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Form <b>390</b>
Department of the Treasury

# 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. Co to your ire gov/Form000 for instructions and the latest information



		Go to www.irs.gov/Porm990 for instructions and	Contract and Contract of Contract	intornation.		
<u>A I</u>	For th		ending			
	Check if	C Name of organization		D Employer ide	entific	cation number
ĵ.		AMERICAN COUNCIL FOR AN ENERGY-	ž.			
	Addre	EFFICIENT ECONOMY				
	Name	Doing business as		9	4-27	711707
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nu	mber	r
	Final return	529 14TH STREET, NW	600	202	2-50	7-4007
	termii ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$		11,827,772.
	Amen			H(a) Is this a gro	up re	eturn
	Appli tion	<sup>a-</sup> F Name and address of principal officer: STEVEN M. NADEL		for subordir	nates	? Yes X No
	pendi	SAME AS C ABOVE		H(b) Are all subordin		
1	Tax-ex	empt status: X 501(c)(3) 501(c) ( ) ( (insert no.) 4947(a)(1) c	or 527	If "No," atta	ch a	list. (see instructions)
		te: WWW.ACEEE.ORG		H(c) Group exen	notio	n number 🕨
		organization: X Corporation Trust Association Other	I Year			VI State of legal domicile: CA
	artI	Summary	a rour			
	1	Briefly describe the organization's mission or most significant activities: THE OBJ	JECTIVES	OF THE COUNCI	L	
S	'	ARE TO GATHER, EVALUATE, AND DISSEMINATE INFORMATION TO STIM	ULATE			
an				than 25% of its ne	t acc	sats
ern	2				3	20
Activities & Governance	3				4	20
8	4	Number of independent voting members of the governing body (Part VI, line 1b)			5	66
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)				25
ivit	6	Total number of volunteers (estimate if necessary)			6	0.
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	
_	b	Net unrelated business taxable income from Form 990-T, line 38			7b	37,298.
				Prior Year	10	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		4,694,4		7,627,432.
nue	9	Program service revenue (Part VIII, line 2g)		3,171,2		3,875,618.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		272,6		242,683.
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,7		18,043.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,144,1	06.	11,763,776.
	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)		. 1	0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,956,9	65.	6,089,568.
Ise	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.
Expenses	b.	Total fundraising expenses (Part IX, column (D), line 25)			17.5	
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,443,1	07.	3,338,147.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,400,0	72.	9,427,715.
		Revenue less expenses. Subtract line 18 from line 12		-1,255,9	66.	2,336,061.
Dr.			Be	ginning of Current Y	'ear	End of Year
Net Assets or	20	Total assets (Part X, line 16)		8,944,2		10,790,046.
ASS	21	Total liabilities (Part X, line 26)		847,0	56.	774,531.
let /	22	Net assets or fund balances. Subtract line 21 from line 20		8,097,2		10,015,515.
	art II	Signature Block			1000 m 24	
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	s and stateme	nts, and to the best	of mv	v knowledge and belief, it is
		it, and complete. Declaration of preparer (other than officer) is based on all information of wh				,
uue	, corre	A, and complete. Decial august of prepared rights man officer) is based on an information of with	non propuror	<u> </u>	110	1
<u>.</u>		Signature of officer		Date	H	)
Sig				,		
Her	re	STEVEN M. NADEL, EXECUTIVE DIRECTOR Type or print name and title				
						DTIN

	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN	
Paid	SARA SMITH	Sava Smith	8/19/20	19 self-employed	P01332734	
Preparer	Firm's name 🕨 TATE & TRYON			Firm's EIN 🕨	52-1855942	
Use Only	Firm's address 2021 L ST NW					
	WASHINGTON, DC 20036			Phone no. (202)	293-2200	
May the If	RS discuss this return with the preparer shown abo	ve? (see instructions)			X Yes	No
832001 12-3					Form <b>990</b>	(2018)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	AMERICAN COUNCIL FOR AN ENERGY-		
	990 (2018) EFFICIENT ECONOMY	94-2711707	Page <b>2</b>
Par	t III Statement of Program Service Accomplishments		
1	Check if Schedule O contains a response or note to any line in this Part III		<u></u>
•	THE OBJECTIVES OF THE COUNCIL ARE TO GATHER, EVALUATE, AND DISSEMINATE		
	INFORMATION TO STIMULATE GREATER EFFICIENCY OF ENERGY USE. THE COUNCIL		
	PRODUCES PUBLICATIONS ON ENERGY EFFICIENCY FROM RESEARCH PERFORMED,		
	AND ORGANIZES CONFERENCES FOR PROFESSIONALS IN THIS FIELD.		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?		Yes 🗴 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes X No
4	If "Yes," describe these changes on Schedule O.	accured by exper	
4	Describe the organization's program service accomplishments for each of its three largest program services, as m Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others		
4.0	revenue, if any, for each program service reported. (Code: ) (Expenses \$ 5,947,663. including grants of \$ ) (Revenue	e\$1	689 002 \
4a	(Code:) (Expenses \$, 003. including grants of \$) (Revenue RESEARCH PROGRAMS - TO IMPROVE ENERGY EFFICIENCY THROUGH LOWERING	±	.,009,002.)
	ENERGY COSTS, IMPROVING ECONOMIC PRODUCTIVITY, AND DECREASING		
	ENVIRONMENTAL POLLUTION.		
4b	(Code: ) (Expenses \$ 1,729,935. including grants of \$ ) (Revenue	e\$2	2,186,616,)
10	CONFERENCES - DISSEMINATE INFORMATION TO STIMULATE THE EFFICIENCY OF	· •	<u>, , ,</u> ,
	ENERGY USE IN THE ECONOMY.		
4c	(Code: ) (Expenses \$ 26,318. including grants of \$ ) (Revenue	÷\$	)
	LOBBYING - LOBBY CONGRESS ON BEHALF OF APPLIANCE ENERGY EFFICIENCY		
	STANDARDS, FEDERAL APPROPRIATIONS FOR ENERGY EFFICIENCY RESEARCH AND		
	DEVELOPMENT, AND FEDERAL PROGRAMS TO PROMOTE ENERGY EFFICIENCY.		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses 7,703,916.		000
		Fo	orm <b>990</b> (2018)
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	<u>990 (2018)</u> EFFICIENT ECONOMY 94-27117	07	Р	age 3
	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			<u> </u>
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u> </u>
•	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		<u> </u>
Ŭ		8		x
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			<u> </u>
5	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		x
10	<i>If</i> "Yes," <i>complete Schedule D, Part IV</i> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			<u> </u>
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V			
••	as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a		11a	х	
h	Part VI			<u> </u>
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			<u> </u>
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	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			<u> </u>
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	<u> </u>
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			<u> </u>
•	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	<u> </u>		<u> </u>
120		12a	х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?			<u> </u>
	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
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			$\square$
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	1.12		<u> </u>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			<u> </u>
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		<u> </u>
.0	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes."			<u> </u>
.5	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		<u> </u>
	domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		x
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Pa	T IV Checklist of Required Schedules (continued)		1	
~~			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			x
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
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		x	
04 -	Schedule J	23		
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	040		x
h	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
لم	any tax-exempt bonds?	24c 24d		<u> </u>
		240		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	050		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	054		x
06	Schedule L, Part I	25b		<u> </u>
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? <i>If</i> "Yes,"			x
07	complete Schedule L, Part II	26		
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	07		x
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		
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):	280		x
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		x
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C		28c		x
20	director, trustee, or direct or indirect owner? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		x
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30		30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31	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	- 51		
52		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
00	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			
<b>U</b> T	Part V, line 1	34		x
352	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	1	x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
5	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			<u> </u>
	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		1	<u> </u>
5,	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	x	1
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance		<u> </u>	L
	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 3	2		
		0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
5	(gambling) winnings to prize winners?	1c	x	
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 66			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b	X	
	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	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other at	ithority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)?	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 Act	counts (FBAR).			
5a			<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact		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			
	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 contributio	ns or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		_		v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv		7a		X
			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		_		
	to file Form 8282?		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d			x
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con		7e		x
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contractive the organization reactive did the organization file.		7f	N/A	
g k	If the organization received a contribution of qualified intellectual property, did the organization file For		7g 7h	N/A	<u> </u>
h o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations maintaining dense advised funds. Did a dense advised fund maintained funds			14/23	
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained l sponsoring organization have excess business holdings at any time during the year?	N / λ	8		
9	sponsoring organization have excess business holdings at any time during the year?		0		
a	Did the sponsoring organization make any taxable distributions under section 4966?	N/A	9a		
b		N/A	9b		
10	Section 501(c)(7) organizations. Enter:		50		
		10a			
b		10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholdersN/A	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1		
-	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	•	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	N/A	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c	1		
14a		· · · · · · · · · · · · · · · · · · ·	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunera				
	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	ncome?	16		x
	If "Yes," complete Form 4720, Schedule O.				
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Form	990 (2018) EFFICIENT ECONOMY		94-271170		P	age <b>6</b>
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough	7b below, and for a '	'No" re	espons	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.					
	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
19	Enter the number of voting members of the governing body at the end of the tax year	1a	20		103	
ia	If there are material differences in voting rights among members of the governing body, or if the governing	14				
L.	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	46	20			
	Enter the number of voting members included in line 1a, above, who are independent	1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		-	-		
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the		-			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 99			4		x
5	Did the organization become aware during the year of a significant diversion of the organization's ass			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 ap	point d	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, st					
	persons other than the governing body?			7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea					
а	The governing body?	-	-	8a	х	
b	Each committee with authority to act on behalf of the governing body?			8b	х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	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 Re-					
		lonuo	0000./		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
-	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	befor	e filing the form?	11a	х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		s mig the return	110		
				12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? $If "\gamma$			120		<u> </u>
U		,		12c	х	
40	in Schedule O how this was done				x	
13	Did the organization have a written whistleblower policy?			13 14	x	<u> </u>
14	Did the organization have a written document retention and destruction policy?			14		
15	Did the process for determining compensation of the following persons include a review and approval	by inc	lependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				v	
	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 arrangem	nent wi	th a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	-	-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	'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 CA					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	d 990-	Г (Section 501(с)(3)s	only) a	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain	in Scł	edule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con		,	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 boo	ks and	records			
	THE ORGANIZATION - 202-507-4000		·			
_	529 14TH STREET, NW NO. 600, WASHINGTON, DC 20045					
832006	12-31-18			Form	990	(2018)
	6					,

## $12200909 \ 790809 \ 94-2711707$

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Form 990 (20 <sup>-</sup>	8) EFFICIENT ECONOMY	94-2711707	Page 7
Part VII C	ompensation of Officers, Directors, Trustees, Key Employees, Highest C	Compensated	
E	mployees, and Independent Contractors		
C	heck 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 endin	g with or within the organization's ta	ax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (Ď), (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."

AMERICAN COUNCIL FOR AN ENERGY-

• 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)			(	C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos	itior	<b>)</b> than o		Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	nd a d T	lirecto	or/trus T	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or dir	ee e			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		96	bens		(W-2/1099-MISC)		organization and related
	below	ual tr	tional		vold	t con	_			organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
PENELOPE MCLEAN-CONNER	2.00	_			-	1				
CHAIRMAN		х		x				0.	0.	0.
SCOTT BERNSTEIN	2.00									
PRESIDENT		х		х				0.	0.	0.
ALISON SILVERSTEIN	2.00									
SECRETARY		х		х				0.	0.	0.
TIMOTHY STOUT	2.00									
TREASURER		Х		х				0.	0.	0.
JANICE BERMAN	2.00									
DIRECTOR		Х						0.	0.	0.
CARL BLUMSTEIN	2.00									
DIRECTOR		Х						0.	0.	0.
DENISE FAIRCHILD	2.00									
DIRECTOR		Х						0.	0.	0.
MANDY MAHONEY	2.00									
DIRECTOR		Х						0.	0.	0.
MONICA MARTINEZ	2.00									
DIRECTOR		Х						0.	0.	0.
STEVE MORGAN	2.00									
DIRECTOR		Х						0.	0.	0.
FRANCIS MURRAY, JR.	2.00									
DIRECTOR		х						0.	0.	0.
CLAY NESLER	2.00									
DIRECTOR		Х						0.	0.	0.
DAVID PAREKH	2.00									
DIRECTOR		Х						0.	0.	0.
DAN REICHER	2.00									
DIRECTOR		Х						0.	0.	0.
GENE RODRIGUES	2.00									
DIRECTOR		Х					L	0.	0.	0.
MITCHELL SIMPSON, JR.	2.00									
DIRECTOR		х					L	0.	0.	0.
SUSAN STRATTON	2.00									
DIRECTOR		Х						0.	0.	0.
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#### 12200909 790809 94-2711707

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AMERICAN COUNCIL FOR AN ENERGY
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Form 990 (2018) EFFICIENT ECO	NOMY		шко	-					94-271	1707		P	age <b>8</b>
Part VII Section A. Officers, Directors, Trust	ees, Key Em	oloy	ees,	anc	l Hig	ghes	st C	ompensated Employee	s (continued)				
(A) Name and title	<b>(B)</b> Average hours per	(do		(C Pos heck	<b>C)</b> ition <sup>more</sup>	) than o	one	(D) Reportable compensation	(E) Reportable compensation			<b>(F)</b> timate	
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	;)	com fr orga and	other pensa om th anizat d relat inizati	e ion ed
JUD VIRDEN	2.00												
DIRECTOR		х						0.		0.			0.
KATHRIN WINKLER	2.00												•
DIRECTOR	2 00	X						0.		0.			0.
PAUL YOUNG DIRECTOR	2.00	x						0.		0.			0
STEVE NADEL	40.00	^						0.		••			0.
EXECUTIVE DIRECTOR	40.00	1		x				238,793.		٥.		14	873.
NAOMI BAUM	40.00											,	
CHIEF OPERATING OFFICER		1		x				201,026.		0.		12,	785.
NEAL ELLIOTT	40.00												
SENIOR DIRECTOR, RESEARCH					х			153,547.		Ο.		9,	170.
THOMAS COX	40.00												
FINANCE DIRECTOR						x		143,527.		٥.		7,	385.
ANDREW DELASKI	40.00												
EXEC DIR, APPLIANCE STANDARDS AWAREN						X		142,468.		0.		8,	353.
WENDY KOCH	40.00							140.007				c	000
SENIOR DIRECTOR, MARKETING & COMM						X		140,097. 1,019,458.		0.			898. 464.
1b Sub-total c Total from continuation sheets to Part VII								268,262.		0.			624.
d Total (add lines 1b and 1c)								1,287,720.		0.			
2 Total number of individuals (including but no							o re		000 of reportable			/	
compensation from the organization		000	noco	u un		,	0.0	soonoa more anan ¢ree,					17
												Yes	No
3 Did the organization list any <b>former</b> officer,	director, or tru	ustee	e, ke	y en	nplo	yee,	or	highest compensated en	nployee on				
line 1a? If "Yes," complete Schedule J for su	ıch individual									L	3		Х
4 For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from the	ne organization				
and related organizations greater than \$150											4	X	
5 Did any person listed on line 1a receive or a								0					
rendered to the organization? <i>If "Yes." com</i>	plete Schedule	e J f	or sı	ich i	oers	on .					5		Х
Section B. Independent Contractors								· · · · · · · · · · · · · · · · · · ·	100.000 - (				
1 Complete this table for your five highest con the organization. Report componential for t	-									nsati	on tro	om	
the organization. Report compensation for t	ne calendar ye	ear e		ig w				(B)			(C	•	
Name and business	address							Description of s	ervices	Сс		' <b>'</b> nsatio	n
ALLIANCE FOR AN ENERGY EFFICIENT ECON	IOMY												
SN-161A, GULMOHAR ENCLAVE, NEW DELHI,	INDIA							RESEARCH				201,	802.
BAV SERVICES, INC.													
10 SONWIL DRIVE, BUFFALO, NY 14225								EVENT PLANNING				102,	740.
							I		1				

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

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2018)

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Form 990 EFFICIENT EC	ONOMY								94-27117	07			
Part VII Section A. Officers, Directors, Tru	ustees, Key En	nplo	yee	s, a	nd H	ligh	est (	Compensated Employe	es (continued)				
(A) Name and title	(B) Average hours	(cl	heck	Pos	<b>C)</b> ition that		ly)	<b>(D)</b> Reportable compensation from	eportable Reportable npensation compensation				
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former	the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations			
HERESE LANGER	40.00					x		126 220	0	0 210			
TRANSPORTATION PROGRAM DIRECTOR	40.00					^		136,230.	0.	9,219			
SENIOR FELLOW	40.00					x		132,032.	0.	8,405			
		-											
		·											
		-											
		-											
	1	<u> </u>	I	1	<u> </u>	1		268,262.		17,62			

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rm 99		<u></u>	NT ECONOMY				94-271170	7 Page
Part V	/111	Statement of Reven	nue					
		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII (A) Total revenue	<b>(B)</b> Related or exempt function	<b>(C)</b> Unrelated business	(D) Revenue exclude from tax under
						revenue	revenue	sections 512 - 514
t I	а	Federated campaigns						
not		Membership dues						
Ăr		Fundraising events						
ilar		Related organizations						
Sim		Government grants (contribut		5,000.				
er	f	All other contributions, gifts, gran		7 622 422				
Oth		similar amounts not included abo		7,622,432.				
and Other Similar Amounts L	-	Noncash contributions included in lines			7,627,432.			
a	h	Total. Add lines 1a-1f		Business Code	7,027,432.			
	а	CONFERENCE REVENUE		900099	2,186,616.	2,186,616.		
2	b	CONTRACTS		900099	1,190,856.	1,190,856.		
anı		ALLY PROGRAM		900099	498,146.	498,146.		
7 Kevenue	d				,			
Ř	e							
		All other program service reve	enue					
		Total. Add lines 2a-2f			3,875,618.			
3		Investment income (including						
		other similar amounts)		►	205,685.			205,68
4		Income from investment of tax						
5		Royalties		►				
			(i) Real	(ii) Personal				
6	а	Gross rents						
	b	Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
7	а	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	100,994.	<u> </u>				
	b	Less: cost or other basis	62.006					
		and sales expenses	63,996. 36,998.					
		Gain or (loss)	,		36,998.			36,99
		Net gain or (loss)		▶	30,990.			30,99
a a	a	Gross income from fundraising including \$						
lav		contributions reported on line						
e L		Part IV, line 18	,					
	b	Less: direct expenses						
5		Net income or (loss) from func		<b>&gt;</b>				
9		Gross income from gaming ac						
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam						
10	а	Gross sales of inventory, less	returns					
		and allowances	a					
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sale						
		Miscellaneous Revenu	e	Business Code				
11		MISCELLANEOUS INCOME		900099	18,043.			18,04
	b							
	C							
		All other revenue			10 040			
		Total. Add lines 11a-11d			18,043.	2 075 (10	0.	260 70
12		Total revenue. See instructions		🕨	11,763,776.	3,875,618.	υ.	260,726 Form <b>990</b> (20 <sup>-</sup>

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EFFICIENT ECONOMY

Form 990 (2018)

Secti	ion 501(c)(3) and 501(c)(4) organizations must comple	ete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a response	(			X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	635,897.	501,809.	106,093.	27,995
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,544,684.	3,584,085.	760,835.	199,764
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	211,054.	168,032.	33,528.	9,494
9	Other employee benefits	329,418.	262,269.	52,331.	14,818
10	Payroll taxes	368,515.	293,397.	58,542.	16,576
11	Fees for services (non-employees):				
а	Management				
b	Legal	8,926.		8,926.	
	Accounting	22,500.		22,500.	
d	Lobbying	11,564.	11,564.		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	1 022 682	959,098.	61,888.	11 606
40	column (A) amount, list line 11g expenses on Sch O.)	1,032,682.	353,038.	01,000.	11,696
12	Advertising and promotion	267,619.	216,609.	42,175.	8,835
13 14	Office expenses	207,015.	210,005.	=2,173.	0,000
14 15	Royalties				
15 16		614,457.	489,997.	97,181.	27,279
17	Occupancy Travel	372,298.	335,461.	14,036.	, 22,801
18	Payments of travel or entertainment expenses	,	,	,	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	807,591.	770,141.	28,764.	8,686
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	125,516.	100,032.	19,898.	5,586
23	Insurance	8,164.		8,164.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)	20.655		20.555	
a	STAFF DEVELOPMENT	32,665.	11 400	32,665.	1 650
b	DUES & SUBSCRIPTIONS UBI TAXES	22,664. 11,277.	11,422.	9,683. 11,277.	1,559
C L	TAXES	-2,025.		-2,025.	
d		2,249.		2,249.	
е 25	All other expenses	9,427,715.	7,703,916.	1,368,710.	355,089
25 26	Joint costs. Complete this line only if the organization	-, 12, ,, 13.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,500,720.	
_0	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here Fight following SOP 98-2 (ASC 958-720)				

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## 12200909 790809 94-2711707

Form 990 (2018)

Form 990 (2018)
Part X Balance Sheet

EFFICIENT ECONOMY

Part X		Check if Schedule O contains a response or not	e to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	1	Cash - non-interest-bearing			417,044.	1	920,736.
2	2	Savings and temporary cash investments			1,183,156.	2	1,848,311.
3		Pledges and grants receivable, net			190,000.	З	1,172,000
4		Accounts receivable, net			474,436.	4	478,167
5		Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated emp	loyees. Complete			
		Part II of Schedule L		-		5	
6		Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	•	· ·			
		employers and sponsoring organizations of sect					
<u>_</u>		employees' beneficiary organizations (see instr).				6	
	7	Notes and loans receivable, net				7	
× 8		Inventories for sale or use				8	
g					108,509.	9	70,864.
		Land, buildings, and equipment: cost or other			,	-	,
		basis. Complete Part VI of Schedule D	10a	772,471.			
	b	Less: accumulated depreciation		522,012.	335,529.	10c	250,459.
11		Investments - publicly traded securities		· · · · ·	6,197,859.	11	6,011,755.
12		Investments - other securities. See Part IV, line 1			1=1	12	· · · · · · · · · · · · · · · · · · ·
13		Investments - program-related. See Part IV, line				13	
14						14	
		Intangible assets			37,754.	15	37,754
15		Other assets. See Part IV, line 11			8,944,287.	16	10,790,046
17		Total assets. Add lines 1 through 15 (must equ			357,659.	17	338,774
		Accounts payable and accrued expenses				18	550,774
18		Grants payable			223,185.	19	248,979
19		Deferred revenue			223,103.		240,575
20		Tax-exempt bond liabilities				20	
21		Escrow or custodial account liability. Complete				21	
8   22		Loans and other payables to current and former					
		key employees, highest compensated employee					
		Complete Part II of Schedule L				22	
23		Secured mortgages and notes payable to unrela				23	
24		Unsecured notes and loans payable to unrelated				24	
25		Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	s 17-24). (	Complete Part X of	266 212		106 770
	_	Schedule D			266,212.	25	186,778.
26	6	Total liabilities. Add lines 17 through 25			847,056.	26	774,531.
		Organizations that follow SFAS 117 (ASC 958		here			
	_	complete lines 27 through 29, and lines 33 an			4 607 412		4 712 249
		Unrestricted net assets			4,687,413.	27	4,713,248
					3,409,818.	28	5,302,267.
29				·····		29	
		Organizations that do not follow SFAS 117 (A	SC 958),	check here ▶			
5		and complete lines 30 through 34.					
30		Capital stock or trust principal, or current funds				30	
2 31		Paid-in or capital surplus, or land, building, or ec				31	
27 28 29 29 29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20		Retained earnings, endowment, accumulated in			0 000 000	32	
z   33		Total net assets or fund balances			8,097,231.	33	10,015,515.
34	4	Total liabilities and net assets/fund balances .			8,944,287.	34	10,790,046.

Form 990 (2018)

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	AMERICAN COUNCIL FOR AN ENERGY-						
Form	1990 (2018) EFFICIENT ECONOMY	94-2711	.707	Pa	<sub>ge</sub> 12		
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u></u>				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11	,763,	776.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9	,427,	715.		
3	Revenue less expenses. Subtract line 2 from line 1	3	2	,336,	061.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))						
5	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	10	,015,	515.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>				
				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	e O.					
2a			. 2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te basis,					
	consolidated basis, or both:						
	X 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>2c</u>	X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch						
3a	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit						
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. <b>3b</b>	000			

Form **990** (2018)

SCHEDULE A	Public Cha	arity Status an	d Pub	olic Su	ipport		OMB No. 1545-0047
(Form 990 or 990-EZ)		nization is a section 501					2018
Department of the Treasury		947(a)(1) nonexempt cha Attach to Form 990 or F					Open to Public
Internal Revenue Service		ov/Form990 for instruction			nformation.		Inspection
Name of the organization		AN ENERGY-					identification number
Part I Reason f	EFFICIENT ECONOMY or Public Charity Status	(All organizations must co	molete th	is nart ) Se	e instructions		94-2711707
	private foundation because it is:						
	vention of churches, or associati		•		I)(A)(i).		
	ribed in section 170(b)(1)(A)(ii).						
3 A hospital or a	cooperative hospital service or	ganization described in se	ection 170	)(b)(1)(A)(ii	ii).		
	earch organization operated in co	onjunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,
city, and state							
	n operated for the benefit of a co	ollege or university owned	l or operat	ed by a go	overnmental u	nit describe	a in
	b)(1)(A)(iv). (Complete Part II.) e, or local government or govern	mental unit described in	section 17	70(h)(1)(A)	(v)		
	n that normally receives a subst					ne general r	oublic described in
· ·	)(1)(A)(vi). (Complete Part II.)		on a gore			ie general p	
	trust described in section 170(b	)(1)(A)(vi). (Complete Par	t II.)				
9 🗌 An agricultura	research organization described	d in section 170(b)(1)(A)(	i <b>x)</b> operate	ed in conju	inction with a	land-grant	college
or university o	r a non-land-grant college of agri	culture (see instructions).	Enter the	name, city	, and state of	the college	or
university:							
	n that normally receives: (1) mor						
	ed to its exempt functions - subje prelated business taxable income						-
	09(a)(2). (Complete Part III.)			Ses acqui		Janization a	
	n organized and operated exclusion	sively to test for public sa	fety. See	section 50	09(a)(4).		
12 An organizatio	n organized and operated exclusion	sively for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
more publicly	supported organizations describ	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section	509(a)(3). (	Check the box in
	ugh 12d that describes the type			-		-	
	pporting organization operated,		• • •	-			
	ed organization(s) the power to re	• • • • •	majority c	of the direc	tors or truste	es of the su	ipporting
	. You must complete Part IV, S upporting organization supervise		ion with it	e supporte	d organizatio	n(e) by bay	ina
	anagement of the supporting or				-		-
	(s). You must complete Part IV	-				90o osipi	
c 🗌 Type III fun	ctionally integrated. A supporti	ng organization operated	in connect	tion with, a	and functional	ly integrate	d with,
its supporte	d organization(s) (see instruction	s). You must complete I	Part IV, Se	ections A,	D, and E.		
	-functionally integrated. A sup					· ·	. ,
	inctionally integrated. The organ					an attentiv	veness
	(see instructions). You must co box if the organization received a						
	integrated, or Type III non-function				турет, туре	п, туре п	
	for an entral energy institute						
	ig information about the support						
(i) Name of suppo	rted (ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your govern	anization listed ing document?	(v) Amount or	-	(vi) Amount of other
organization		above (see instructions))	Yes	No	support (see ir	istructions)	support (see instructions)
Tatal							
Total	luction Act Notice, see the Inst	ructions for Form 990 or	990-F7	832021 10-	11-18 Sche	dule A (For	m 990 or 990-E7) 2018

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018 14

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## Schedule A (Form 990 or 990-EZ) 2018 EFFICIENT ECONOMY

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support Calendar year (or fiscal year beginning in) 🕨 **(a)** 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.") 4,867,901 5,087,816. 6,377,114 4,694,440. 7,627,432 28,654,703. 2 Tax revenues levied for the organization'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 4 867 901. 5,087,816. 6,377,114, 4,694,440. 7 627 432. 28,654,703. 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) 10,546,728. 18,107,975. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (b) 2015 **(c)** 2016 **(e)** 2018 Calendar year (or fiscal year beginning in) (a) 2014 (d) 2017 (f) Total 7 Amounts from line 4 4,867,901. 5,087,816. 6,377,114. 4,694,440. 7,627,432. 28,654,703. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, 114,378 205,685. 102,491 170,054. 128,034 720,642. 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.) 15,151. 1,262 291 5,798. 18,043. 40,545. 29,415,890. **11 Total support.** Add lines 7 through 10 17,569,044. 12 **12** Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► Section C. Computation of Public Support Percentage 61.56 14 % 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2017 Schedule A, Part II, line 14 42.96 15 % 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► X b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2018

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### 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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	3 (f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
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						
<b>3</b> 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						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	3 (f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
<ul> <li>c Add lines 10a and 10b</li> <li>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</li> </ul>						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)	L					
14 First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3) org	ganization,
check this box and stop here						
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2018 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2017					16	%
Section D. Computation of Inves	stment Income	e Percentage				
17 Investment income percentage for 20					17	%
<b>18</b> Investment income percentage from					18	%
19a 33 1/3% support tests - 2018. If the						ine 17 is not
more than 33 1/3%, check this box ar						▶∟
b 33 1/3% support tests - 2017. If the						
line 18 is not more than 33 1/3%, che						tion ▶
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t			▶∟
832023 10-11-18				Scl	hedule A (Forr	n 990 or 990-EZ) 2018
		16	)			

## Schedule A (Form 990 or 990 EZ) 2018 EFFICIENT ECONOMY

### 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")? // "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 disgualified 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.)

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4c 5a 5b <u>5c</u> 6 7 8 9a 9b 9c 10a 10b 2018.04020 AMERICAN COUNCIL FOR AN E 94-27111

1

2

3a

3b

3c

4a

4b

No Yes

	adule A (Form 990 or 990 EZ) 2018 EFFICIENT ECONOMY	94-2711707	Pa	age <b>5</b>
Pa	rt 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?	<u>11a</u>		
	A family member of a person described in (a) above?	11b		
	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. tion B. Type I Supporting Organizations	11c		
000	alon D. Type Toupporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		165	
•	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 <b>Part VI</b> 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 supported 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			
<u>Sec</u>	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
		uctions)		
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
c	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity	(see instructions	)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
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Schedule A (Form 990 or 990-EZ) 2018

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Sche	edule A (Form 990 or 990-EZ) 2018 EFFICIENT ECONOMY			94-2711707 Page <b>6</b>
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	n Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Se	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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	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-functionally integrated Type III supporting organization (see instructions)

Schedule A (Form 990 or 990-EZ) 2018

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	dule A (Form 990 or 990 EZ) 2018 EFFICIENT ECONOMY			94-2711707	Page <b>7</b>
Pa	rt V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continued)	1	
Sect	ion D - Distributions			Current Ye	ar
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	es of supported organizations	6		
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.				
_7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(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		I		
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributab Amount for 2	
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: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2018 distributable amount				
C	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 Part VI. 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.				
8	Breakdown of line 7:				
<u>a</u>	Excess from 2014				
b	Excess from 2015				
C	Excess from 2016				
d	Excess from 2017				
e	Excess from 2018				

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018 EFFICI	ENT ECONOMY	94-2711707 Page <b>8</b>
Part IV, Section A, lines 1, 2, 3b, 3c line 1; Part IV, Section D, lines 2 and	Provide the explanations required by Part II, line 10 , 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV d 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; F rt V, Section E, lines 2, 5, and 6. Also complete this p	/, Section B, lines 1 and 2; Part IV, Section C, Part V, line 1; Part V, Section B, line 1e; Part V,
SCHEDULE A, PART II, LINE 10, EXPLAN	NATION FOR OTHER INCOME:	
MISCELLANEOUS		
2014 AMOUNT: \$ 15,151.		
2015 AMOUNT: \$ 1,262.		
2016 AMOUNT: \$ 291.		
2017 AMOUNT: \$ 5,798.		
2018 AMOUNT: \$ 18,043.		
832028 10-11-18		Schedule A (Form 990 or 990-EZ) 201
	21	· · · · · · · · · · · · · · · · · · ·

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## **Schedule B**

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

Department of the Treasury Internal Revenue Service

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## Schedule of Contributors

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

OMB No. 1545-0047

2018

Employer identification number

AMERICAN COUNCIL FOR AN ENERGY-		
EFFICIENT ECONOMY	94-2711707	
Organization type (check one):		

Filers of:	Section:		
Form 990 or 990-EZ X 501(c)( <sup>3</sup> ) (enter number) organization			
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation		
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is charitable, etc., but no such contributions totaling the year for an *exclusively* religious, charitable, etc., but no such contributions totaling \$5,000 or more during the year for an *exclusively* set is charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is charitable, etc., but no such contributions totaling \$5,000 or more during the year for an *exclusively* set is the set is charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set is

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 $\label{eq:LHA} \mbox{ For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule I	3 (Form 990, 990-EZ, or 990-PF) (2018)		Page <b>2</b>
Name of o			Employer identification number
	COUNCIL FOR AN ENERGY- T ECONOMY		94-2711707
			51 2/11/07
Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contribution	ns Type of contribution
1		\$2,600,	000.       Person       X         Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contribution	ns Type of contribution
2		\$1,460,	000.       Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contribution	ns Type of contribution
3		\$1,200,	Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
4		\$1,000,	Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
5		\$530,	000.       Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
6		\$250,	Person     X       Payroll     Payroll       Noncash     (Complete Part II for noncash contributions.)

2018.04020 AMERICAN COUNCIL FOR AN E 94-27111

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Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2018)		Page <b>2</b>
Name of or			Employer identification number
	COUNCIL FOR AN ENERGY- T ECONOMY		94-2711707
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
7		\$200,	0000. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person          Payroll          Noncash          (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2018)		Page <b>3</b>
Name of or	-		Employer identification number
	COUNCIL FOR AN ENERGY- T ECONOMY		94-2711707
			I
Part II	Noncash Property (see instructions). Use duplicate copies of Part	Il if additional space is needed	ł.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
823453 11-08-		\$	B (Form 990, 990-EZ, or 990-PF) (2018)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule E	B (Form 990, 990-EZ, or 990-PF) (2018)				Page 4	
Name of or	rganization				Employer identification number	
AMERICAN	N COUNCIL FOR AN ENERGY-					
	IT ECONOMY				94-2711707	
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a				hat total more than \$1,000 for the year	
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of	\$1,000 or less for t	the year. (Enter this info. on	ce.) ▶ \$	
	Use duplicate copies of Part III if additional	space is needed.		1		
(a) No. from	(b) Purpose of gift	(c) Use of	aift	(d) Des	cription of how gift is held	
Part I	(-)	(-,	<b>.</b>	(,		
-		(a) <b>T</b> rana				
		(e) Trans	fer of gift			
	Transferee's name, address, a	nd <b>7</b> IP $\pm 4$	P	elationship of tra	insferor to transferee	
-			N			
(a) No.				()) D		
from Part I	(b) Purpose of gift	(c) Use of	gint	(d) Desc	cription of how gift is held	
-						
	(e) Transfer of gift					
ŀ	Transferee's name, address, a	nd <b>ZIP</b> + 4	К	elationship of tra	Insferor to transferee	
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of g	gift	(d) Dese	cription of how gift is held	
-						
		(e) Trans	fer of gift			
	<b>T</b>					
-	Transferee's name, address, a	na ZIP + 4	R	elationship of tra	insferor to transferee	
(a) No. from						
Part I	(b) Purpose of gift	(c) Use of g	gift	(d) Dese	cription of how gift is held	
-						
		(e) Trans	fer of gift			
	<b>_</b>		_			
ŀ	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	insferor to transferee	
			. <u></u>			
823454 11-08	3-18			Schedule	B (Form 990, 990-EZ, or 990-PF) (2018)	

## 12200909 790809 94-2711707

SCHEDULE C	Political Campaign and Lobbying Activities
(Form 990 or 990-EZ)	

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

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

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

• Section 527 organizations: Complete Part I-A only.

Department of the Treasury

Internal Revenue Service

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

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

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

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

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

Nam	ne of organization AMERICAN CO	DUNCIL FOR AN ENERGY-			Employer identification number	
	EFFICIENT 1				94-2711707	
Pa	Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.					
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures				
Pa	rt I-B Complete if the org	anization is exempt und	er section 501(c)(3	3).		
2 3 4a	Enter the amount of any excise tax Enter the amount of any excise tax If the organization incurred a section Was a correction made?	incurred by organization manag n 4955 tax, did it file Form 4720	ers under section 4955 for this year?		. ▶ \$ Yes No	
Pa	Irt I-C Complete if the org	anization is exempt und	er section 501(c),	except section 5	01(c)(3).	
2	Enter the amount directly expended Enter the amount of the filing organ exempt function activities	ization's funds contributed to ot	her organizations for se	ction 527		
	<ul> <li>3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b</li> <li>4 Did the filing organization file Form 1120-POL for this year?</li> <li>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</li> </ul>					
	contributions received that were proposed political action committee (PAC). If	., ,	· · · ·	,	parate segregated fund of a	
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's contributions received and	

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

Schedule C (Form 990 or 990-EZ) 2018

832041 11-08-18

OMB No. 1545-0047

2018 Open to Public Inspection

544.399.

71,043

136,100.

Schedule C (Form 990 or 990-EZ) 2018 EFFICIENT ECONOMY 94 - 2711707Page 2 Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). B Check if the filing organization checked box A and "limited control" provisions apply. (a) Filing (b) Affiliated group Limits on Lobbying Expenditures organization's totals (The term "expenditures" means amounts paid or incurred.) totals **1a** Total lobbying expenditures to influence public opinion (grass roots lobbying) 26,318 **b** Total lobbying expenditures to influence a legislative body (direct lobbying) 26,318. c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures 9,390,120. 9,416,438 e Total exempt purpose expenditures (add lines 1c and 1d) 620,822. Lobbying nontaxable amount. Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,000,000 but not over \$1,500,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 \$1,000,000. 155,206 g Grassroots nontaxable amount (enter 25% of line 1f) 0. h Subtract line 1g from line 1a. If zero or less, enter -0-Ο. i Subtract line 1f from line 1c. If zero or less, enter -0i If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (d) 2018 (a) 2015 (b) 2016 (c) 2017 (e) Total (or fiscal year beginning in)

596,834.

57,570.

149,209.

600,817.

37,739.

150,204.

Schedule C (Form 990 or 990-EZ) 2018

620,822

26,318,

155,206

2,362,872.

3,544,308.

192,670.

590,719.

886,079.

 2a Lobbying nontaxable amount
 b Lobbying ceiling amount (150% of line 2a, column(e))

c Total lobbying expenditures

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

f Grassroots lobbying expenditures

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

Schedule C (Form 990 or 990-EZ) 2018

	orm 990 or 990-EZ) 2018 EFFICIENT		94-2711707
Part II-B	Complete if the organization	is exempt under section 501(c)(3) and has NO	Γ filed Form 5768
	(election under section 501(h	n)).	

For e	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description			(b)	
	e lobbying activity.	Yes	Νο	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?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
-	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	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	n 501(c)(5),	or sec	tion	
	501(c)(6).				
				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?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	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		
	Carryover from last year		2b		
с			2c		
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,	lines 1 a	nd 2 (see	

SC	HEDULE D	Supplementa	al Financial Statements		OMB No. 1545-0047
(Form 990) Complete if the organization answered "Yes" on Form 99 Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or					2018
Depart	ment of the Treasury	Attach to Form 990.		Open to Public	
Interna	Revenue Service		90 for instructions and the latest information		Inspection
Nam	e of the organization	n AMERICAN COUNCIL FOR AN ENE EFFICIENT ECONOMY	RGY-	Em	ployer identification number 94-2711707
Pa	rt I Organizat		d Funds or Other Similar Funds or /		
ra		answered "Yes" on Form 990, Part IV, line		1000ui	tio. Complete li the
	organization	answered fes on Form 990, Fart IV, interest	(a) Donor advised funds	(b) Fur	nds and other accounts
1	Total number at one	d of year		(6) 1 01	
2		contributions to (during year)			
3					
4		end of year			
5			vriting that the assets held in donor advised fu	nds	
-	-		exclusive legal control?		Yes No
6			dvisors in writing that grant funds can be used		
	for charitable purpo	ses and not for the benefit of the donor or	donor advisor, or for any other purpose confe	erring	
	impermissible privat	te benefit?			
Pa	rt II Conserva	tion Easements. Complete if the org	anization answered "Yes" on Form 990, Part	V, line 7	
1	Purpose(s) of conse	ervation easements held by the organization	on (check all that apply).		
	Preservation of	of land for public use (e.g., recreation or e	ducation) Preservation of a historica	lly impo	rtant land area
	Protection of	natural habitat	Preservation of a certified	historic	structure
	Preservation of	of open space			
2	Complete lines 2a tl	hrough 2d if the organization held a qualifi	ed conservation contribution in the form of a c	conserva	tion easement on the last
	day of the tax year.				Held at the End of the Tax Year
а					
b	•				
c			icture included in (a)	2c	
d			fter 7/25/06, and not on a historic structure		
•					
3		ation easements modified, transferred, rele	eased, extinguished, or terminated by the orga	Inization	during the tax
4	year ►	here property subject to conservation eas	ement is located		
5		on have a written policy regarding the peri			
Ŭ		rcement of the conservation easements it			Yes No
6			handling of violations, and enforcing conserva		
Ū					sine dannig the year
7	Amount of expense	 s incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	easemen	ts during the year
	▶\$				0 )
8	Does each conserva	ation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(	B)(i)	
	and section 170(h)(4	4)(B)(ii)?			Yes No
9	In Part XIII, describe	e how the organization reports conservation	on easements in its revenue and expense state	ement, a	nd balance sheet, and
	include, if applicable	e, the text of the footnote to the organizat	ion's financial statements that describes the o	rganizat	ion's accounting for
_	conservation easem		· · · · · · · · · · · · · · · · · · ·		
Pa		-	Art, Historical Treasures, or Other	Simila	r Assets.
		the organization answered "Yes" on Form			
1a			C 958), not to report in its revenue statement a		
			ibition, education, or research in furtherance of	of public	service, provide, in Part XIII,
		ote to its financial statements that describ			
b	-		C 958), to report in its revenue statement and		
		-	lucation, or research in furtherance of public s	ervice, p	rovide the following amounts
	relating to these iter				•
					\$
-	.,				\$
2	-		asures, or other similar assets for financial gair	i, provid	e
	-	nts required to be reported under SFAS 11			•
a				🕨	\$
h	Assets included in F	-orm 990 Part X			. *

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	
832051 10-29-18	

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AMERICAN	COUNCIL	FOR	AN	ENERGY
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Sche	dule D (Form 990) 2018 EFFICIENT							4-271			age <b>2</b>
Pa	t III Organizations Maintaining C	ollections of Ar	t, Histe	orical Tre	asures, o	r Other	Similar A	ssets	(contii	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the f	ollowing that	t are a sigr	nificant use	of its c	ollection	items	
	(check all that apply):										
а	Public exhibition	c	3 🛄	Loan or exc	hange progra	ams					
b	Scholarly research	e		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	ne organizatio	on's exemp	ot purpose	in Part	XIII.		
5	During the year, did the organization solicit of	r receive donations of	of art, his	storical treas	sures, or othe	er similar a	ssets		_		_
_	to be sold to raise funds rather than to be ma								Yes		No
Pa	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered '	"Yes" on F	orm 990, P	art IV, I	ine 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custodi							_	_		_
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:							
									Amoun	t	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						_ 1f		7		1
	Did the organization include an amount on F					-	/?	L	Yes		No
Pa	If "Yes," explain the arrangement in Part XIII.						<u></u>				
Fa	<b>t V</b> Endowment Funds. Complete								() [		h l .
		(a) Current year	(b) ⊢	Prior year	(c) Two yea	rs back (	d) Three year	'S DACK	<b>(e)</b> Fou	r years	раск
	Beginning of year balance										
b	Contributions										
с.	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
t	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur			j, column (aj	)) heid as:						
a L	Board designated or quasi-endowment  Permanent endowment	%	_%								
b											
C	Temporarily restricted endowment										
20	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse		ation tha	t are hold ar	nd administor	od for the	organizatio	n			
Ja		ssion of the organiza	allon lina	l are neiù ai		ed for the	organizatio	11		Yes	No
	<ul><li>by:</li><li>(i) unrelated organizations</li></ul>								3a(i)	165	NU
	0 0								3a(ii)		
h	(ii) related organizations If "Yes" on line 3a(ii), are the related organization	tions listed as requir	red on Si	chodulo R2					3b		
4	Describe in Part XIII the intended uses of the								30		
	t VI Land, Buildings, and Equipm		WINEIL	unus.							
	Complete if the organization answere		). Part IV	/ line 11a. S	ee Form 990	. Part X. li	ne 10.				
	Description of property	(a) Cost or c		í .	or other		cumulated		(d) Boo	k valu	e
		basis (investr		. ,	(other)	. ,	reciation		,, 200		-
<b>1</b> a	Land	· · ·									
b	Buildings										
	Leasehold improvements				324,230.		183,46	8.		140.	762.
d	Equipment				210,498.		, 156,43			,	059.
	Other				237,743.		182,10				638.
		• • • •			· .					,	

Schedule D (Form 990) 2018

#### EFFICIENT ECONOMY Page 3 Schedule D (Form 990) 2018 Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12 (c) Method of valuation: Cost or end-of-year market value (a) Description of security or category (including name of security) (b) Book value (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨 Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (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 (a) Description (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. (a) Description of liability (b) Book value 1 (1) Federal income taxes DEFERRED RENT 186,778 (2)(3) (4) (5) (6) (7)(8) (9) 186,778. ► Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 2.

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

Schedule D (Form 990) 2018

832053 10-29-18

	AMERICAN COUNCIL FOR AN ENERGY-				
Sche	dule D (Form 990) 2018 EFFICIENT ECONOMY			94-271	1707 Page <b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With R	evenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	11,345,999.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-417,777.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	-417,777.
3	Subtract line 2e from line 1			3	11,763,776.
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			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	11,763,776.
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With I	Expenses per F	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total expenses and losses per audited financial statements			1	9,427,715.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
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			2e	0.
3	Subtract line 2e from line 1			3	9,427,715.
4	Amounts included on Form 990, Part IX, line 25, 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			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	9,427,715.
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.

832054 10-29-18

SC	HEDULE J	Compensation Information	1	OMB No. 1	545-004	47		
(Fo	(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest				2018			
•	Compensated Employees				ĬŎ	j –		
_		Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic		
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe				
Nan	ne of the organization	AMERICAN COUNCIL FOR AN ENERGY-	Employer i	dentificatio	on nui	mber		
		EFFICIENT ECONOMY	94-2	711707				
Pa	rt I Question	s Regarding Compensation						
					Yes	No		
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed on Form	990,					
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or c	harter travel Housing allowance or residence for perso	nal use					
	Travel for com	panions Payments for business use of personal re	sidence					
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	S					
	Discretionary s	spending account Personal services (such as maid, chauffer	ur, chef)					
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or						
	reimbursement or p	rovision of all of the expenses described above? If "No," complete Part III to explain		1b				
2	Did the organization	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2				
3	Indicate which, if an	ny, of the following the filing organization used to establish the compensation of the organiza	tion's					
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organizati	on to					
	establish compensa	ation of the CEO/Executive Director, but explain in Part III.						
	Compensation							
		ompensation consultant						
	X Form 990 of o	ther organizations	ommittee					
4		any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a re	-						
а		e payment or change-of-control payment?				X		
b		ceive payment from, a supplemental nonqualified retirement plan?				X		
с		ceive payment from, an equity-based compensation arrangement?		4c		X		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only another Fort							
F		)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	лт					
~	contingent on the r			5a		x		
a h		ation2				x		
D		ation?		50				
6		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	'n					
0	contingent on the n		11					
а	-			6a		x		
						x		
5		ation?		00				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments						
•				7		x		
8	not described on lines 5 and 6? If "Yes," describe in Part III         8       Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the							
5								
9		id the organization also follow the rebuttable presumption procedure described in		8		X		
5		1 53.4958-6(c)?		9				
LHA		eduction Act Notice, see the Instructions for Form 990.		ule J (Forn	n 990)	2018		

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Schedule J (Form 990) 2018

EFFICIENT ECONOMY

94-2711707

Page 2

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns		
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
STEVE NADEL	(i)	237,379.	0.	1,414.	12,173.	4,190.	255,156.	0.	
EXECUTIVE DIRECTOR	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
NAOMI BAUM	(i)	199,722.	0.	1,304.	10,135.	4,895.	216,056.	0.	
CHIEF OPERATING OFFICER	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
NEAL ELLIOTT	(i)	151,446.	0.	2,101.	7,970.	3,170.	164,687.	0.	
SENIOR DIRECTOR, RESEARCH	(ii)	٥.	0.	0.	0.	0.	٥.	0.	
THOMAS COX	(i)	142,723.	0.	804.	7,385.	1,186.	152,098.	0.	
FINANCE DIRECTOR	(ii)	٥.	0.	0.	0.	0.	0.	0.	
ANDREW DELASKI	(i)	141,665.	0.	803.	7,153.	1,478.	151,099.	0.	
EXEC DIR, APPLIANCE STANDARDS AWAREN	(ii)	Ο.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2018

EFFICIENT ECONOMY

Schedule J (Form 990) 2018

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Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or Complete to provide information for responses to specific question Form 990 or 990-EZ or to provide any additional information.		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.		Open to Public Inspection
Name of the organizatio			r identification number 711707
FORM 990, PART I,	LINE 1, DESCRIPTION OF ORGANIZATION MISSION:		
GREATER EFFICIENCY	OF ENERGY USE. THE COUNCIL PRODUCES PUBLICATIONS ON		
ENERGY EFFICIENCY	FROM RESEARCH PERFORMED, AND ORGANIZES CONFERENCES		
FOR PROFESSIONALS	IN THIS FIELD.		
FORM 990, PART VI,	SECTION A, LINE 1:		
THE MEMBERS OF THE	EXECUTIVE COMMITTEE SHALL BE THE CHAIRMAN OF THE BOARD,		
THE PRESIDENT, THE	SECRETARY, AND THE TREASURER OF THIS CORPORATION. THE		
BOARD MAY APPOINT	ADDITIONAL DIRECTORS TO BE MEMBERS OF THE EXECUTIVE		
COMMITTEE. THE EXE	CUTIVE COMMITTEE SHALL PROVIDE OVERSIGHT AND ADVISE THE		
EXECUTIVE DIRECTOR	ON LONG-TERM ISSUES THAT NEED DECISIONS BETWEEN THE		
BOARD MEETINGS SUC	H AS MAJOR UNDERTAKINGS, MAJOR STAFFING CHANGES, AND		
CONTROVERSIAL ISSU	ES IN ORGANIZATIONAL CONDUCT AND SHALL TAKE SUCH OTHER		
ACTIONS AS MAY BE	NECESSARY FOR THE PROPER SUPERVISION OF THE CORPORATION'S		
AFFAIRS WHEN THE E	OARD IS NOT IN SESSION. THE EXECUTIVE COMMITTEE SHALL		
HAVE ALL THE AUTHO	RITY OF THE BOARD, EXCEPT THAT THE EXECUTIVE COMMITTEE,		
REGARDLESS OF BOAR	D RESOLUTION, MAY NOT:		
(A) FILL VACANCIES	ON THE BOARD OF DIRECTORS OR ON ANY COMMITTEE;		
(B) FIX COMPENSATI	ON OF DIRECTORS FOR SERVING ON THE BOARD OR ON ANY		
COMMITTEE;			
(C) DISSOLVE THE C	ORPORATION;		
(D) AMEND OR REPEA	L BY-LAWS OR ADOPT NEW BY-LAWS;		
(E) AMEND OR REPEA	L ANY RESOLUTION OF THE BOARD OF DIRECTORS OR OF ANY		
OTHER COMMITTEES;			
(F) APPOINT ANY OT	HER COMMITTEES OF THE BOARD OF DIRECTORS OR THE MEMBERS		
THEREOF ;			
LHA For Paperwork R 832211 10-10-18	eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (For	m 990 or 990-EZ) (2018)

12200909 790809 94-2711707

 $^{37}$  2018.04020 AMERICAN COUNCIL FOR AN E 94-27111

Name of the organization AMERICAN COUNCIL FOR AN ENERGY- EFFICIENT ECONOMY	Employer identification number 94-2711707
	54 211101
(G) SPEND CORPORATE FUNDS TO SUPPORT A NOMINEE FOR DIRECTOR AFTER THERE ARE	
MORE PEOPLE NOMINATED FOR DIRECTOR THAN CAN BE ELECTED;	
(H) APPROVE ANY TRANSACTION BETWEEN THIS CORPORATION AND ONE OR MORE OF ITS	
DIRECTORS IN WHICH THE DIRECTOR OR	
DIRECTORS HAVE A MATERIAL FINANCIAL INTEREST, EXCEPT AS PROVIDED IN SECTION	
5233(D)(3) OF THE CALIFORNIA CORPORATIONS CODE; OR	
(I) APPROVE ANY ACTION THAT, UNDER THE CALIFORNIA NONPROFIT CORPORATION	
LAW, ALSO REQUIRES THE AFFIRMATIVE VOTE OF	
THE MEMBERS OF A PUBLIC BENEFIT CORPORATION, REGARDLESS OF WHETHER THIS	
CORPORATION HAS MEMBERS.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR, THE CHIEF OPERATING OFFICER,	
AND THE DIRECTOR OF FINANCE, THEN CIRCULATED TO THE BOARD PRIOR TO FILING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
MANAGEMENT DISTRIBUTES THE CONFLICT OF INTEREST POLICY IN THE EMPLOYEE	
HANDBOOK TO ALL NEW EMPLOYEES UPON HIRE. THE HUMAN RESOURCES DEPARTMENT	
REITERATES THIS POLICY AT APPROPRIATE TIMES THROUGHOUT THE YEAR, EITHER IN	
STAFF MEETINGS OR IN ONE-ON-ONE INTERACTIONS. ALL EMPLOYEES ARE SUBJECT TO	
THIS POLICY. IF IT IS DETERMINED THAT A MATERIAL CONFLICT EXISTS, THE	
EMPLOYEE MUST RECUSE HIMSELF FROM THE MATTER.	
DURING BOARD MEETINGS THE CHIEF OPERATING OFFICER WILL DRAW ATTENTION TO	
AND REMIND THE BOARD ABOUT THE CONFLICT OF INTEREST POLICY. BOARD MEMBERS	
ARE REQUIRED TO REPORT ANNUALLY.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS ESTABLISHES AND	

832212 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)

12200909 790809 94-2711707

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization AMERICAN COUNCIL FOR AN ENERGY-	Page 2 Employer identification number
EFFICIENT ECONOMY	94-2711707
APPROVES THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND THE CHIEF OPERATI	NG
OFFICER. AS WELL AS REVIEWS AND APPROVES THEIR RECOMMENDATION ON STAFF	
SALARIES. THESE ARE ALSO REVIEWED AND APPROVED BY THE FULL BOARD. THIS	
REVIEW WAS LAST PERFORMED IN FEBRUARY OF 2018. COMPARABILITY DATA,	
COLLECTED EVERY THREE YEARS, IS USED TO HELP DETERMINE PAY. A COMPENSATIO	N
CONSULTANT CONDUCTED A COMPREHENSIVE BENCHMARKING OF STAFF SALARIES AND A	
SURVEY OF PEERS IN 2018.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST	
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTANTS:	
PROGRAM SERVICE EXPENSES 959,09	8.
MANAGEMENT AND GENERAL EXPENSES 61,88	8
FUNDRAISING EXPENSES 11,69	
TOTAL EXPENSES 1,032,68	2
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 1,032,68	2
FORM 990, PART XII, LINE 2C:	
DURING THE TAX YEAR, AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT ECONOMY	
DID NOT CHANGE ITS PROCESSES FOR OVERSIGHT OF THE AUDIT AND SELECTION	
OF AN INDEPENDENT ACCOUNTANT.	
832212 10-10-18	Schedule Q (Form 990 or 990-FZ) (2018)

Form <b>990-T</b>	Exempt Orac	NOTICE 20			av Roturr	<b>.</b>	OMB No. 1545-0687		
Form <b>330-1</b>	90-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))								
	For calendar year 2018 or other tax year beginning, and ending								
	A to when its gov/Earm000T for instructions and the latest information								
Internal Revenue Service	intment of the Treasury								
A Check box if address changed		Check box if name c L FOR AN ENERGY-	hanged	and see instructions.)		Emp	loyer identification number oloyees' trust, see uctions.)		
B Exempt under section	Print EFFICIENT ECONO	YY					94-2711707		
X 501(c)(3)	or Number, street, and roc	om or suite no. If a P.O. box	k, see in	structions.			lated business activity code instructions.)		
408(e) 220(e)	Type 529 14TH STREET	, NW, NO. 600				Ì			
408A 530(a) 529(a)	A 530(a) City or town, state or province, country, and ZIP or foreign postal code								
C Book value of all assets at end of year									
10,790,	046. G Check organization ty		poration	501(c) trust	401(a	) trust	Other trust		
	organization's unrelated trades or	businesses. 🕨			the only (or first) u				
trade or business here					complete Parts I-V.				
	ank space at the end of the previ	ous sentence, complete Pa	rts I and	d II, complete a Schedule	M for each addition	ial trade	; or		
business, then complete		affiliated group or a parar	t ouboi	diany controlled group?		Π Ye	es X No		
If "Yes," enter the name a	the corporation a subsidiary in a nd identifying number of the par		11-50051						
	THE ORGANIZATION	come			one number $\triangleright$ 2		1		
				(A) Income	(B) Expense	5	(C) Net		
<ul> <li>1 a Gross receipts or sale</li> <li>b Less returns and allow</li> </ul>		<b>c</b> Balance	1c						
	chedule A, line 7)	_	2						
<ul><li>3 Gross profit. Subtract</li></ul>			3						
•	ne (attach Schedule D)		4a						
	4797, Part II, line 17) (attach For		4b						
c Capital loss deduction	for trusts		4c						
	partnership or an S corporation (		5						
6 Rent income (Schedu	,		6						
	ed income (Schedule E)		7						
	alties, and rents from a controlled		8						
	a section 501(c)(7), (9), or (17)		9						
	vity income (Schedule I)		10 11						
11 Advertising income (S	Schedule J)structions; attach schedule)		<u> </u>						
	3 through 12			0.					
Part II Deductio	ns Not Taken Elsewhe	<b>re</b> (See instructions fo					<u> </u>		
	contributions, deductions mu				income.)				
14 Compensation of off	cers, directors, and trustees (Sc	hedule K)				14			
						15			
	ance					16			
						17			
	dule) (see instructions)					18 19	3,444.		
<ol> <li>Taxes and licenses</li> <li>Charitable contribution</li> </ol>	ons (See instructions for limitation	n rules)				20	5,111.		
	Form 4562)					20			
	imed on Schedule A and elsewh					22b			
						23			
	erred compensation plans					24			
25 Employee benefit pro						25			
26 Excess exempt exper	nses (Schedule I)					26			
27 Excess readership co	osts (Schedule J)					27			
28 Other deductions (at	tach schedule)			SEE STATEMEN	Т 1	28	1,440.		
	dd lines 14 through 28					29	4,884.		
	axable income before net operati					30	-4,884.		
	erating loss arising in tax years b		-	. ,		31	_ 1 00 1		
	axable income. Subtract line 31 f or Paperwork Reduction Act Noti					32	-4,884. Form <b>990-T</b> (2018)		
023/01 01-09-19 LAA FU	a raperwork neuronon Act NOU								

		AMERICAN COUNCIL FOR AN ENE	RGY-							
Form 990-1	(2018)	EFFICIENT ECONOMY				94-273	L1707			Page 2
Part I		otal Unrelated Business Taxab	ole Income							
33	Total	of unrelated business taxable income compute	ed from all unrelated trades or busine	esses (s	ee instructions)		. 33		-4,	884.
34	Amou	nts paid for disallowed fringes					34		43,	182.
35	Dedu	tion for net operating loss arising in tax years	beginning before January 1, 2018 (s	see instr	ructions)		35			
36	Total	of unrelated business taxable income before s	pecific deduction. Subtract line 35 fro	om the s	sum of					
	lines :	33 and 34					36			298.
37	Speci	fic deduction (Generally \$1,000, but see line 3	7 instructions for exceptions)				. 37		1,	000.
38	Unrel	ated business taxable income. Subtract line	37 from line 36. If line 37 is greater t	than line	e 36,					
							38		37,	298.
Part I		ax Computation								022
39	-	izations Taxable as Corporations. Multiply l					> 39		Ϊ,	833.
40		Taxable at Trust Rates. See instructions for					10			
			m 1041)				912/2			
41		tax. See instructions								
42		ative minimum tax (trusts only)								
43 44		n Noncompliant Facility Income. See instruc Add lines 41, 42, and 43 to line 39 or 40, whi							7	833.
Part \		ax and Payments					. 1 11			
		In tax credit (corporations attach Form 1118; 1	rusts attach Form 1116)		45a					
b	10 M									
c		al business credit. Attach Form 3800								
d	Credit	for prior year minimum tax (attach Form 880	1 or 8827)		45d					
е		credits. Add lines 45a through 45d					45e			
46		act line 45e from line 44					46		7,	833.
47		taxes. Check if from: Form 4255	Form 8611 E Form 8697	Form 8	866 📃 Other	(attach schedule	) 47			
48	Total	tax. Add lines 46 and 47 (see instructions)					48		7,	833.
49	2018	net 965 tax liability paid from Form 965-A or F	Form 965-B, Part II, column (k), line	2			. 49			0.
		ents: A 2017 overpayment credited to 2018					_			
		estimated tax payments				7,74	The bear			
		eposited with Form 8868			V78/06-128	15	0.			
	1021.000 SAG	n organizations: Tax paid or withheld at sourc	· · · · · · · · · · · · · · · · · · ·				-			
		p withholding (see instructions)					-			
		for small employer health insurance premiun			50f					
g		credits, adjustments, and payments: Fo		otal 🕨	505	,	aler?			
				Post Contraction of Contraction	50g	× 0	51		7	898.
51		payments. Add lines 50a through 50gated tax penalty (see instructions). Check if Fo					52			
52 53		ue. If line 51 is less than the total of lines 48,					53			
54		ayment. If line 51 is larger than the total of line					54			65.
55		the amount of line 54 you want: Credited to 2				funded	▶ 55			0.
Part \		Statements Regarding Certain		rmatio	on (see instru	ictions)				
56	At any	time during the 2018 calendar year, did the o	organization have an interest in or a s	signature	e or other authori	ty			Yes	No
		financial account (bank, securities, or other)						10		
	FinCE	N Form 114, Report of Foreign Bank and Fina	ncial Accounts. If "Yes," enter the nan	ne of the	e foreign country					
	here									X
57		g the tax year, did the organization receive a d		r of, or t	transferor to, a fo	reign trust?				X
		s," see instructions for other forms the organiz		/						
58	Enter	the amount of tax-exempt interest received or	accrued during the tax year	loo and st	tatements and to the	a best of my know	vledge and	d belief it is tr	ue	
Sign	co	der penalties of perjury, I declare that I have examined rect, and complete. Declaration of preparen (other than	taxpayer) is based on all information of which	ch prepar	er has any knowledg	je.	wiedge and			
Here		WITTER (LAN)	9/9/14 NEXEC		DIRECTOR			IRS discuss th		/ith
		Signature of officer	Date Title	01110	DIRECTOR			arer shown be ons)? X		No
		Print/Type preparer's name	Preparer's signature	In	ate	Check		TIN		
Dell		τι πατιγραφισμού ο πάπιο				self- employ				
Paid		SARA SMITH	Java Smoth	8	/19/2019	,		P0133273	4	
Prepa Use (		Firm's name <b>FATE</b> & TRYON				Firm's EIN		52-1855	5942	
Use	July	2021 L ST NW								
		Firm's address 🕨 WASHINGTON, DC	20036			Phone no.	(202)			
823711 01	-09-19							Form \$	990-Т	(2018)

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## Form 990-T (2018) EFFICIENT ECONOMY

Schedule A - Cost of Goods	s Sold. Enter n	nethod of invento	ory va	aluation 🕨 N/A					
1 Inventory at beginning of year				Inventory at end of yea	r		6		
2 Purchases				Cost of goods sold. Su		I I			
3 Cost of labor				from line 5. Enter here		I			
4a Additional section 263A costs			line 2				7		
(attach schedule)	4a		8	Do the rules of section				Yes	S No
<b>b</b> Other costs (attach schedule)				property produced or a	•	•			
5 Total. Add lines 1 through 4b				the organization?		, , , , ,			
Schedule C - Rent Income (	(From Real P	roperty and	Per		ease	d With Real Prop	erty)		•
(see instructions)									
1. Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent received	or accrued							
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	e than	` ' of rent for pe	rsonal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	<b>3(a)</b> Deductions directly columns 2(a) an	connectec d 2(b) (atta	l with the income ach schedule)	in
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			٥.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	►			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	►		٥.
Schedule E - Unrelated Deb	ot-Financed I	ncome (see ir	nstru	ctions)		•			
			2	. Gross income from		3. Deductions directly conr to debt-financ	nected with ed propert	n or allocable y	
1. Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(	b) Other deduction (attach schedule)	
(1)									
(2)									
(3)									
(4)							+		
<ol> <li>Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> </ol>	debt-financ	djusted basis ocable to ed property schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		Allocable dedu lumn 6 x total of 3(a) and 3(b)	columns
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A).		er here and on pa rt I, line 7, colum	
Totals				▶		0			0.
Total dividends-received deductions in	ncluded in column 8	3		······································		►	•		0.
								Form <b>990-</b>	<b>T</b> (2018)

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Schedule F - Interes	t, Annuitie	s, Royalties, an	d Rents	From Co	ntrolle	d Organiza	tions (see in:	structions	5)
			Exempt 0	Controlled O	rganizat	ions			
1. Name of controlled organization 2. Employer identification number			t unrelated income (see instructions) <b>4.</b> Total of specified payments made		5. Part of column 4 that is included in the controlling organization's gross income		<b>6.</b> Deductions directly connected with income in column 5		
_(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Org	anizations					•			
7. Taxable Income		nrelated income (loss) see instructions)	9. Total	of specified payr made	nents	in the controlli	nn 9 that is included ng organization's s income		ductions directly connected income in column 10
_(1)									
(2)									
(3)									
(4)									
						Enter here and	nns 5 and 10. on page 1, Part I, column (A).	Enter he	d columns 6 and 11. ere and on page 1, Part I, line 8, column (B).
Totals					►		0.		Ο.
Schedule G - Investr (see i	ment Incor nstructions)	ne of a Section	501(c)(7	), (9), or (	17) Org	ganization			
1. [	Description of inco	me		2. Amount of	income	<ol> <li>Deduction directly conner (attach sched)</li> </ol>	cted 4. Set	-asides schedule)	<ol> <li>Total deductions and set-asides (col. 3 plus col. 4)</li> </ol>
(1)									
(2)									
(3)									
(4)									
				Enter here and Part I, line 9, co					Enter here and on page 1, Part I, line 9, column (B).
Totals			►		0.				0.
Schedule I - Exploite (see in	ed Exempt structions)	Activity Incom	e, Other	Than Adv	<i>rtisir</i>	ng Income			
				4					

1. Description of exploited activity	2. Gross unrelated business income from trade or business	<b>3.</b> Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)							
(2)							
(3)							
(4)							
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).				Enter here and on page 1, Part II, line 26.	
Totals	0.	0.				0.	
Schedule J - Advertising Income (see instructions)							

## Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	<b>2.</b> Gross advertising income	<b>3.</b> Direct advertising costs	<b>4.</b> Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) ►	0.	0.				0.

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►

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	<b>2.</b> Gross advertising income	<b>3.</b> Direct advertising co		<b>4.</b> Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circul incon		. Readership costs	7. Excess readersh costs (column 6 mir column 5, but not m than column 4).	nus Iore
(1)									
(2)									
(3)									
(4)									
Totals from Part I	Ο.		0.						٥.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and page 1, Par line 11, col.	tI,					Enter here and on page 1, Part II, line 27.	
Totals, Part II (lines 1-5)	٥.		0.						0.
Schedule K - Compensation	n of Officers, D	Directors,	and	Trustees (see in	structions	)			
<b>1.</b> Name				<b>2.</b> Title		3. Percent of time devoted to business		pensation attributable nrelated business	
(1)						I	%		
(2)						1	%		

 (3)
 %

 (4)
 %

Total. Enter here and on page 1, Part II, line 14

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FORM 990-T	OTHER DEDUCTIONS	STATEMENT 1
DESCRIPTION		AMOUNT
TAX PREP FEES		1,440.
TOTAL TO FORM 990-T, PAGE	2 1, LINE 28	1,440.