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Form	990

Department of the Treasury Internal Revenue Service

### EXTENDED TO NOVEMBER 15, 2019 Return of Organization Exempt From Income Tax

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

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

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



AF	or th	e 2018 calendar year, or tax year beginning and e	nding					
B a	Check if	le: C Name of organization		D Employer identific	cation number			
	Addre							
	Name chang			82-1	765854			
	Initial returr	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number				
	Final returr		00	703-'	717-5592			
	termi ated			<b>G</b> Gross receipts \$	264,636.			
	Amer	ARLINGION, VA 22201		H(a) Is this a group re				
	Appli tion	F Name and address of principal officer: 0 01111 W. 01111501		for subordinates	? Yes 🔀 No			
	pend	6671 MCLEAN DR., MCLEAN, VA 22101		H(b) Are all subordinates ind	cluded? Yes No			
		empt status: X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)			
		te: CLEANENERGYGRID.ORG		H(c) Group exemption	,			
		f organization: 🔀 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨	L Year of	of formation: 2017 N	I State of legal domicile: VA			
Pa	art I	Summary						
đ	1	Briefly describe the organization's mission or most significant activities: ACEG						
ũ		STAKEHOLDERS AND THE PUBLIC TO SUPPORT POL	ICIES	AND REGULA	TIONS			
srna	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispose	x 🕨 🔲 if the organization discontinued its operations or disposed of more than 25% of its net					
Activities & Governance	3				8			
	4	Number of independent voting members of the governing body (Part VI, line 1b) $\dots$			8			
es 2	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			0			
viti	6	Total number of volunteers (estimate if necessary)			12			
Acti	7a	Total unrelated business revenue from Part VIII, column (C), line 12			0.			
_	b	Net unrelated business taxable income from Form 990-T, line 38	<u></u>	7b	0.			
				Prior Year	Current Year			
e	8	Contributions and grants (Part VIII, line 1h)		146,258.	264,590.			
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.			
sev Sev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	46.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		146,258.	264,636.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	209,750.			
sue	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)		66,400	00.164			
ш	"	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		66,492.	29,164.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		66,492.	238,914.			
	19	Revenue less expenses. Subtract line 18 from line 12		79,766.	25,722.			
S OF				ginning of Current Year	End of Year			
Assets Balanc	20	Total assets (Part X, line 16)		82,516.	137,481.			
Net As	-	Total liabilities (Part X, line 26)		2,750.	31,993.			
	22	Net assets or fund balances. Subtract line 21 from line 20		79,766.	105,488.			
1 12	art II	Signature Block						

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		Date				
Here	JOHN W. JIMISON, EXECU	TIVE DIRECTOR					
	Type or print name and title						
	Print/Type preparer's name	Preparer's signature	Date Check PTIN				
Paid	DANIEL A. LARSON	DANIEL A. LARSON	11/14/19 self-employed P01293368	3			
Preparer	Firm's name 🕒 GROSS , MENDELSOH		Firm's EIN ► 52-0982413	3			
Use Only	Firm's address 🕨 1801 PORTER STRE	ET, SUITE 500					
	BALTIMORE, MD 21	230	Phone no. $410 - 685 - 5512$				
May the I	May the IRS discuss this return with the preparer shown above? (see instructions)						
832001 12-3	32001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018)						

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	n 990 (2018) AMERICANS FOR A CLEAN ENERGY GRID	82-1765854	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	ACEG'S MISSION IS TO EDUCATE STAKEHOLDERS AND THE PUBLIC		
	POLICIES AND REGULATIONS FAVORING THE EXPANSION, MODERNIZ	-	<b>—</b> —
	INTEGRATION OF THE HIGH-VOLTAGE ELECTRIC TRANSMISSION GRI	LD IN ORDER	TO
	ACHIEVE A CLEAN ENERGY ECONOMYONE THAT ATTAINS THE		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Vor	XNo
	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?	Ves	XNo
Ŭ	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 n	neasured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported.	· · ·	
4a	(Code:) (Expenses \$ 89 , 300 . including grants of \$ ) (Revenue		)
	ORGANIZED AND PRESENTED THREE TRANSMISSION-RELATED WEB		
	TRANSMISSION-STRATEGY LUNCH COLLOQUIUM; UPDATED AND ELABO		CEG
	WEBSITE AND CITED MULTIPLE TRANSMISSION DEVELOPMENTS TO (		
	PARTNERS; DRAFTED COMMENTS ON FEDERAL ENERGY REGULATORY (		
	RESILIENCE INQUIRY AND DEPARTMENT OF ENERGY TRANSMISSION		
	STUDY; AND PARTICIPATED IN VARIOUS CONFERENCES AND MEETIN		
	GROUPS TO RAISE THE PROFILE OF TRANSMISSION NEEDS AMONG H	SNERGY-RELAT	ED
	ISSUES.		
4b	(Code:) (Expenses \$44,650 • including grants of \$) (Revenue	ue \$	)
	UNDERTOOK A SIGNIFICANT EFFORT TO BRING PUBLIC AND EXPEN	ATTENTION	OT 1
	SEMINAL STUDY BY DOE'S NATIONAL RENEWABLE ENERGY LABORATO	DRY ON THE	
	POTENTIAL FOR TRULY NATIONAL HIGH-VOLTAGE INTERCONNECTION	NS, WITH	
	3.5-TO-1 BENEFIT-TO-COST RATIO.		
4c	(Code:) (Expenses \$14,884. including grants of \$) (Revenue	ue \$	)
	LAUNCHED A MAJOR STUDY OF THE EASTERN INTERCONNECTION'S		, ,
	POTENTIAL IF INTERREGIONAL TRANSMISSION PROJECTS THAT MAN	KE SENSE ARE	
	PLANNED AND PERMITTED, EMPLOYING SPECIALIZED CONSULTANTS.	0	
44	Other program services (Describe in Schedule O.)		
τu	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses > 148,834.	/	
		Form	<b>990</b> (2018)

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			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		37	
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
~	similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		x
0	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	7		
8	, , ,	8		х
0	Schedule D, Part III	<u> </u>		
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?			
		9		х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, VII, VII, VII, VII,			
••	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		х
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		х
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		Х
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
е	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			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	116		х
15	or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		- 23
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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	17		х
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		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		Х

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			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			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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), 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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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 "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a 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		X
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b				
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

1c

Form 990 (2018)	AMERICANS					
Part V Stat	ements Regarding Other	IRS Filin	gs and Ta	ax Complia	nce _{(con}	tinued)

			Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2a 0				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?				
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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 (FBAR).				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X	
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v	
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
7	were not tax deductible?	<u>6b</u>			
7	Organizations that may receive deductible contributions under section 170(c).	70		x	
a b	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a 7b			
0	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
U	to file Form 8282?	7c		x	
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x	
f					
g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		X X	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
	sponsoring organization have excess business holdings at any time during the year?	8		Х	
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X	
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders				
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
40	amounts due or received from them.)				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	<u>12a</u>			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	-			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120			
а	Is the organization licensed to issue qualified health plans in more than one state?	<u>13a</u>			
h	<b>Note.</b> 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				
0	organization is licensed to issue qualified health plans				
c	Enter the amount of reserves on hand				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			
15 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		x	
	If "Yes," see 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?	16		Х	
	If "Yes," complete Form 4720, Schedule O.				

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### AMERICANS FOR A CLEAN ENERGY GRID

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	3		
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	3		
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		X
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	Х	
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		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	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	Х	
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 in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	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	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
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 filed <b>NONE</b>			
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)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l financ	ial	
	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			
	DAVID GARDINER AND ASSOCIATES - 703-717-5592			
	3100 CLARENDON BLVD, SUITE 800, ARLINGTON, VA 22201			

Part VII	Co	npensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
	Em	ployees, and Independent Contractors

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

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)				than o is both	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JENNIFER CHEN DIRECTOR	4.00	x						0.	0.	0.
(2) JAMES J HOECKER	4.00	~							0.	
DIRECTOR		х						0.	0.	0.
(3) NINA PLAUSHIN	4.00									
DIRECTOR		х						0.	0.	0.
(4) PEGGY SIMMONS	4.00									
DIRECTOR		Х						0.	0.	0.
(5) JOHN W. JIMISON	20.00									
EXECUTIVE DIRECTOR				х				64,400.	0.	0.
(6) BILL WHITE	3.00									-
PRESIDENT				X				2,000.	0.	0.
(7) ROB GRAMLICH	5.00							40 550	0	0
VICE PRESIDENT	C 00			X		<u> </u>		48,550.	0.	0.
(8) DAVID GARDINER SECRETARY	6.00			x				94,800.	0.	0
(9) PATRICK HUGHES	4.00			<u> </u>		+		94,000.	0.	0.
TREASURER	4.00			x				0.	0.	0.

	990 (2	2018) AMERICANS	S FOR A	CI	ιEA	N	ΕN	IER	GY	GRID	82-17	658	54	Pa	age <b>8</b>
Par	t VII	Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)				
		(A)	(B)				C)			(D)	(E)			(F)	
		Name and title	Average	( - 1 -		Pos				Reportable	Reportable			imate	d
			hours per					than o s both		compensation	compensatio	n	amo	ount d	of
			week					or/trus		from	from related			ther	
			(list any	ctor						the	organizations	\$ .	comp		tion
			hours for	- dire				5		organization	(W-2/1099-MIS		fro	m the	э
			related	tee ol	Istee			ensat		(W-2/1099-MISC)			orga	nizati	on
			organizations	Individual trustee or director	Institutional trustee		oyee	a mo					and	relate	ed
			below	vidual	tutio	er	Key employee	est c loyee	Jer				orgar	nizatio	ons
			line)	Indiv	Insti	Officer	Key e	Highest compensated employee	Former						
												<u> </u>			
								-				-+			
												$\rightarrow$			
												-+			
												_			
1b	Sub-	total								209,750.		0.			0.
С	Tota	I from continuation sheets to Part VI	I, Section A							0.		0.			0.
d	Tota	I (add lines 1b and 1c)								209,750.		0.			0.
2		number of individuals (including but n							o re	eceived more than \$100,	000 of reportable				
	comp	pensation from the organization													0
		· · · ·												Yes	No
3	Did tl	he organization list any former officer,	director or tri	ister	- ke	w en	nnlo		ort	highest compensated er	nnlovee on				
Ŭ		0 ,			,		•			0 1	1 5		3		х
		a? If "Yes," complete Schedule J for s										···	3		
4		ny individual listed on line 1a, is the su													v
		related organizations greater than \$150										····	4	_	X
5		ny person listed on line 1a receive or a	-				-			-					
		ered to the organization? <i>If "Yes." cor</i>	nplete Schedule	e J f	or si	ıch i	oers	on .					5		Х
Sec	tion B	3. Independent Contractors													
1	Com	plete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	ensatio	n fror	n	
	the o	rganization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
		(A)								(B)			(C)		
		Name and business	address	N	ONE	3				Description of s	ervices	Cor	mpens		า
												,			
									_						
									Ţ						
2	Total	number of independent contractors (i	ncluding but n	ot lir	niter	d to	thos	se lis	ted	above) who received mo	ore than				
_		0.000 of compensation from the organi					(			,					

				A CLEAN	ENERGY GRI	ID	82-1765	854 Page 9
Pa	rt VII							
		Check if Schedule O cont	ains a response	or note to any line	(A)	(B)	(C)	(D) Revenue excluded
					Total revenue	Related or exempt function revenue	Unrelated business revenue	from tax under sections 512 - 514
nts nts	1 a	Federated campaigns						
Srar our		Membership dues						
ts, ( Am		• • • • • • • • • • • • • • • • • • • •						
Gif		Related organizations						
ns, Sim		5 (						
er (	f	All other contributions, gifts, gran		264,590.				
Oth	~	similar amounts not included above						
Contributions, Gifts, Grants and Other Similar Amounts		Noncash contributions included in lines <b>Total.</b> Add lines 1a-1f			264,590.			
0.0				Business Code				
ė	2 a							
e vio	b							
Se	с							
am	d							
Program Service Revenue	е							
đ	f	1 0		-				
	g							
	3	Investment income (including			46.	46.		
	4	other similar amounts) Income from investment of tax			40.	40.		
	4 5			Г				
	5	Royalties	(i) Real	(ii) Personal				
	6 a	Gross rents		(ii) i eisonai				
	b							
	c							
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
		Net gain or (loss)		🕨				
е	8 a	Gross income from fundraising	<b>,</b>					
Other Revenue		including \$						
Be		contributions reported on line	,					
her	h	Part IV, line 18 Less: direct expenses						
ð				<b>&gt;</b>				
		Gross income from gaming ac						
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less	returns					
		and allowances						
	b	Less: cost of goods sold	b					
	с	Net income or (loss) from sale	s of inventory	<b>&gt;</b>				
ļ		Miscellaneous Revenue	е	Business Code				
	11 a							
	b							
	c							
	d							
	е 12	Total. Add lines 11a-11d Total revenue. See instructions		🕨	264,636.	46.	0.	0.
	14	I JUAI IEVENUE. JEE MISUUUUUS		🔽 🗌	202,030.	I I I I I I I I I I I I I I I I I I I	U •	· · ·

Form 990 (2018)

#### AMERICANS FOR A CLEAN ENERGY GRID Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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X

	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 (	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3 (	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5 (	Compensation of current officers, directors,				
1	trustees, and key employees	209,750.	119,670.	89,080.	1,000.
6	Compensation not included above, to disqualified				
I	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7 (	Other salaries and wages				
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
	Other employee benefits				
<b>10</b>	Payroll taxes				
	Fees for services (non-employees):				
a	Management				
bl	Legal	885.	885.		
	Accounting				
dl	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
-	Other. (If line 11g amount exceeds 10% of line 25,				
(	column (A) amount, list line 11g expenses on Sch 0.)	25,000.	25,000.		
	Advertising and promotion				
	Office expenses	33.	33.		
	Information technology	2,341.	2,341.		
	Royalties				
	Occupancy	105	105		
	Travel	185.	185.		
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	700	700		
	Conferences, conventions, and meetings	720.	720.		
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization				
ć	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 0.)				
а					
b .					
c _					
d .					
	All other expenses	000 011	1 4 0 0 0 4		4
	Total functional expenses. Add lines 1 through 24e	238,914.	148,834.	89,080.	1,000.
	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)				

AMERICANS	FOR	Α	CLEAN	ENERGY	GRID
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		Check if Schedule O contains a response or note	e to any line in this Part X			
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		38,766.	1	137,481.
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		43,750.	4	
	5	Loans and other receivables from current and for				
		trustees, key employees, and highest compensation	ted employees. Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualifi	ied persons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of secti	on 501(c)(9) voluntary			
s		employees' beneficiary organizations (see instr).	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
Ä	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 1	E E E E E E E E E E E E E E E E E E E		12	
	13	Investments - program-related. See Part IV, line 1		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		0.	15	0.
	16	Total assets. Add lines 1 through 15 (must equa		82,516.	16	137,481.
	17	Accounts payable and accrued expenses		2,750.	17	31,993.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete F			21	
es	22	Loans and other payables to current and former				
oiliti		key employees, highest compensated employees				
Liabilities		Complete Part II of Schedule L			22	
_	23	Secured mortgages and notes payable to unrelate	F		23	
	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax, pay parties, and other liabilities not included on lines				
					25	
	26	Total liabilities. Add lines 17 through 25		2,750.	26	31,993.
	20	Organizations that follow SFAS 117 (ASC 958)	, check here  and	277000	20	01/000
		complete lines 27 through 29, and lines 33 and				
ces	27				27	
alan	28				28	
I Be	29				29	
nnc		Organizations that do not follow SFAS 117 (AS				
ΣE		and complete lines 30 through 34.	-,,			
ts c	30			0.	30	0.
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or eq		0.	31	0.
jt A	32	Retained earnings, endowment, accumulated inc	· · · · · · · · · · · · · · · · · · ·	79,766.	32	105,488.
Ne	33		· · · · · · · · · · · · · · · · · · ·	79,766.	33	105,488.
	34	Total liabilities and net assets/fund balances		82,516.	34	137,481.

Form **990** (2018)

## Part X | Balance Sheet

Form	000	1001	0
FOUL	990	(201	o

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	990 (2018) AMERICANS FOR A CLEAN ENERGY GRID	82-176	5854	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	264		
2	Total expenses (must equal Part IX, column (A), line 25)	2	238		
3	Revenue less expenses. Subtract line 2 from line 1	3			22.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	79	,76	66.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	105	,48	88.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a			. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				77
b	Were the organization's financial statements audited by an independent accountant?		. <b>2</b> b	_	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		. <u>2</u> c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			37
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				(0010)

Form **990** (2018)

SCHEDULE A
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(Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047
2018
Open to Public Inspection

	Image: Attach to Form 990 or Form 990-EZ.         Revenue Service         Go to www.irs.gov/Form990 for instructions and the latest information.				Open to Public Inspection				
Name of	the organizati	on						Employer	identification numbe
				A CLEAN ENERG					2-1765854
Part I	Reason	for Public (	Charity Status 🕡	All organizations must co	mplete th	is part.) Se	e instruction	3.	
The orgar	nization is not a	a private found	ation because it is: (I	For lines 1 through 12, cl	neck only	one box.)			
1				on of churches described			I)(A)(i).		
2	A school des	cribed in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	1990 or 99	90-EZ).)			
3				anization described in se			ii).		
4	•	•		njunction with a hospital			•	)(iii). Enter	the hospital's name,
	city, and stat	-						~ /	. ,
5	-		or the benefit of a col	llege or university owned	or operat	ed by a go	overnmental u	nit describe	ed in
	section 170	(b)(1)(A)(iv). (C	Complete Part II.)	<b>o</b> ,	•	, ,			
6				nental unit described in	section 17	70(b)(1)(A)	(v).		
7				ntial part of its support fr				ne general r	oublic described in
			omplete Part II.)	· · · · · · · · · · · · · · · · · · ·					
8				(1)(A)(vi). (Complete Parl	· II.)				
9				in section 170(b)(1)(A)(		ed in coniu	unction with a	land-grant	college
				ulture (see instructions).					
	university:					·····, -··,	,		
10 X		ion that norma	Ilv receives: (1) more	than 33 1/3% of its supp	ort from o	contributio	ns. members	nip fees, an	d gross receipts from
				ct to certain exceptions,					
				(less section 511 tax) fro					
			mplete Part III.)			bood adqui		Janization	
11			• •	ively to test for public sat	etv See	section 50	9(a)(4)		
12				ively for the benefit of, to				rry out the	purposes of one or
	-	-	-	id in section 509(a)(1) o	-			•	
	. ,		•	f supporting organization					
a	-	-	• •	upervised, or controlled		-		-	aivina
u			-	gularly appoint or elect a	•	-			
		•	complete Part IV, Se		majority c				pporting
b	¬ -		-	or controlled in connect	ion with it	s sunnorte	ed organizatio	n(s) hy hay	vina
			-	anization vested in the sa			-		-
		-	it complete Part IV,					ge the supp	Joned
c	¬ ~		•	g organization operated	n connec	tion with	and functiona	lly integrate	ad with
		-		). You must complete F				iy integrate	a with,
d	¬ ··	•		oorting organization oper				tod organi-	zation(c)
u		-		ation generally must sati				-	
				nplete Part IV, Sections				i all allenin	/eness
•	- ·	•		written determination from					
e 🗌		•		nally integrated supportir			турет, туре	п, туре п	
f Ent	er the number	•		, , , , , , , , , , , , , , , , , , , ,	ig organiz	ation.			
		••	about the supporte	d organization(c)					
	(i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the org	anization listed	(v) Amount o	f monetary	(vi) Amount of other
	organization	ו		(described on lines 1-10	Yes	ing document? No	support (see in	nstructions)	support (see instructions
				above (see instructions))					

#### Schedule A (Form 990 or 990-EZ) 2018 AMERICANS FOR A CLEAN ENERGY GRID Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thi	d, fourth, or fifth ta	ax year as a sectior	n 501(c)(3)	
	organization, check this box and stop	o here					<b>&gt;</b>
Sec	tion C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2018 (I	ine 6, column (f) di	vided by line 11, o	column (f))		14	%
	Public support percentage from 2017					15	%
16a	33 1/3% support test - 2018. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organizatior	۱			
b	33 1/3% support test - 2017. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2018. If the org	anization did not	check a box on lin	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and <b>stop</b>	here. Explain in Pa	rt VI how the orgar	nization
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances test	- 2017. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explain	n in Part VI how the	e
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	nization	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	nd see instructions	s ▶

Schedule A (Form 990 or 990-EZ) 2018

#### Schedule A (Form 990 or 990-EZ) 2018 AMERICANS FOR A CLEAN ENERGY GRID Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")					264,590.	264,590.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5					264,590.	264,590.
7a	Amounts included on lines 1, 2, and						0
ł	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.
	amount on line 13 for the year						0.
	Add lines 7a and 7b						264,590.
8 Se	Public support. (Subtract line 7c from line 6.) ction B. Total Support						204,390.
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6			(0) 2010	(4) 2011	264,590.	264,590.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					46.	46.
ł	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					46.	46.
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)	L	<u> </u>		I	264,636.	
14	First five years. If the Form 990 is fo	-			•		
Se	check this box and stop here						
	Public support percentage for 2018 (		•	column (f))		15	99.98 %
16	Public support percentage from 2017					16	<u> </u>
	ction D. Computation of Invest					1.01	,,,
	Investment income percentage for 20			ne 13, column (f))		17	.02 %
18						18	%
19a	a 33 1/3% support tests - 2018. If the					33 1/3%, and line 17	' is not
	more than 33 1/3%, check this box as <b>33 1/3% support tests - 2017.</b> If the	nd stop here. The	organization quali	fies as a publicly s	upported organiza	ation	► X
-	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

Schedule A (Form 990 or 990-EZ) 2018

### Schedule A (Form 990 or 990-EZ) 2018 AMERICANS FOR A CLEAN ENERGY GRID

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1

2

3a

3b

3c

4a

4b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

# Schedule A (Form 990 or 990-EZ) 2018 AMERICANS FOR A CLEAN ENERGY GRID Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
0	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below</i> .			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)		
2	Activities Test. <b>Answer (a) and (b) below.</b>		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
۴	that these activities constituted substantially all of its activities.	2a		
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	2b		
3	activities but for the organization's involvement. Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>	20		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
5	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2018

	dule A (Form 990 or 990 EZ) 2018 AMERICANS FOR A CLEAN E			82-1765854 Page 6
Pa	Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	-		Part VI.) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting org	anization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions).

# Schedule A (Form 990 or 990-EZ) 2018 AMERICANS FOR A CLEAN ENERGY GRID

Fai	Type III Non-Functionally integrated 509	a)(s) Supporting Orga	inizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive	l de la construcción de la constru	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		1	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
C	From 2015			
d	From 2016			
e	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c. Breakdown of line 7:			
8				
	Excess from 2014 Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
~				

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990-EZ) 2018	AMERICAN	S FOR	A CLEAN	ENERGY	GRID	82-1765854 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1	mation. Provid , 2, 3b, 3c, 4b, 4c lines 2 and 3; Pa	e the explana , 5a, 6, 9a, 9 t IV, Section	ations required b, 9c, 11a, 11t E, lines 1c, 2a	by Part II, line , and 11c; Pa , 2b, 3a, and 3	e 10; Part II, line 17 rt IV, Section B, lin b; Part V, line 1; P	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,

SCHEDULE C Political Campaign and Lobbying Activities					
(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	20 ⁻ Open to F Inspect	Public			
If the organization answ	vered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Cam	paign Activi	ties), then		
<ul> <li>Section 501(c)(3) org</li> </ul>	anizations: Complete Parts I-A and B. Do not complete Part I-C.				
<ul> <li>Section 501(c) (other</li> </ul>	than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Pa	irt I-B.			
<ul> <li>Section 527 organiza</li> </ul>	tions: Complete Part I-A only.				
If the organization answ	vered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Ac	tivities), the	n		
<ul> <li>Section 501(c)(3) org</li> </ul>	anizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do	not complet	e Part II-B.		
<ul> <li>Section 501(c)(3) org</li> </ul>	anizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-E	3. Do not cor	mplete Part II-	A.	
-	vered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Forr	n 990-EZ, P	art V, line 350	c (Proxy	
Tax) (see separate instr	uctions), then				
	, or (6) organizations: Complete Part III.	1			
Name of organization			identification		
	AMERICANS FOR A CLEAN ENERGY GRID ete if the organization is exempt under section 501(c) or is a section 5		<u>2-17658</u>	54	
Part I-A Comple		Zi organi			
1 Drovido o doporintic	n of the organization's direct and indirect political campaign activities in Part IV.				
<ul><li>Provide a description</li><li>Political campaign a</li></ul>		► ¢			
1 0					
3 Volunteer nours for	political campaign activities				
Part I-B Comple	ete if the organization is exempt under section 501(c)(3).				
1 Enter the amount of	any excise tax incurred by the organization under section 4955	▶\$			
2 Enter the amount of	any excise tax incurred by organization managers under section 4955				
3 If the organization in	ncurred a section 4955 tax, did it file Form 4720 for this year?		Yes	No No	
4a Was a correction m	ade?		Yes	No No	
<b>b</b> If "Yes," describe in	Part IV.				
Part I-C Comple	ete if the organization is exempt under section 501(c), except section	501(c)(3).			
1 Enter the amount d	rectly expended by the filing organization for section 527 exempt function activities	► \$			
2 Enter the amount of	the filing organization's funds contributed to other organizations for section 527				
exempt function ac	ivities	► \$			
3 Total exempt functi	on expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,				

	line 17b	▶\$_		
4	Did the filing organization file $\ensuremath{\textit{Form 1120-POL}}$ for this year?		Yes	

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

No

Schedule C (Form 990 or 990-EZ) 2018 A						765854 Page 2
Part II-A Complete if the orga section 501(h)).	Inizatio	n is exen	npt under section	n 501(c)(3) and file	a Form 5768 (ele	ction under
	on belon	ns to an affil	iated group (and list ir	n Part IV each affiliated g	iroup member's name	address FIN
expenses, and share						, addrooo, Ent,
		, .	id "limited control" pro	ovisions apply.		
Limits	on Lobi	oying Exper	•		<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals
<b>1a</b> Total lobbying expenditures to influe	ence pub	ic opinion (	grass roots lobbying)		0.	
<b>b</b> Total lobbying expenditures to influe	ence a leg	islative bod	y (direct lobbying)		0.	
c Total lobbying expenditures (add line					0.	
d Other exempt purpose expenditures						
e Total exempt purpose expenditures	(add line	s 1c and 1d	)		0.	
f Lobbying nontaxable amount. Enter	the amo	unt from the	following table in bot	h columns.	0.	
If the amount on line 1e, column (a) or	(b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of t	he amount on line 1e			
Over \$500,000 but not over \$1,000,	000	\$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50	0,000	\$175,00	0 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	00,000	\$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,0	000.			
g Grassroots nontaxable amount (ente		,			0.	
h Subtract line 1g from line 1a. If zero						
i Subtract line 1f from line 1c. If zero						
j If there is an amount other than zero	•		ý 6		Г	
reporting section 4911 tax for this ye	ear?					Yes No
(Some organizations the		a section 50	raging Period Under D1(h) election do not ate instructions for li	have to complete all of	the five columns be	low.
	Lob	oying Exper	ditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2015	<b>(b)</b> 2016	(c) 2017	<b>(d)</b> 2018	(e) Total
2a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2018

# Schedule C (Form 990 or 990-EZ) 2018 AMERICANS FOR A CLEAN ENERGY GRID 82-17658 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

# (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		·		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5),	or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior year?	3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5),	or sec	tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."	'No," OR (b	) Part	III-A, line	e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
	Total		2c		
3			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A, I	ines 1 ar	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D	)
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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.



Name of the	organization
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AMERICANS FOR A CLEAN ENERGY GRID

Employer identification number 82-1765854

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
	organization answered "Yes" on Form 990, Part IV, li	ne 6.				
		(a) Donor advised funds	<b>(b)</b> Fur	nds 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		ed funds			
	are the organization's property, subject to the organization's	-		Yes No		
6	Did the organization inform all grantees, donors, and donor					
	for charitable purposes and not for the benefit of the donor					
	impermissible private benefit?					
Pa	rt II Conservation Easements. Complete if the o	rganization answered "Yes" on Form 990,	Part IV, line 7			
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).				
	Preservation of land for public use (e.g., recreation or	education) Preservation of a his	torically impo	tant land area		
	Protection of natural habitat	Preservation of a cer	tified historic	structure		
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	of a conserva	tion easement on the last		
	day of the tax year.			Held at the End of the Tax Year		
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
с	Number of conservation easements on a certified historic st	ructure included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structu	ıre			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	organization	during the tax		
	year 🕨					
4	Number of states where property subject to conservation ea	asement is located				
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements	it holds?		Yes No		
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing cons	servation ease	ements during the year		
	▶					
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conserva	tion easemen	ts during the year		
	►\$					
8	Does each conservation easement reported on line 2(d) abo					
	and section 170(h)(4)(B)(ii)?					
9	In Part XIII, describe how the organization reports conservat	•				
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes	the organizat	on's accounting for		
Da	conservation easements.  rt III Organizations Maintaining Collections o	f Art Historical Treasures or Ot	hor Simila	r Assats		
га	Complete if the organization answered "Yes" on Forr			1 A35613.		
-						
Ta	If the organization elected, as permitted under SFAS 116 (A					
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.					
<b>h</b>			and holonoo	about works of out bistorical		
D	<b>b</b> If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts					
	· · · · · · · · · · · · · · · · · · ·	education, or research in furtherance of pu	blic service, p	rovide the following amounts		
	relating to these items:		•	<b>^</b>		
	(i) Revenue included on Form 990, Part VIII, line 1			\$		
0		accurace or other similar accets for financia		\$		
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:					
~			•	¢		
a ⊾	Revenue included on Form 990, Part VIII, line 1			\$		
U				u		

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

Schedule D (Form 990) 2018

Sche	dule D (Form 990) 2018 AMERICA	NS FOR A CI	LEAN	ENERGY	GRID		82-17	6585	4 Pa	age <b>2</b>
Par	t III Organizations Maintaining C	<b>Collections of Ar</b>	t, Histo	rical Trea	asures, or Ot	ner Simil	ar Assets	s (contii	nued)	
3	Using the organization's acquisition, access	ion, and other record	s, check a	any of the fo	llowing that are a	a significan	t use of its o	ollection	items	
	(check all that apply):									
а	Public exhibition	d	1 🗌 L	oan or exch	ange programs					
b	Scholarly research	e	• 🗌 o	ther						
с	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explair	n how the	y further the	e organization's e	xempt purp	oose in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, hist	orical treas	ures, or other sim	ilar assets				_
	to be sold to raise funds rather than to be m							Yes		No
Par	t IV Escrow and Custodial Arran		ete if the o	organizatior	answered "Yes"	on Form 9	90, Part IV,	line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for co	ontributions	or other assets r	ot included	ı _	_		-
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing tal	ble:						
								Amoun	t	
	Beginning balance						:			
	Additions during the year									
е	Distributions during the year									
f	Ending balance							7		1
	Did the organization include an amount on F					• • • •	L	Yes		No
Par	If "Yes," explain the arrangement in Part XIII.									
I ai	t V Endowment Funds. Complete							(-) [		haali
4.		(a) Current year	(D) Pri	ior year	(c) Two years bac		e years dack	(e) Fou	years	DACK
la L	Beginning of year balance									
u o	Contributions									
ט ה	Net investment earnings, gains, and losses									
u	Grants or scholarships Other expenditures for facilities									
e										
f	and programs Administrative expenses									
g 2	Provide the estimated percentage of the cur	rent year end balance	l e (line 1a	column (a))	held as:					
- a	Board designated or quasi-endowment		%	column (a))						
b	Permanent endowment	%								
	Temporarily restricted endowment	%								
Ū	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse		ation that	are held and	d administered fo	r the organ	ization			
	by:								Yes	No
	(i) unrelated organizations							3a(i)		
	<b>Ann 1 1 1 1 1</b>							3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization									
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm	nent.								
	Complete if the organization answere	d "Yes" on Form 990	), Part IV,	line 11a. Se	e Form 990, Parl	: X, line 10.				
	Description of property	<b>(a)</b> Cost or o basis (investr		<b>(b)</b> Cost basis (		) Accumula depreciatio		( <b>d)</b> Boo	k value	Э
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment									
	Other									
Tota	Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X. columr</u>	<u>n (B), line 10</u>	c.)		🕨			0.
							<u> </u>	- /-		

Schedule D (Form 990) 2018

(2)       Closely-held equity interests	(1) Francial derivatives	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(2)       Closely-held equity interests	(2)       Clocky-heid equity interests         (A)	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	r end-of-year market value
(2)       Closely-held equity interests	(2) Closely-heid equity interests	(1) Financial derivatives			
(a)       (b)         (b)       (c)         (c)       (c)         (d)       (c)         (e)       (c)         (f)       (c)         (g)       (	(a)       (b)         (b)       (c)         (c)				
(B)	(9)				
(B)	(9)	(A)			
Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 13.       Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 13.         Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 13.       Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 13.         Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 13.       Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 14.         Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 14.       Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 14.         Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 14.       Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 14.         Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 14.       Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 15.         Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 14.       Image: constraint of a service of the organization answered "Yee" on Form 990, Part X, line 14.         Image: constraint of the organization answered "Yee" on Form 990, Part X, line 14.       Image: constraint of the organization answered "Yee" on Form 990, Part X, line 14.         Image: constraint of the organization answered "Yee" on Form 990, Part X, line 14.       Image: constrai	(0)				
(6)	(f)         (f)           (f)				
(F)       (S)         (G)       (G)         (H)       (G)         (F)       (G)         (G)       (	(f)        (i)          (i)	(D)			
(0)       (1)         (1)       (1)         Part Will       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         (a)       (b) Book value       (c) Method of valuation: Cost or end of year market value         (1)       (b) Book value       (c) Method of valuation: Cost or end of year market value         (1)       (a)       (b) Book value       (c) Method of valuation: Cost or end of year market value         (1)       (a)       (b) Book value       (c) Method of valuation: Cost or end of year market value         (b)       (c) Method of valuation: Cost or end of year market value       (c) Method of valuation: Cost or end of year market value         (1)       (a)       (c) Method of valuation: Cost or end of year market value       (c) Method of valuation: Cost or end of year market value         (1)       (a)       (c) Method of valuation: Cost or end of year market value       (c) Method of valuation: Cost or end of year market value         (1)       (a)       (b) Book value       (c) Method of valuation: Cost or end of year market value         (1)       (a)       (b) Book value       (b) Book value       (c) Book value         (1)       (a)       (b) Book value       (c) Book value       (c) Book value       <	(6)	(E)			
(f)	(H)	(F)			
Total. (c). (b) must equal Form 990. Part X, (c). (B) line 12.) ▶         Part VIII         Investments - Program Related.         Complete if the organization answered "ves" on Form 990. Part IV, line 11c. See Form 990. Part X, line 13.         (a) Description of investment       (b) Book value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (7)       (c) Method of valuation: Cost or end-of-year market value         (7)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (a)       (c) Method of valuation: Cost or end-of-year market value         (a)       (c) Method of valuation: Cost or end-of-year market value         (a)       <	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶         Part VIIII Investments - Program Related.         Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. <ul> <li>(a) Description of investment</li> <li>(b) Book value</li> <li>(c) Method of valuation: Cost or end of year market value</li> </ul> (1)       (b) Book value       (c) Method of valuation: Cost or end of year market value         (1)       (c)       (c)         (a)       (c)       (c)         (a)       (c)       (c)         (b)       (c)       (c)         (c)       (c)       (c)         (d)       (c)       (c)         (e)       (c)       (c)         (f)       (c)       (c)         (g)       (c)       (c)         (h)       (c)       (c)         (g)       (c)       (c)         (h)       (c)       (c)         (g)       (c)       (c)	(G)			
Part VIII       Investments - Program Related.         Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.         (a) Description of investment       (b) Book value       (c) Method of valuation: Cost or end-of year market value         (a) Description of investment       (b) Book value       (c) Method of valuation: Cost or end-of year market value         (a) Description of investment       (b) Book value         (b) Book value       (c) Method of valuation: Cost or end-of year market value         (a) Description       (c) Method of valuation: Cost or end-of year market value         (b) Book value         (c) Method of valuation: Cost or end-of year market value         (b) Book value         (c) Method of valuation: Cost or end-of year market value         (c) Method of valuation: Cost or end-of year market value         (b) Book value         (c) Method of valuation: Cost or end-of year market value         (c) Method of valuation: Cost or end-of year market value         (c) Method of value         (c) Method of value         (c) Method of value         (c) Method year ye	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           (a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of year market value           (1)         (a)         (b) Book value         (c) Method of valuation: Cost or end-of year market value           (a)         (c)         (c)         (c)         (c)           (a)         (c)         (c)         (c)         (c)           (b)         (c)         (c)         (c)         (c)           (c)         (c)         (c)         (c)         (c)           (c)         (c)         (c)         (c)         (c)         (c)           (c)         (c)         (c)         (c)         (c)         (c)         (c)           (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)         (c)	(H)			
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.           (a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (a)         (b)         (c)         (c)         (c)           (a)         (c)         (c)         (c)         (c)         (c)           (a)         (c)         (c) <t< td=""><td>Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.           (a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (f)         (g)         (g)         (g)         (g)           (a)         (g)         (g)         (g)         (g)           (g)         (g)         (g)         (g)         (g)           (g)         (g)         (g)         (g)         (g)         (g)           (g)         (g)         (g)         (g)         (g)         (g)           (g)         (g)         (g)         (g)         (g)         (g)         (g)           Total. (Col. (b) must equal form 990, Part X, col. (B) line 13.)         (g)         (g)</td><td>Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)</td><td></td><td></td><td></td></t<>	Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.           (a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (f)         (g)         (g)         (g)         (g)           (a)         (g)         (g)         (g)         (g)           (g)         (g)         (g)         (g)         (g)           (g)         (g)         (g)         (g)         (g)         (g)           (g)         (g)         (g)         (g)         (g)         (g)           (g)         (g)         (g)         (g)         (g)         (g)         (g)           Total. (Col. (b) must equal form 990, Part X, col. (B) line 13.)         (g)	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
(a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (1)	(a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (1)         (a)         (b)         (c)         (	Part VIII Investments - Program Related.			
(1)       1       1       1         (2)       1       1       1         (3)       1       1       1         (4)       1       1       1         (5)       1       1       1         (6)       1       1       1         (7)       1       1       1         (8)       1       1       1         (9)       1       1       1         (10)       1       1       1         (2)       1       1       1         (3)       1       1       1         (4)       1       1       1         (2)       1       1       1         (3)       1       1       1         (4)       1       1       1         (5)       1       1       1         (6)       1       1       1         (7)       1       1       1       1         (8)       1       1       1       1         (9)       1       1       1       1         (1)       Federal income taxes       1       1       1 <td>(1)       (1)       (1)         (2)       (1)       (1)         (3)       (1)       (1)         (4)       (1)       (1)         (6)       (1)       (1)         (7)       (1)       (1)         (8)       (1)       (1)         (9)       (1)       (2)         (1)       (2)       (2)         (2)       (3)       (4)         (1)       (2)       (2)         (3)       (4)       (5)         (6)       (2)       (3)         (6)       (2)       (3)         (7)       (2)       (3)         (8)       (9)       (1)         (9)       (1)       (2)         (9)       (1)       (2)         (1)       (2)       (3)         (6)       (1)       (1)         (9)       (1)       (2)         (1)       (2)       (3)         (3)       (4)       (4)         (6)       (5)       (6)         (6)       (6)       (6)         (6)       (6)       (6)         (6)       (6)</td> <td>Complete if the organization answered "Yes"</td> <td>on Form 990, Part IV, line</td> <td>11c. See Form 990, Part X, line 13.</td> <td></td>	(1)       (1)       (1)         (2)       (1)       (1)         (3)       (1)       (1)         (4)       (1)       (1)         (6)       (1)       (1)         (7)       (1)       (1)         (8)       (1)       (1)         (9)       (1)       (2)         (1)       (2)       (2)         (2)       (3)       (4)         (1)       (2)       (2)         (3)       (4)       (5)         (6)       (2)       (3)         (6)       (2)       (3)         (7)       (2)       (3)         (8)       (9)       (1)         (9)       (1)       (2)         (9)       (1)       (2)         (1)       (2)       (3)         (6)       (1)       (1)         (9)       (1)       (2)         (1)       (2)       (3)         (3)       (4)       (4)         (6)       (5)       (6)         (6)       (6)       (6)         (6)       (6)       (6)         (6)       (6)	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(2)	(2)       (3)         (3)       (4)         (6)       (5)         (7)       (7)         (8)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (1)       (7)         (2)       (9)         (3)       (9)         (4)       (9)         (6)       (7)         (8)       (9)         Y Other Liabilities.       (9)         Complete if the organization answered "Yes" on Form 990, Part IV, line 116 or 111. See Form 990, Part X, line 25.         1       (9)         Total. (Column (b) must equal Form 990. Part X col. (B) line 15.)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 116 or 111. See Form 990, Part X, line 25.         1       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2)       (3)         (4)       (4)	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	r end-of-year market value
(3)	(3)       (4)         (4)       (5)         (5)       (6)         (7)       (7)         (8)       (7)         (9)       (9)         (10)       (10)         (2)       (11)         (2)       (2)         (3)       (11)         (6)       (12)         (6)       (13)         (6)       (14)         (7)       (15)         (6)       (16)         (10)       (17)         (2)       (18)         (3)       (19)         (6)       (10)         (7)       (10)         (9)       (10)         (11)       (11)         (12)       (11)         (13)       (11)         (14)       (11)         (15)       (11)         (16)       (11)         (17)       (11)         (18)       (11)         (19)       (11)         (10)       (11)         (11)       (11)         (12)       (12)         (13)       (13)         (14)       (14)	(1)			
(4)	(4)       (5)         (6)       (7)         (7)       (7)         (8)       (8)         (9)       (9)         Total. (Col. (b) must aqual Form 990, Part X, col. (B) line 13.) ►       (9)         Part X       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a)       (a) Description         (b)       Book value         (1)       (a)         (a)       (b)         (b)       Book value         (c)       (a)         (b)       (b)         (c)       (c)         (d)       (c)         (e)       (c)         (f)       Federal income taxes         (c)       (c)         (c)       (c) <t< td=""><td></td><td></td><td></td><td></td></t<>				
(9)	(6)	(3)			
(6)	(6)       (7)         (8)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶       (a) Description         (a) Description       (b) Book value         (1)       (a) Description         (2)       (b) Book value         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (a) Description       (b) Book value         (7)       (c)         (a)       (c)         (b)       (c)         (c)       (c)         (d)       (c)         (e)       (c)         (f)       Form 990, Part X, col. (B) line 15.         (g)       (c)         (h)       (c)         (c)	(4)			
(7)	(7)       (8)         (9)       (1)         (1)       (2)         (2)       (2)         (3)       (2)         (6)       (3)         (7)       (2)         (8)       (2)         (9)       (2)         (1)       (2)         (2)       (3)         (4)       (4)         (6)       (7)         (8)       (9)         (9)       (2)         (1)       (2)         (3)       (4)         (4)       (5)         (6)       (7)         (7)       (2)         (8)       (9)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2)       (3)         (3)       (4)         (4)       (5)         (6)       (6)         (7)       (7)         (6)       (9)         (7)	(5)			
(8)       Image: constraint of the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description         (a) Description       (b) Book value         (1)       Image: constraint of the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description       (b) Book value         (1)       Image: constraint of the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (2)       Image: constraint of the organization answered "Yes" on Form 990, Part X and the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1       (a) Description of liability       (b) Book value         (1) Federal income taxes       Image: constraint of the organization on swered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1       (a) Description of liability       (b) Book value         (1) Federal income taxes       Image: constraint of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (2) (3) (4) (1) Federal income taxes       Image: constraint of the organization of liability         (6) (7) (1) (1) Federal income taxes       Image: constraint of the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (6) (7) (10) (10) (10) (10) (10) (10) (10) (10	(8)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶       ▶         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (a) Description       (b) Book value         (2)       (b) Book value       (c)         (3)       (c)       (c)       (c)         (6)       (c)       (c)       (c)         (6)       (c)       (c)       (c)         (7)       (c)       (c)       (c)         (8)       (c)       (c)       (c)         (9)       (c) Description of liability       (b) Book value       (c)         (1)       Federal income taxes       (c)       (c)       (c)         (a)       (b)       Book value       (c)       (c)         (a)       (c)       (c)       (c)       (c)       (c)         (a)       (c)       (c)       (c)       (c)       (c)         (a)       (c)       (c)       (c)       (c)       (c)         (7)       (c)       (c)       (c)       (c)       (c)       (c)         (a	(6)			
(9)       Image: Second	(9)         Total. (col. (b) must equal Form 990, Part X, col. (B) line 13.) ►         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description       (b) Book value         (1)       (a) Description         (2)       (b) Book value         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1       (a) Description of liability       (b) Book value         (1)       (b) Book value         (1)       (c) Chren Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2)       (c)         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       <	(7)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)       (b) Book value         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (a) Description       (b) Book value         (2)       (b) Book value       (c)         (3)       (c)       (c)       (c)         (6)       (c)       (c)       (c)       (c)         (7)       (c)       (c)       (c)       (c)         (6)       (c)       (c)       (c)       (c)         (7)       (c)       (c)       (c)       (c)         (7)       (c)       (c)       (c)       (c)       (c)         (7)       (c)       (c)       (c)       (c)       (c)       (c)         (9)       (c)       (c)       (c)       (c)       (c)       (c)       (c)         (a) Description of liability       (b) Book value       (c) Book value       (c)       (c)       (c)       (c)         (a)       (c)	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description         (a) Description         (b) Book value         (1)         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X         Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1       (a) Description of liability         (b) Book value         (1)       Federal income taxes         (2)       (b) Book value         (1)       Federal income taxes         (2)       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2)       (3)         (4)       (b) Book value         (7)       (6)         (8)       (9)	(8)			
Part IX         Other Assets.           Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (b) Book value           (1)         (b) Book value         (c)           (2)         (c)         (c)           (3)         (c)         (c)           (4)         (c)         (c)           (6)         (c)         (c)           (7)         (c)         (c)           (8)         (c)         (c)           (9)         (c)         (c)           Part X         Other Liabilities.         (c)           Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (c)           1         (a) Description of liability         (b) Book value           (1)         (c) Description of liability         (c) Book value           (1)         Federal income taxes         (c)           (2)         (c)         (c)           (3)         (c)         (c)           (6)         (c)         (c)           (7)         (c)         (c)           (6)         (c)         (c)           (6)         (c)         (c)           (6)	Part IX         Other Assets.           Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (b) Book value           (1)         (a) Description         (b) Book value           (2)         (3)         (4)         (5)           (6)         (7)         (8)         (7)           (8)         (9)         (1)         (1)           Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         (b) Book value         (c)           (1)         (a) Description of liability         (b) Book value         (c)           (1)         (a) Description of liability         (b) Book value         (c)           (1)         (a) Description of liability         (b) Book value         (c)           (1)         Federal income taxes         (c)         (c)           (2)         (3)         (4)         (c)           (3)         (4)         (c)         (c)           (6)         (c)         (c)         (c)           (6)         (c)         (c)         (c)           (6)         (c)         (c)         (c)           (7)         (c)         (c)         (c)           (6)         (c)         (c) <td>(9)</td> <td></td> <td></td> <td></td>	(9)			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (b) Book value           (1)         (b) Book value         (c)	Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.           (a) Description         (b) Book value           (1)         (a)           (2)         (b)           (3)         (c)           (4)         (c)           (6)         (c)           (7)         (c)           (8)         (c)           (9)         (c)           Total. (Column (b) must equal Form 990, Part X col. (B) line 15.)         (c)           Part X         Other Liabilities.           Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (a) Description of liability           (1)         Federal income taxes         (c)           (2)         (d)         (d)           (3)         (d)         (d)           (4)         (c)         (c)           (6)         (c)         (c)           (7)         (c)         (c)           (6)         (c)         (c)           (6)         (c)         (c)           (6)         (c)         (c)           (6)         (c)         (c)           (7)         (c)         (c)	Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
(a) Description       (b) Book value         (1)       (2)         (2)       (3)         (3)       (4)         (5)       (6)         (6)       (7)         (8)       (1)         (9)       (1)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (1)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1)       Federal income taxes         (2)       (3)         (3)       (2)         (3)       (3)         (4)       (2)         (5)       (3)         (6)       (3)         (7)       (3)         (6)       (3)         (6)       (4)         (7)       (3)         (6)       (4)         (7)       (4)         (6)       (5)         (6)       (6)         (7)       (7)         (8)       (7)	(a) Description       (b) Book value         (1)       (a)         (2)       (b)         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ►         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b)         (1)       Federal income taxes         (2)       (c)         (3)       (c)         (4)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)	Part IX Other Assets.			
(1)	(1)       (2)         (3)       (4)         (5)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (6)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes       (b) Book value         (2)       (3)         (4)       (5)         (6)       (7)         (8)       (9)			11d. See Form 990, Part X, line 15.	
(2)       (3)         (4)       (5)         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       >         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2)       (b) Book value         (3)       (4)         (5)       (5)         (6)       (6)         (7)       (7)         (8)       (7)	(2)       (3)         (4)       (5)         (6)       (7)         (8)       (9)         Total. Column (b) must equal Form 990. Part X. col. (B) line 15.)       (9)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2)       (a)         (b)       (b) Book value         (c)       (c)         (d)       (c)         (e)       (c)         (f)       (c)         (g)       (c)	(a)	Description		(b) Book value
(3)       (4)         (5)       (5)         (6)       (7)         (8)       (7)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value         (1) Federal income taxes         (2)         (3)         (4)         (5)         (6)         (7)         (8)	(3)       (4)         (5)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ►         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1)       Federal income taxes         (2)       (3)         (4)       (5)         (6)       (7)         (8)       (9)         (9)       (1)	(1)			
(4)       (5)         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2)       (3)         (4)       (5)         (6)       (1)         (7)       (2)         (8)       (1)	(4)       (5)         (6)       (7)         (8)       (7)         (9)       (7)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (8)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1)       Federal income taxes         (2)       (3)         (4)       (4)         (5)       (6)         (7)       (6)         (8)       (9)         (9)       (9)	(2)			
(5)	(5)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ►         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value         (1) Federal income taxes         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)	(3)			
(6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value         (1)       Federal income taxes         (2)       (b)         (3)       (b)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)	(6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (B)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1)       Federal income taxes         (2)       (3)         (4)       (5)         (6)       (7)         (7)       (8)         (9)       (9)	(4)			
(7)	(7)       (8)         (9)       Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value         (1)       Federal income taxes         (2)       (b)         (3)       (a)         (4)       (b)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)	(5)			
(8)	(8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (1)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value         (1) Federal income taxes         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)	(6)			
(9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X         Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1)       Federal income taxes         (2)       (a)         (3)       (b) Book value         (4)       (b)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)	(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (6) (7) (8) (9) (9) (1) Context (1) Conte				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability       (b) Book value         (1)       Federal income taxes	Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X         Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1. (a) Description of liability         (b) Book value         (1)       Federal income taxes         (2)       (a)         (3)       (b)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)				
Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability       (b) Book value         (1)       Federal income taxes       (a)         (2)       (b)       (c)         (3)       (c)       (c)         (4)       (c)       (c)         (5)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (8)       (c)       (c)	Part X         Other Liabilities.           Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.           1.         (a) Description of liability           (1)         Federal income taxes           (2)         (a)           (3)         (b) Book value           (4)         (c)           (6)         (c)           (7)         (c)           (8)         (c)           (9)         (c)				
1.     (a) Description of liability     (b) Book value       (1) Federal income taxes	1.       (a) Description of liability       (b) Book value         (1) Federal income taxes	Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		
(1) Federal income taxes       (2)       (3)       (4)       (5)       (6)       (7)       (8)	(1) Federal income taxes         (2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)				e 25.
(2)       (3)         (3)       (4)         (5)       (5)         (6)       (7)         (8)       (6)	(2)         (3)         (4)         (5)         (6)         (7)         (8)         (9)	1.(a) Description of liability		(b) Book value	
(3)	(3)       (4)       (5)       (6)       (7)       (8)       (9)	(1) Federal income taxes			
(4)     (4)       (5)     (6)       (7)     (7)       (8)     (7)	(4)       (5)       (6)       (7)       (8)       (9)	(2)			
(5)     (6)       (7)     (8)	(5)         (6)         (7)         (8)         (9)	(3)			
(6)       (7)       (8)	(6)       (7)       (8)       (9)	(4)			
(7) (8)	(7)       (8)       (9)	(5)			
(8)	(8) (9)	(6)			
	(9)	(7)			
		(8)			
(9)	Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)	(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.) 🕨		

AMERICANS FOR A CLEAN ENERGY GRID

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

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Schedule D (Form 990) 2018

Part VII Investments - Other Securities.

Sche	dule D (Form 990) 2018 AMERICANS FOR A CLEAN E	NERGY GRID	82-1765854 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stat	ements With Revenue	per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	-	es per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, lin		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line <b>2e</b> from line <b>1</b>		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	4b	
С	Add lines <b>4a</b> and <b>4b</b>		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	<u>3.</u> )	
Pa	rt 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.

### FORM 990, PART IV, LINE 11D

#### OTHER ASSETS. ACEG'S CASH ASSETS ARE KEPT IN AN INTEREST-BEARING CHECKING

ACCOUNT

Schedule D (Form 990) 2018

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service Name of the organization 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 990-EZ. Go to www.irs.gov/Form990 for the latest information. Employer identification number

OMB No. 1545-0047

AMERICANS FOR A CLEAN ENERGY GRID

82-1765854

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FAVORING THE EXPANSION, MODERNIZATION, AND INTEGRATION OF THE

HIGH-VOLTAGE ELECTRIC TRANSMISSION GRID IN ORDER TO ACHIEVE A CLEAN

ENERGY ECONOMYONE THAT ATTAINS THE SCIENTIFICALLY-VALIDATED GLOBAL

OBJECTIVE OF REDUCING GREENHOUSE GAS EMISSIONS BY 80%.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SCIENTIFICALLY-VALIDATED GLOBAL OBJECTIVE OF REDUCING GREENHOUSE GAS

EMISSIONS BY 80%.

FORM 990, PART VI, SECTION A, LINE 3:

DGA PROVIDES MANAGEMENT SERVICES TO ACEG

FORM 990, PART VI, SECTION A, LINE 8B:

ACEG'S COMMITTEES ALSO WORKED TO AGENDAS AND KEPT MINUTES, BUT NONE HAD THE AUTHORITY TO ACT ON BEHALF OF THE BOARD OF DIRECTORS.

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

INFORMATION IS SENT TO THE EXECUTIVE DIRECTOR FOR HIS REVIEW PRIOR TO

SUBMISSION

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

MONITORING AND ENFORCEMENT OF COMPLIANCE POLICY WAS ACHIEVED THROUGH

OVERSIGHT OF DIRECTORS ACTIVITIES AS OBSERVED AND COMMUNICATED DURING THE

COURSE OF ORGANIZATION BUSINESS.

Schedule O (Form 990 or 990-EZ) (2018)	Page <b>2</b>			
Name of the organization AMERICANS FOR A CLEAN ENERGY GRID	Employer identification number $82 - 1765854$			
FORM 990, PART VI, SECTION C, LINE 18:				
AS OF 2019, GOING FORWARD, ACEG IS POSTING ALL OF THE BOAR	D AND			
DIRECTOR-APPROVED GOVERNING DOCUMENTS ON THE ACEG WEBSITE				
FORM 990, PART VI, SECTION C, LINE 19:				
ALL DISCLOSURES WERE MADE AVAILABLE BY WAY OF ACEG'S 990 F	ILING WHICH IS			
PUBLICLY AVAILABLE VIA GUIDESTAR. GOVERNING DOCUMENTS, CO	NFLICT OF			
INTEREST POLICY AND FINANCIAL STATEMENTS WILL BE MADE UPON	REQUEST.			
FORM 990, PART IX, LINE 11G, OTHER FEES:				
VCE:				
PROGRAM SERVICE EXPENSES	25,000.			
MANAGEMENT AND GENERAL EXPENSES	0.			
FUNDRAISING EXPENSES	0.			
TOTAL EXPENSES	25,000.			
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	25,000.			