	(do box,	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
1b Subtotal								113,620.	0.	20,068.
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)								113,620.	0.	0. 20,068.

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

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

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? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 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.

The organization, report compensation of the calculate year of any		(0)
(A)	(B)	(C)
Name and business address	Description of services	Compensation
PJM SETTLEMENT, INC.		
2750 MONROE BLVD., AUDUBON, PA 19403	ELECTRICITY MARKET	767,116.
DTE ENERGY TRADING, INC., ONE ENERGY		
PLAZA, 400 WCB, DETROIT, MI 48226	POWER SERVICES	513,693.
EDF TRADING NORTH AMERICA, LLC		
601 TRAVIS STREET, HOUSTON, TX 77002	NATURAL GAS SERVICES	240,869.
FREEPOINT COMMODITIES, LLC	RENEWABLE ENERGY	
58 COMMERCE ROAD, STAMFORD, CT 06902	SERVICES	163,750.
AVANGRID RENEWABLES, LLC, 1125 N.W. COUCH	RENEWABLE ENERGY	
ST. SUITE 600, PORTLAND, OR 97209	SERVICES	113,900.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 6		
		- 000

Form **990** (2023)

Form 990 (2023) PENNSYL
Part VIII Statement of Revenue

			Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
S S			Fundraising events	1c					
fts,			Related organizations	1d					
ية إق			Government grants (contributions)	1e					
ons,									
utic		T	All other contributions, gifts, grants, and	I I	A 310				
ë			similar amounts not included above	1f	4,319.				
o d		_	Noncash contributions included in lines 1a-1f	1g  \$		4,319.			
Oa		n	Total. Add lines 1a-1f		Business Code	4,317.			
			HEADING OIL GOMETGGTONG			03 140	02 140		
ice	_		HEATING OIL COMMISSIONS		454310	93,140.	93,140.		
erv		b							
n S		С							
ran 3ev		d							
Program Service Revenue		е							
Δ			All other program service revenue						
		g	Total. Add lines 2a-2f			93,140.			
	3		Investment income (including divide	ends, intere	st, and				
			other similar amounts)			3,556.			3,556.
	4		Income from investment of tax-exer	npt bond p	roceeds				
	5		Royalties						
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i) 5	Securities	(ii) Other				
			assets other than inventory 7a						
		b	Less: cost or other basis						
e			and sales expenses 7b						
en		С	Gain or (loss) 7c						
Pe			Net gain or (loss)						
her Revenue			Gross income from fundraising events (						
٥			including \$	_ of					
			contributions reported on line 1c). S						
			Part IV, line 18						
		b	Less: direct expenses	8b					
		С	Net income or (loss) from fundraising	g events					
	9	а	Gross income from gaming activitie	s. See					
			Part IV, line 19	9a					
		b	Less: direct expenses	9b					
		С	Net income or (loss) from gaming a	ctivities					
	10	а	Gross sales of inventory, less return	ns					
			and allowances	10a	3,292,454.				
		b	Less: cost of goods sold	10b	2,157,803.				
		С	Net income or (loss) from sales of in	ventory		1,134,651.	1,134,651.		
, ]	_	_		·	Business Code				
ous •	11	а							
ane Dud		b							
Miscellaneous Revenue		С							
lisc B.		d	All other revenue		900099	264.			264.
2			Total. Add lines 11a-11d			264.			
	12		Total revenue. See instructions			1,235,930.	1,227,791.	0.	3,820.

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 (C) Management and general expenses (**D**) Fundraising Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 133,688. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 375,934. Other salaries and wages 7 Pension plan accruals and contributions (include 9,666. section 401(k) and 403(b) employer contributions) 27,780. Other employee benefits 9 37,173. 10 Payroll taxes Fees for services (nonemployees): Management 7,286. Legal 47,905. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 6,896. column (A), amount, list line 11g expenses on Sch O.) 74,681. Advertising and promotion 12 16,623. Office expenses 13 57,925. Information technology 14 Royalties 15 34,061. 16 Occupancy 9,652. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 5,226. Conferences, conventions, and meetings ..... 19 20 Payments to affiliates \_\_\_\_\_ 21 10,551. Depreciation, depletion, and amortization ..... 22 8,089. 23 Other expenses. Itemize expenses not covered 24 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.) 2,111. DUES AND SUBSCRIPTIONS All other expenses 865,247. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Form 990 (2023)

Check here

if following SOP 98-2 (ASC 958-720)

Form 990 (2023)
Part X Balance Sheet

rai	τx	Balance Sneet					
		Check if Schedule O contains a response or no	te to an	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			96,391.	1	282,397
	2	Savings and temporary cash investments			534,630.	2	816,150
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			465,940.	4	395,581
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describe	ed in sec	ion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			143,349.	9	107,498
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	47,714.			
	b				5,654.	10c	10,288
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line	:11			13	
	14	Intangible assets		75,435.	14	105,004	
	15	Other assets. See Part IV, line 11			446,118.	15	75,019
	16	Total assets. Add lines 1 through 15 (must eq			1,767,517.	16	1,791,937
	17	Accounts payable and accrued expenses		1,003,664.	17	657,401	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or form					
┋╽		trustee, key employee, creator or founder, subs					
Liabilities		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on line of Schedule D	S 17-24,	Complete Part X		25	
	26	Total liabilities. Add lines 17 through 25			1,003,664.	26	657,401
	20	Organizations that follow FASB ASC 958, ch			1,005,004.	20	037,401
S		and complete lines 27, 28, 32, and 33.	eck Hei	· 🗀 📗			
ů	27			27			
sala	28	Net assets without donor restrictions  Net assets with donor restrictions		28			
od E	20	Organizations that do not follow FASB ASC					
Fur		and complete lines 29 through 33.	000, 011				
ō	29	Capital stock or trust principal, or current funds		0.	29	0	
ets	30	Paid-in or capital surplus, or land, building, or e		743,519.	30	1,114,202	
Ass	31	Retained earnings, endowment, accumulated in			20,334.	31	20,334
Net Assets or Fund Balances	32	Total net assets or fund balances			763,853.	32	1,134,536
~	33	Total liabilities and net assets/fund balances			1,767,517.	33	1,791,937

Form **990** (2023)

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

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

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

Form **990** (2023)

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## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

ENERGY COOPERATIVE ASSOCIATION OF **PENNSYLVANIA** 

**Employer identification number** 23-2172611

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		Similar Fund	s or Acc	counts. Complete if the
		(a) Donor advis	sed funds	(b)	) Funds and other accounts
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 v	writing that the assets h	neld in donor adv	rised funds	
	are the organization's property, subject to the organization's	-			
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for a	any other purpos	e conferrin	g
	impermissible private benefit?				
Par	t II Conservation Easements. Complete if the org	ganization answered "Y	es" on Form 990	, Part IV, li	ne 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	)		
	Preservation of land for public use (for example, recreated	tion or education)	Preservation	of a histori	cally important land area
	Protection of natural habitat		Preservation	of a certifie	ed historic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contri	bution in the forr	n of a cons	
	day of the tax year.			- 1	Held at the End of the Tax Year
а	Total number of conservation easements				2a
b				·····	2b
С	Number of conservation easements on a certified historic stru				2c
d	Number of conservation easements included on line 2c acqui				
	on a historic structure listed in the National Register				2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or	terminated by th	ne organiza	ation during the tax
	year				
4	Number of states where property subject to conservation eas			<del>-</del>	
5	Does the organization have a written policy regarding the per				
_	violations, and enforcement of the conservation easements it				
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, a	and enforcing co	nservation	easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and e	enforcing conserv	ation ease	ements during the year
_				(L) (A) (D) (i)	
8	Does each conservation easement reported on line 2d above				□ Vaa □ Na
•	and section 170(h)(4)(B)(ii)?				
9					
	balance sheet, and include, if applicable, the text of the footn organization's accounting for conservation easements.	lote to the organization	S III Iai ICiai Statei	Herits that	describes trie
Par	t III Organizations Maintaining Collections of	Art, Historical Tr	easures, or C	Other Sir	nilar Assets.
	Complete if the organization answered "Yes" on Form		ŕ		
1a	If the organization elected, as permitted under FASB ASC 95		venue statement	and balan	ce sheet works
	of art, historical treasures, or other similar assets held for pub	•			
	service, provide in Part XIII the text of the footnote to its finan	•	•		1
b	If the organization elected, as permitted under FASB ASC 95				sheet works of
	art, historical treasures, or other similar assets held for public				
	provide the following amounts relating to these items.	,			
	(i) Revenue included on Form 990, Part VIII, line 1				\$
2	If the organization received or held works of art, historical trea				
	the following amounts required to be reported under FASB A			J / I=-	
а	Revenue included on Form 990, Part VIII, line 1				\$
	Assets included in Form 990, Part X				

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

Schedule D (Form 990) 2023

	t III   Organizations Maintaining Co		t Histo	rical Tre	asures o	r Othe	r Sim	ilar ∆sset	. / <u>Z O I</u> .	T 5	age Z
	•								<b>S</b> (contil	nued)	
3	Using the organization's acquisition, accession	n, and other record	s, cneck a	any of the i	following that	make s	ignifica	int use of its			
	collection items (check all that apply).										
а	Public exhibition	d			hange progra						
b	Scholarly research	е	0	ther							
С	Preservation for future generations										
4	Provide a description of the organization's coll								XIII.		
5	During the year, did the organization solicit or				•				٦.,		٦
Dar	to be sold to raise funds rather than to be maint IV Escrow and Custodial Arrang								Yes		No
Fai	<b>t IV</b> Escrow and Custodial Arrang reported an amount on Form 990, Part		te if the o	rganizatior	n answered "	Yes" on	Form 9	990, Part IV, I	ine 9, or		
12	Is the organization an agent, trustee, custodia		diany for o	ontribution	oc or other ac	sots not	includ	od			
ıa									Yes		No
h	on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII a								165		_ INO
b	ii res, explain the arrangement in Fart Alli a	na complete the loi	llowing tai	DIE.			Г		Amoun	t	
С	Reginning halance						-	c	7 11110 2111		
	Beginning balance Additions during the year							d			
u _	Distributions during the year							e			
f	Ending balance							lf			
2a	Did the organization include an amount on For							·	Yes		No
	If "Yes," explain the arrangement in Part XIII.						•		_		j
Par		he organization ans	swered "Y	es" on For	m 990. Part	V. line 1					
		(a) Current year		ior year	(c) Two year			ree years back	(e) Fou	r years	back
1a	Beginning of year balance	, ,	. , ,								
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	nt year end balance	e (line 1g,	column (a	)) held as:	•			•		
а	Board designated or quasi-endowment	•	%		•						
b	Permanent endowment		_								
С	Term endowment	6									
	The percentages on lines 2a, 2b, and 2c should	ld equal 100%.									
За	Are there endowment funds not in the possess	sion of the organiza	ation that	are held ar	nd administer	ed for th	ne				
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizati	ons listed as requir	ed on Sch	nedule R?					. 3b		
4	Describe in Part XIII the intended uses of the o		wment fu	nds.							
Par	t VI Land, Buildings, and Equipme										
	Complete if the organization answered	"Yes" on Form 990	), Part IV,	line 11a. S	See Form 990	, Part X,	line 10	).			
	Description of property	(a) Cost or o basis (investr		` '	or other (other)	٠,	ccumu precia		(d) Boo	k valu	е
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment			4	7,714.		37	426.	1	0,2	<u>88.</u>
	Other										
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part	X, line 10	c, column	(B))				1	0,2	88.

Schedule D (Form 990) 2023

	ERATIVE ASSOC		
Schedule D (Form 990) 2023 PENNSYLVANI	<u>A</u>	23	-2172611 Page 3
Part VII Investments - Other Securities	F 000 B-+ N/ E	14h Osa Farra 000 Bast V Pas 40	
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))  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	d-of-year market value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets  Complete if the organization answered "Yes"	on Form 990 Part IV line	11d See Form 990 Part X line 15	
-	Description	Tra. Gee Form Goo, Fare X, into To.	(b) Book value
··	Bookiption		(b) Book value
(1)			
(2)			
(3)			
<u>(4)</u>			
(5)			
<u>(6)</u>			
(7)			
(8)			
(9)	/ (D))		
Total. (Column (b) must equal Form 990, Part X, line 15, co	I. (B))		
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
(a) Description of lightity	0111 01111 000, 1 411 14, 11110	110 01 111. 000 1 0111 000, 1 are X, iiilo 20	(b) Book value
(1) Federal income taxes			(2) 2001 14140
(2)			
(3)			
(4)			
(5)			
\-\( \)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X 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

Schedule D (Form 990) 2023

(6) (7) (8)

Sche	edule D (Form 990) 2023	PENNSYLVANIA		23-	2172611	Page 4
Pa	rt XI Reconciliation o	of Revenue per Audited Financi	al Statements With Revenue	per Return		
	Complete if the organ	nization answered "Yes" on Form 990, Pa	art IV, line 12a.			
1	Total revenue, gains, and oth	1	3,393	<u>,733.</u>		
2	Amounts included on line 1 l	but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses)	on investments	2a			
b	Donated services and use of					
С	Recoveries of prior year gran					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d	2e		0.		
3	Subtract line 2e from line 1	3	3,393	<u>,733.</u>		
4		990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not inc					
b	Other (Describe in Part XIII.)	,803.				
С	Add lines 4a and 4b	4c	-2,157			
5	Total revenue. Add lines 3 a	5	1,235	<u>,930.</u>		
Pa	rt XII Reconciliation o	of Expenses per Audited Financ	ial Statements With Expens	es per Retur	n	
	Complete if the organ	nization answered "Yes" on Form 990, Pa	art IV, line 12a.			
1	Total expenses and losses p	1	3,023	<u>,050.</u>		
2	Amounts included on line 1 l	but not on Form 990, Part IX, line 25:				
а	Donated services and use of	f facilities	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII.)		2d 2,157	<u>,803.</u>		
е	Add lines 2a through 2d	2e	2,157			
3	Subtract line 2e from line 1	3	865	<u>,247.</u>		
4	Amounts included on Form 9	990, Part IX, line 25, but not on line 1:				
а	Investment expenses not inc	cluded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)		4b			

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

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

### PART X, LINE 2:

c Add lines 4a and 4b

THE COOPERATIVE QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION

501(C)(12) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM FEDERAL, STATE,

AND LOCAL INCOME TAXES AS LONG AS MORE THAN 85% OF REVENUE IS RECEIVED

FROM ITS MEMBERS. THE COOPERATIVE IS CONSIDERED A COOPERATIVE CORPORATION

FOR PENNSYLVANIA STATE TAX PURPOSES AND MUST PAY A GROSS RECEIPTS TAX ON

RECEIPTS FROM THE SALE OF ELECTRIC ENERGY AT RETAIL TO END-USE CUSTOMERS

IN PENNSYLVANIA. APPLICABLE TAXES, TOTALING \$170,239 AND \$224,120 FOR 2023

AND 2022, RESPECTIVELY, HAVE BEEN INCLUDED AS A COMPONENT OF ELECTRICITY

PURCHASES ON THE STATEMENTS OF OPERATIONS.

#### PART XI, LINE 4B - OTHER ADJUSTMENTS:

4c

# SCHEDULE O (Form 990)

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.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

ENERGY COOPERATIVE ASSOCIATION OF PENNSYLVANIA

Employer identification number 23-2172611

FORM 990, PART VI, SECTION B, LINE 11B:

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page **2** 

Name of the organization ENERGY COOPERATIVE ASSOCIATION OF PENNSYLVANIA

Employer identification number 23-2172611

THE FORM 990 IS PREPARED BY THE ORGANIZATION'S OUTSIDE ACCOUNTING FIRM AND REVIEWED BY THE EXECUTIVE DIRECTOR AND FINANCE COORDINATOR; SUBSEQUENTLY, A DRAFT IS SUBMITTED TO THE FINANCE COMMITTEE FOR REVIEW. ANY CORRECTIONS/CHANGES BY THE FINANCE COMMITTEE ARE DISCUSSED WITH THE EXECUTIVE DIRECTOR/OUTSIDE CPA AND A FINAL COPY IS PREPARED AND FILED BY THE CPA. THE BOARD OF DIRECTORS IS PROVIDED WITH A COPY OF THE 990 FOR REVIEW AND APPROVAL PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

EVERY BOARD MEMBER IS RESPONSIBLE FOR DISCLOSING AFFILIATIONS AND

SITUATIONS THAT MIGHT CONSTITUTE OR LEAD TO A CONFLICT OF INTEREST OR MIGHT
BE PERCEIVED BY A REASONABLE PERSON AS CONSTITUTING A CONFLICT OF INTEREST.

WITHIN 30 DAYS OF ELECTION TO THE BOARD OF DIRECTORS, AND ANNUALLY

THEREAFTER, EACH BOARD MEMBER COMPLETES AND SIGNS AN ANNUAL CONFLICT

DISCLOSURE QUESTIONNAIRE FORM PROVIDED THAT REQUESTS THEM TO IDENTIFY THEIR

INTEREST THAT COULD GIVE RISE TO CONFLICTS OF INTEREST, INCLUDING ALL

PROFESSIONAL, FINANCIAL, AND PERSONAL AFFILIATIONS THAT MIGHT AFFECT THEIR

INDEPENDENT DECISION-MAKING CAPACITY DURING SERVICE TO THE ENERGY CO-OP,

AND WHICH AFFIRMS THAT HE OR SHE: 1. HAS RECEIVED A COPY OF THIS CONFLICTS

POLICY; 2. HAS READ AND UNDERSTANDS THIS CONFLICTS POLICY, AND; 3. HAS

AGREED TO COMPLY WITH THIS CONFLICTS POLICY. THE ANNUAL DISCLOSURE FORMS

ARE MAINTAINED WITH THE ORGANIZATION'S CORPORATE RECORDS.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF DIRECTORS ANNUALLY CONDUCTS A PERFORMANCE REVIEW OF THE

EXECUTIVE DIRECTOR. THE EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED AND

COMPARED TO PUBLIC INFORMATION ABOUT COMPENSATION IN POSITIONS AT SIMILAR

ORGANIZATIONS. FOLLOWING DISCUSSION, THE BOARD OR A COMMITTEE OF THE BOARD

32212 11-14-23

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023	Page 2
Name of the organization ENERGY COOPERATIVE ASSOCIATION OF PENNSYLVANIA	Employer identification number 23-2172611
DELEGATED APPROPRIATE AUTHORITY APPROVES COMPENSATION FOR	THE EXECUTIVE
DIRECTOR.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS BYLAWS AND FINANCIAL STATEMENTS	S AVAILABLE ON ITS
WEBSITE. THE ORGANIZATION MAKES ITS CONFLICT OF INTEREST S	STATEMENT
AVAILABLE TO THE PUBLIC UPON REQUEST.	

#### 2023 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
1	FURNITURE AND EQUIPMENT	VARIOUS		.000	HY1	16	47,714.				47,714.	32,365.		5,061.	37,426.
	* 990 PAGE 10 TOTAL														
	MACHINERY & EQUIPMENT * GRAND TOTAL 990 PAGE 10						47,714.				47,714.	32,365.		5,061.	37,426.
	DEPR						47,714.				47,714.	32,365.		5,061.	37,426.
							,				,	,		,	,

328111 04-01-23

<sup>(</sup>D) - Asset disposed

<sup>\*</sup> ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone