** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

Open to Public

OMB No. 1545-0047

Department of the Treasury

Preparer

Use Only

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

► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2021 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable: AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT Address change **ECONOMY** Name 94-2711707 Doing business as change Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 202-507-4007 529 14TH STREET NW 600 13,111,647. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended 20045 WASHINGTON, DC H(a) Is this a group return Applica-tion pending F Name and address of principal officer: STEVEN NADEL 」Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: ► WWW.ACEEE.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Other > L Year of formation: 1980 M State of legal domicile: CA Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: ACEEE SEEKS TO DEVELOP POLICIES **Activities & Governance** TO REDUCE ENERGY WASTE AND COMBAT CLIMATE CHANGE. ITS INDEPENDENT if the organization discontinued its operations or disposed of more than 25% of its net assets. 21 3 Number of voting members of the governing body (Part VI, line 1a) 21 Number of independent voting members of the governing body (Part VI, line 1b) 4 130 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 6,260,957. 10,972,804. Contributions and grants (Part VIII, line 1h) 8 1,508,372. 1,856,807. Program service revenue (Part VIII, line 2g) 208,488. 282,173. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 -137. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,869. 11 7,982,686. 13,111,647. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. 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) 6,952,405. 7,712,469. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 2,246,571. 2,277,456. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,198,976. 9,989,925. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -1,216,290. 3,121,722. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 12,301,164. 16,572,613. Total assets (Part X, line 16) 2,043,101. 2,411,687. 21 Total liabilities (Part X, line 26) 三年 10,258,063. 14,160,926 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Sign STEVEN NADEL, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature 11/08/22 self-employed P02288149 JULIA L. LAFFERTY JULIA L. LAFFERTY Paid

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Firm's name COUNCILOR, BUCHANAN & MITCHELL, P.C.

Firm's address > 7910 WOODMONT AVE.

May the IRS discuss this return with the preparer shown above? See instructions

BETHESDA, MD 20814

Firm's EIN ▶ 52-1711839

Phone no. (301) 986-0600

X Yes

STE. 500

If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, revenue, if any, for each program service reported. To Code: (Expenses	
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ENVIRONMENT, AND ENERGY EFFICIENCY AS A RESOURCE.	
20.066	006
	<u>226.</u>
POLICY ADVOCACY: WE HELP ADVANCE NEW EFFICIENCY PROGRAMS AND POLICIENTS PROGRAMS PROGRA	S
AND PASS STATE LAWS REQUIRING ENERGY-EFFICIENT EQUIPMENT. AT THE	
FEDERAL LEVEL, WE HELP SHAPE BIPARTISAN ENERGY-SAVING LEGISLATION.	
4d Other program services (Describe on Schedule O.)	
(Expenses \$ including grants of \$) (Revenue \$)	
4e Total program service expenses ► 7,871,102.	990 (2021

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ECONOMY Page 3 Form 990 (2021) Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Х If "Yes," complete Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 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 amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? Х 9 If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments Х or in quasi endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Х 11a Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Х 11b Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in X 11d Part X, line 16? If "Yes," complete Schedule D, Part IX Х 11e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete Х Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? Х 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes." complete Schedule E 13 **14a** Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 Х foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 Х column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18

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18

19

20a

20b

X

1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

Form	990 (2021) ECONOMY 94-2711	707	Р	age 4
Par	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	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			
	, ,	25b		X
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		26		X
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	20		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			₩.
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			v
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			3,7
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,,
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			1
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		<u></u>	1
Des	Note: All Form 990 filers are required to complete Schedule O Tt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	Щ_
Pai	Statements Regarding Other INS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		 I	
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 54	-		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		77	
	(gambling) winnings to prize winners?	1c	N OOO	<u> </u> (2021)
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| Part V | Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1				
	filed for the calendar year ending with or within the year covered by this return	2a	130			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	•	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e -file. See instruction					
За	5.11			За		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a		•	4a		Х
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 A	ccoun	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons o	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices p	provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	e			
^	, , , , , , , , , , , , , , , , , , , ,			8		
9	Sponsoring organizations maintaining donor advised funds.			00		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a 9b		
10	Section 501(c)(7) organizations. Enter:			30		
	Initiation fees and capital contributions included on Part VIII, line 12	10a	I			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		7		
11	Section 501(c)(12) organizations. Enter:			7		
	Gross income from members or shareholders	11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b	<u> </u>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			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	ı	ı			
	organization is licensed to issue qualified health plans	13b		4		
	Enter the amount of reserves on hand	13c	•			v
				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedula the agreement(s) of more than \$1,000,000 in require			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			4.5		x
	excess parachute payment(s) during the year?			15		
16	If "Yes," see the instructions and file Form 4720, Schedule N.	t inco	ma?	16		х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen If "Yes," complete Form 4720, Schedule O.	t ii iCOl		16		
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	anv				
••	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	-		17		
	If "Yes," complete Form 6069.					

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 21 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 21 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Х 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION - 202-507-4007

132006 12-09-21

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14TH STREET NW, 600, WASHINGTON, DC

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	n nor any related	orga	niza	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	not c	Posi			nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	n an	compensation	compensation	amount of
	week	-	Cer an	uau	recto	rrius	lee)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or 0	stee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al tru:		yee	эш ш		1099-NEC)		and related
	below	ndividual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	Jer.			organizations
	line)	Indi	Insti	Officer	Key	High	Former			
(1) STEVE NADEL	40.00	1								
EXECUTIVE DIRECTOR	10.00			Х				300,631.	0.	38,492.
(2) NAOMI BAUM	40.00	1						222 245		40.00
CHIEF OPERATING OFFICER	10.00			Х				232,217.	0.	13,388.
(3) THOMAS COX	40.00	4				l		140 614		20 656
FINANCE DIRECTOR	40.00					X		149,614.	0.	38,656.
(4) WENDY KOCH	40.00	4				,,		177 264	_	0 501
SENIOR DIRECTOR, MARKETING	40.00					X		177,364.	0.	8,521.
(5) NORA ESRAM	40.00	1				37		157 141	_	10 021
SENIOR DIRECTOR, RESEARCH (6) CORINNE ABBOTT	40.00					X		157,141.	0.	19,931.
(6) CORINNE ABBOTT DIRECTOR OF DEVELOPMENT	40.00	-				x		165 667	0.	10 020
(7) ANDREW DELASKI	40.00					^		165,667.	0.	10,039.
EXEC DIRE, APPLIANCE STANDA	40.00	1			х			158,302.	0.	8,907.
(8) ED RIGHTOR	40.00				^			130,302.	0.	0,301.
DIRECTOR OF INDUSTRIAL PROGRAM	40.00	1				x		142,412.	0.	8,134.
(9) JANICE BERMAN	2.00							112/1124	•	0/1311
DIRECTOR		Х						0.	0.	0.
(10) SCOTT BERNSTEIN	2.00								-	
PRESIDENT		Х		Х				0.	0.	0.
(11) ROSA CASSIDY	2.00									
DIRECTOR		Х						0.	0.	0.
(12) BENJIE DE LA PENA	2.00									
DIRECTOR		Х						0.	0.	0.
(13) DENISE FAIRCHILD	2.00	1								
DIRECTOR		Х						0.	0.	0.
(14) CHANDRA FARLEY	2.00	1							_	_
DIRECTOR		Х						0.	0.	0.
(15) ROBERT JACKSON	2.00	J								
DIRECTOR		Х						0.	0.	0.
(16) MARK JOHNSON	2.00								_	_
DIRECTOR		Х						0.	0.	0.
(17) MELANIE KENDERDINE	2.00	. ,							_	^
DIRECTOR		X						0.	0.	<u>0.</u>

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Page 8

Part VII Section A. Officers, Directors, Trust	ees, Key Em	oloy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)			
(A)	(B)			(0				(D)	(E)		(F)	
Name and title	Average	(da	not c	Pos				Reportable	Reportable	F	Estimate	d
	hours per	box	, unles	ss per	rson i	is both	n an	compensation	compensation	a	amount (of
	week		cer an	id a di	irecto	or/trus	tee)	from	from related		other	
	(list any	rector						the	organizations	- 1	mpensa	
	hours for related	or di	e e			ated		organization	(W-2/1099-MISC/	- 1	from the	
	organizations	ustee	trust		e e	Suedic		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	- 1	ganizati nd relate	
	below	ual tr	tional		ploye	le ou	_	1099-1120)		- 1	ganizatio	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			"	garnzan	5110
(18) VICKI KUO	2.00	_	_	_		"						
DIRECTOR		Х						0.	0			0.
(19) NANETTE LOCKWOOD	2.00											
DIRECTOR		Х						0.	0	•		0.
(20) MONICA MARTINEZ	2.00											
DIRECTOR		Х				_		0.	0	•		0.
(21) PENELOPE MCLEAN-CONNER	2.00			l					•			_
CHAIR	0 00	Х		Х		┞		0.	0	•		0.
(22) FRANCIS MURRAY, JR.	2.00	.,							0			^
DIRECTOR	2.00	Х				┢		0.	0	┿		0.
(23) MARY ANN PIETTE DIRECTOR	2.00	Х						0.	0			0.
(24) DANIELLE SASS BYRNETT	2.00	Δ						0.	U	•		0.
DIRECTOR	2.00	Х						0.	0			0.
(25) SUZANNE SHELTON	2.00									1		
DIRECTOR		х						0.	0			0.
(26) ALISON SILVERSTEIN	2.00							-	-			
SECRETARY		Х		Х				0.	0			0.
1b Subtotal							▶	1,483,348.	0		16,00	58.
c Total from continuation sheets to Part VII	, Section A							0.	0			0.
d Total (add lines 1b and 1c)							<u> </u>	1,483,348.	0	. 14	16,00	<u> </u>
2 Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable			
compensation from the organization											1 1	18
											Yes	No
3 Did the organization list any former officer,												v
line 1a? If "Yes," complete Schedule J for so										3		X
4 For any individual listed on line 1a, is the su											x	
and related organizations greater than \$150Did any person listed on line 1a receive or a										4	$+^{\Delta}$	
rendered to the organization? If "Yes," com	•				•			•		5		Х
Section B. Independent Contractors	<u>Diete Scrieduli</u>	3) [or st	ICH I	sers	OH .						
Complete this table for your five highest cor	npensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compens	sation f	rom	
the organization. Report compensation for t	he calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.			
(A)								(B)			(C)	
Name and business	address	N	ONE	5				Description of s	ervices	Comp	ensatior	า
2 Total number of independent contractors (in	ncluding but n	ot lir	nited	to t	thos	se lis	ted	above) who received mo	ore than			
\$100,000 of compensation from the organiz					(
SEE PART VII, SECTION	A CONT	IN	UΑ	TI	on	S	HE	ETS		Forn	n 990 (2	2021)

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Part VII Section A. Officers, Directors, Tr	ustops Kov Er	nnlo	VAA		nd H	liah	set (Compensated Employ	age (continued)	
(A)	(B)	lipio	yee) C)	iigiii	251 1	(D)	(E)	(F)
Name and title	Average hours	(cl		Pos	رح ition that		ly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) MITCHELL B. SIMPSON, JR. DIRECTOR	2.00	Х						0.	0.	0
(28) SUSAN E. STRATTON PREASURER	2.00	Х		Х				0.	0.	0
29) HARRIET TREGONING DIRECTOR	2.00	х						0.	0.	0
										,

Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any line	e in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
					Tariotion Tovonas	Bacilloco rovellac	sections 512 - 514
ပ္ ပ	1 8	a Federated campaigns 1a					
ani		Membership dues 1b					
ဇ် ဋ		Fundraising events 1c					
r A		d Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (contributions)	984,003.				
Sin		All other contributions, gifts, grants, and					
ē Ħ			9,988,801.				
έş			3,300,001.				
o d		Noncash contributions included in lines 1a-1f		10 072 904			
Oa		Total. Add lines 1a-1f		10,972,804.			
		COMPEDENCE DEVENUE	Business Code	055 611	055 611		
Se	2 8		900099	855,611.	855,611.		
ē Š	ŀ	ALLY PROGRAM	900099	688,970.			
Program Service Revenue	•	CONTRACTS	900099	312,226.	312,226.		
ev ev	•	d					
Б	•						
₫	1	All other program service revenue					
	9	Total. Add lines 2a-2f		1,856,807.			
	3	Investment income (including dividends, interes	est, and				
		other similar amounts)	▶	282,173.			282,173.
	4	Income from investment of tax-exempt bond p	oroceeds >				
	5	Royalties	▶ [
		(i) Real	(ii) Personal				
	6 a	a Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		d Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory 7a	(,				
		, ,					
ø.	•	Less: cost or other basis					
Ž		and sales expenses					
eye		Gain or (loss) 7c					
ther Revenue		d Net gain or (loss)	P				
the the	8 8	Gross income from fundraising events (not					
0		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
	9 a	a Gross income from gaming activities. See					
		Part IV, line 199a					
	ŀ	Less: direct expenses 9b					
	(Net income or (loss) from gaming activities	>				
	10 a	Gross sales of inventory, less returns					
		and allowances 10a	a				
	ŀ	Less: cost of goods sold 108					
		Net income or (loss) from sales of inventory					
			Business Code				
Miscellaneous Revenue	11 a	MISCELLANOUS INCOME	900099	-137.	-137.		
ne							
ella							
<u>Š</u> Č		All other revenue					
Σ		• Total. Add lines 11a-11d		-137.			
		Total revenue. See instructions		13,111,647.	1,856,670.	0.	282,173.

Form 990 (2021) ECONOMY Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				X
	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		460 000	400 470	04 648
	trustees, and key employees	584,728.	460,908.	102,173.	21,647
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	4,926,896.	3,883,592.	860,909.	182,395
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	271,138.	213,722.	47,378.	10,038 55,945
9	Other employee benefits	1,511,194.	1,191,188.	264,061.	55,945
10	Payroll taxes	418,513.	329,890.	73,130.	15,493
11	Fees for services (nonemployees):				
а	Management				
	Legal	27,698.	117.	27,581.	
	Accounting	30,612.		30,612.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
J	column (A), amount, list line 11g expenses on Sch O.)	1,121,199.	1,001,111.	98,642.	21,446
12	Advertising and promotion		,		•
13	Office expenses	165,720.	102,291.	59,341.	4,088
14	Information technology	,	,		•
15	Royalties				
16	Occupancy	635,331.	487,175.	125,250.	22,906
17	Travel	9,448.	9,444.	4.	•
 18	Payments of travel or entertainment expenses	- , -	- ,		
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	14,835.	14,392.	443.	
20	Interest	,,	,,	1101	
20 21	Payments to affiliates				
22	Depreciation, depletion, and amortization	141,549.	110,624.	25,735.	5,190
23		23,958.	,	23,758.	3,150
23 24	Other expenses. Itemize expenses not covered	23,330.		23,330.	
24	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	OTHER EXPENSES	88,384.	63,645.	24,339.	400
b	BANK CHARGES	18,722.	3,003.	11,661.	4,058
C		±0,122.	3,003.	,	1,000
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	9,989,925.	7,871,102.	1,775,217.	343,606
25 26	Joint costs. Complete this line only if the organization	J,JUJ,J4J•	,,0,1,104.	1,113,4110	343,000
.0	, , , ,				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	ļ		<u> </u>	

Form **990** (2021)

Form 990 (2021)

Part X | Balance Sheet

Part	t X	Balance Sheet					
		Check if Schedule O contains a response or note	to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			230,647.	1	692,895
	2	Savings and temporary cash investments			2,130,136.	2	
	3	Pledges and grants receivable, net			699,215.	3	0
	4	Accounts receivable, net			133,424.	4	1,306,695
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
		controlled entity or family member of any of these	e perso	ons		5	
	6	Loans and other receivables from other disqualifi	ed per				
		under section 4958(f)(1)), and persons described		6			
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			8		
ĕ	9	B			142,668.	9	170,566
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,231,039.			
	b	Less: accumulated depreciation	10b	490,228.	248,059.		740,811 13,623,892
	11	Investments - publicly traded securities		8,679,261.	11	13,623,892	
	12	Investments - other securities. See Part IV, line 1			12		
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			37,754.	15	37,754
	16	Total assets. Add lines 1 through 15 (must equa			12,301,164.	16	16,572,613
	17	Accounts payable and accrued expenses		1	426,670.	17	532,981
	18	Grants payable	150 500	18			
	19	Deferred revenue			150,500.	19	387,423
- 1	20	Tax-exempt bond liabilities	10.061	20	06 450		
	21	Escrow or custodial account liability. Complete P		19,261.	21	86,473	
Se	22	Loans and other payables to any current or former					
┋┃		trustee, key employee, creator or founder, substa					
Liabilities		controlled entity or family member of any of these				22	
	23	Secured mortgages and notes payable to unrelate			004 002	23	
	24	Unsecured notes and loans payable to unrelated			984,003.	24	0
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	-	· .	460 667		1 404 010
		of Schedule D			462,667.		1,404,810
+	26	Total liabilities. Add lines 17 through 25			2,043,101.	26	2,411,687
ပ္ပ		Organizations that follow FASB ASC 958, chec	ck here				
<u>ဗ</u>		and complete lines 27, 28, 32, and 33.			4 020 450	0=	6,066,983
<u>a</u>	27	Net assets without donor restrictions			4,920,458. 5,337,605.	27	8,093,943
e e	28	Net assets with donor restrictions			5,557,005.	28	0,033,343
<u> </u>		Organizations that do not follow FASB ASC 95	8, cne	eck nere			
<u>2</u>		and complete lines 29 through 33.					
į į	29	Capital stock or trust principal, or current funds			29		
SSE	30	Paid-in or capital surplus, or land, building, or equ				30	
ا ب	31	Retained earnings, endowment, accumulated inc			10 250 062	31	14 160 006
	32	Total net assets or fund balances			10,258,063.	32	14,160,926
\perp	33	Total liabilities and net assets/fund balances			12,301,164.	33	16,572,613 Form 990 (202

Form **990** (2021)

Ра	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,11:</u>				
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>,989</u>				
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>,12:</u>				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10	<u>, 258</u>		63. 41.		
5								
6	Donated services and use of facilities	6						
7								
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	14	,16	0,9	26.		
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>			X		
					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 on Schedule	Ο.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	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	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audi	rt					
	Act and OMB Circular A-133?			За		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b				
				Form	990	(2021)		

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT

OMB No. 1545-0047

Open to Public

Employer identification number

ECONOMY 94-2711707 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

General year (or fiscal year beginning in) Gitts, grants, contributions, and membership fees received, (Do not include any "unusual grants.") 4694440. 7627432. 6564947. 6260957. 10972804. 36120580. 2 Tax revenues level for the organization benefit and either paid to ore expended on its behalf similar benefit and either paid to ore expended on its behalf similar benefit and either paid to ore expended on its behalf similar benefit and either paid to ore expended on its behalf similar behalf s	Sec	tion A. Public Support	71		,			
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Schedule A (Form 990) 2021

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.)

qualify under the tests listed b Section A. Public Support	elow, please comp	plete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons b Amounts included on lines 2 and 3 received						
p 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						
c 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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	(4) 2011	(2) 2010	(6) 2010	(4) 2020	(0) 2021	(1) 10141
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is						
Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organization	on,
check this box and stop here						>
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2021 (I	ine 8, column (f), c	divided by line 13,	column (f))		15	%
16 Public support percentage from 2020					16	%
Section D. Computation of Inves	tment Income	e Percentage				
17 Investment income percentage for 20)21 (line 10c, colu	mn (f), divided by li	ine 13, column (f))		17	%
18 Investment income percentage from						%
19a 33 1/3% support tests - 2021. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box as						
b 33 1/3% support tests - 2020. If the line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization						

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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?
- 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 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.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on 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 line 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.)

Yes No 1 2 3a 3b 3c 4a 4b
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	edule A (Form 990) 2021 ECONOMY 94 – 27	<u>TT/0</u>	/ Pa	age 5
Pa	rt IV Supporting Organizations (continued)		1	
			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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	110		
Sec	<u>detail in</u> Part Ⅵ. etion B. Type I Supporting Organizations	11c		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction 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			
0	the supported organization(s).	1		
Sec	ction 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	2		
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
Ü	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			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b				
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in 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 on line 2a, above, 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 lines 3a and 3b below.			
а		_		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	3 1 71 3 7	2h		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2021

ECONOMY

94-2711707 Page 6

Part V	Гуре III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations				
1 C	heck here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.			
	ll other Type III non-functionally integrated supporting organizations mu		·	_			
Section A - A	ection A - Adjusted Net Income (A) Prior Year						
1 Net sho	rt-term capital gain	1					
2 Recover	ries of prior-year distributions	2					
3 Other gr	ross income (see instructions)	3					
4 Add line	es 1 through 3.	4					
5 Depreci	ation and depletion	5					
6 Portion	of operating expenses paid or incurred for production or						
collection	on of gross income or for management, conservation, or						
mainten	nance of property held for production of income (see instructions)	6					
7 Other ex	xpenses (see instructions)	7					
8 Adjuste	ed Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)			
1 Aggrega	ate fair market value of all non-exempt-use assets (see						
instructi	ions for short tax year or assets held for part of year):						
a Average	e monthly value of securities	1a					
b Average	e monthly cash balances	1b					
c Fair mar	rket value of other non-exempt-use assets	1c					
d Total (a	dd lines 1a, 1b, and 1c)	1d					
e Discou	nt claimed for blockage or other factors						
(explain	in detail in Part VI):						
2 Acquisit	tion indebtedness applicable to non-exempt-use assets	2					
3 Subtrac	t line 2 from line 1d.	3					
4 Cash de	eemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
see inst	ructions).	4					
5 Net valu	ue of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply	line 5 by 0.035.	6					
7 Recover	ries of prior-year distributions	7					
8 Minimu	m Asset Amount (add line 7 to line 6)	8					
Section C - D	Distributable Amount			Current Year			
1 Adjuste	d net income for prior year (from Section A, line 8, column A)	1					
2 Enter 0.	85 of line 1.	2					
3 Minimur	m asset amount for prior year (from Section B, line 8, column A)	3					
4 Enter gr	reater of line 2 or line 3.	4					
5 Income	tax imposed in prior year	5					
6 Distribu	utable Amount. Subtract line 5 from line 4, unless subject to						
	ncy temporary reduction (see instructions).	6					
$\overline{}$	heck here if the current year is the organization's first as a non-function	nally integrated	d Type III supporting orga	anization (see			

Schedule A (Form 990) 2021

instructions).

Schedule A (Form 990) 2021 ECONOMY 94-2711707 Page 7						
Part V						
Section D -	Section D - Distributions					
1 Amou	nts paid to supported organizations to accomplish exer	mpt purposes		1		
2 Amou	nts paid to perform activity that directly furthers exemp	t purposes of supported				
organ	zations, in excess of income from activity			2		
3 Admir	nistrative expenses paid to accomplish exempt purpose	es of supported organizations		3		
4 Amou	nts paid to acquire exempt-use assets			4		
5 Qualif	ied set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6 Other	distributions (describe in Part VI). See instructions.			6		
7 Total	annual distributions. Add lines 1 through 6.			7		
8 Distrib	outions to attentive supported organizations to which th	ne organization is responsive				
(provid	de details in Part VI). See instructions.			8		
9 Distrib	outable amount for 2021 from Section C, line 6			9		
10 Line 8	amount divided by line 9 amount	1		10		
Section E -	Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	ıs	(iii) Distributable Amount for 2021	
1 Distrib	outable amount for 2021 from Section C, line 6					
2 Under	distributions, if any, for years prior to 2021 (reason-					
able c	ause required - explain in Part VI). See instructions.					
3 Exces	s distributions carryover, if any, to 2021					
a From	2016					
b From	2017					
c From	2018					
d From	2019					
e From	2020					
f Total	of lines 3a through 3e					
g Applie	ed to underdistributions of prior years			_		
h Applie	ed to 2021 distributable amount					
<u>i</u> Carryo	over from 2016 not applied (see instructions)					
j Rema	inder. Subtract lines 3g, 3h, and 3i from line 3f.					
4 Distrib	outions for 2021 from Section D,					
line 7:	\$					
a Applie	ed to underdistributions of prior years			_		
b Applie	ed to 2021 distributable amount					
	inder. Subtract lines 4a and 4b from line 4.					
	ining underdistributions for years prior to 2021, if					
	Subtract lines 3g and 4a from line 2. For result greater					
than z	ero, explain in Part VI. See instructions.			_		
6 Rema	ining underdistributions for 2021. Subtract lines 3h					
	b from line 1. For result greater than zero, explain in					
	/I. See instructions.					
7 Exces	s distributions carryover to 2022. Add lines 3j					
	down of line 7:					
	s from 2017					
	s from 2018					
	s from 2019					
	s from 2020					
e Exces	s from 2021					

Schedule A (Form 990) 2021

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT

Schedule A	(Form 990) 2021	ECONOMY		94-2711707	Page 8
Part VI	Supplemental Information Part IV, Section A, lines 1 line 1; Part IV, Section D,	rmation. Provide the ex 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9 , lines 2 and 3; Part IV, Sec	∂a, 9b, 9c, 11a, 11b, and 11c ction E, lines 1c, 2a, 2b, 3a, a	, line 10; Part II, line 17a or 17b; Part III, line 12; ; Part IV, Section B, lines 1 and 2; Part IV, Section 0 nd 3b; Part V, line 1; Part V, Section B, line 1e; Part ete this part for any additional information.	Ο,
	(See Instructions.)				

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Name of the organization

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT ECONOMY

Employer identification number

94-2711707

Organization type (check one):						
Filers of: Section:						
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note: Or	nly a section 501(c)	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
	ŭ	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
X	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), 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					
answer "	'No" on Part IV, line	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 g requirements of Schedule B (Form 990).				

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

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Name of organization

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT

ECONOMY

Employer identification number

94-2711707

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 2,500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,608,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>1,500,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ 600,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>470,000</u> .	Person X Payroll

Schedule B (Form 990) (2021)

Name of organization

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT

ECONOMY

Employer identification number

94-2711707

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Name, address, and ZIF + +	\$ 350,030.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$984,003.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT

ECONOMY

Employer identification number

94-2711707

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	(b) Description of noncash property given (b) Description of noncash property given	(b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) FMV (or estimate) (See instructions.) (e) FMV (or estimate) (See instructions.) (f) FMV (or estimate) (See instructions.) (g) FMV (or estimate) (See instructions.) (h) Description of noncash property given (g) FMV (or estimate) (See instructions.) (g) FMV (or estimate) (See instructions.) (h) Description of noncash property given (g) FMV (or estimate) (See instructions.) (h) Description of noncash property given (g) FMV (or estimate) (See instructions.) (h) Description of noncash property given (g) FMV (or estimate) (See instructions.)				

Name of organization **Employer identification number** AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT 94-2711707 **ECONOMY** Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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) organizat	tions: Complete Part III.				
Nan		N COUNCIL FOR AN	ENERGY-EFFI	CIENT	Emplo	yer identification number
Da	ECONOMY		or costion E01/o)	or in a continu FO	7 0 40	94-2711707
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c) (or is a section 52	org	anization.
2 3	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures gn activities				
_	·	janization is exempt und		·		
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955		▶\$	
	Enter the amount of any excise tax					
	If the organization incurred a section					
	Was a correction made?					Yes No
	o If "Yes," describe in Part IV. art I-C Complete if the org	anization is exempt und	er section 501(c)	except section 5	01/6\	(3)
	-	-		-		
	Enter the amount directly expended Enter the amount of the filing organ				> \$	
2	exempt function activities		· ·		▶\$	
3	Total exempt function expenditures				Ψ.	
Ü	line 17b		,		\$	
4	Did the filing organization file Form					
5						
	made payments. For each organiza					
	contributions received that were pro-	omptly and directly delivered to	a separate political orga	ınization, such as a se	parate	segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	vide information in Part I	V.		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Schedule C (Form 990) 2021

ECONOMY

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Section 501(h)).	anization is exem	npt under section	501(c)(3) and file	ed Form 5/68 (ele	ction under		
expenses, and share	tion belongs to an affil	xpenditures).		group member's name	e, address, EIN,		
Limi	ts on Lobbying Exper	nditures	•••	(a) Filing organization's totals	(b) Affiliated group totals		
 1a Total lobbying expenditures to infli b Total lobbying expenditures to infli c Total lobbying expenditures (add li 	uence a legislative bod	y (direct lobbying)		22,966. 22,966.			
d Other exempt purpose expendituree Total exempt purpose expenditure	es (add lines 1c and 1d)			9,989,925. 10,012,891.			
f Lobbying nontaxable amount. Enter If the amount on line 1e, column (a) on Not over \$500,000	or (b) is: The lobi	tollowing table in both bying nontaxable amount on line 1e.		650,645.			
Over \$500,000 but not over \$1,000 Over \$1,000,000 but not over \$1,5 Over \$1,500,000 but not over \$17, Over \$17,000,000	ess over \$500,000. ess over \$1,000,000. ess over \$1,500,000.						
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- 0 •							
j If there is an amount other than ze	i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No						
(Some organizations t	hat made a section 50	raging Period Under 01(h) election do not h te instructions for lin	nave to complete all	of the five columns be	low.		
	Lobbying Expen	ditures During 4-Yea	r Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total		
2a Lobbying nontaxable amount	620,822.	620,836.	609,949.	650,645.	2,502,252.		
b Lobbying ceiling amount (150% of line 2a, column(e))					3,753,378.		
c Total lobbying expenditures	26,318.	33,005.	10,112.	22,966.	92,401.		
d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e))	155,206.	155,209.	152,487.	162,661.	625,563. 938,345.		
	1						

Schedule C (Form 990) 2021

f Grassroots lobbying expenditures

ECONOMY Pa

	2001(0111	, , , , , , ,
art II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed	Form 5768
	(election under section 501(h)).	

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(a)		(b)	
the lobbying activity.	Yes	No	Amo	ount	
During the year, did the filing organization attempt to influence foreign, national, state, or					
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total. Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)	on 501(c)(5),	, or sec	tion		
501(c)(6).					
			Yes	No	
, , , , , , , , , , , , , , , , , , , ,					
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2			
	he prior year? on 501(c)(5),	2 3 or sec		3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart 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."	he prior year? on 501(c)(5), "No" OR (b	or sec) Part I		3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from tart 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." Dues, assessments and similar amounts from members	he prior year? on 501(c)(5), "No" OR (b	or sec) Part I		3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from tart 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." Dues, assessments and similar amounts from members	he prior year? on 501(c)(5), "No" OR (b	or sec) Part I		3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	he prior year? on 501(c)(5), "No" OR (b	or sec) Part I		3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	he prior year? on 501(c)(5), "No" OR (b	2 3 , or sec) Part I		3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart 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." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	he prior year? on 501(c)(5), "No" OR (b	2 3 or sec) Part I		3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	he prior year? on 501(c)(5), "No" OR (b	2 3 or sec) Part I		3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the art 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." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Carryover from last year	he prior year? on 501(c)(5), "No" OR (b	2 3 or sec) Part I		3, is	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT **ECONOMY**

Employer identification number 94-2711707

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		Funds or Ac	counts. Complete if the
	, , , <u>, , , , , , , , , , , , , , , , </u>	(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in don	or advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac	lvisors in writing that grant funds	can be used o	nly
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other p	urpose conferr	ing
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on For	m 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education) Preser	vation of a histo	orically important land area
	Protection of natural habitat	Preser	vation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in t	ne form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic stru	cture included in (a)		2c
d	Number of conservation easements included in (c) acquired at	ter 7/25/06, and not on a historic	c structure	
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	ased, extinguished, or terminate	d by the organi	zation during the tax
	year ▶			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, han	dling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforc	ing conservatio	n easements during the year
				
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing c	onservation ea	sements during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of sect	ion 170(h)(4)(B)	(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and e	expense statem	ent and
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's financia	statements the	at describes the
Da	organization's accounting for conservation easements.	Aut Historical Transcruss	ou Othou C	imiles Accets
Pai	TIII Organizations Maintaining Collections of		, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for publ	· · · · · · · · · · · · · · · · · · ·		nce of public
	service, provide in Part XIII the text of the footnote to its finance			
b	If the organization elected, as permitted under FASB ASC 958			
	art, historical treasures, or other similar assets held for public	exhibition, education, or researc	n in furtherance	e of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			
_				•
2	If the organization received or held works of art, historical trea		financial gain,	provide
	the following amounts required to be reported under FASB AS			
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2021

132051 10-28-21

	dule D (Form 990) 2021 ECONOMY								<u> 11707</u>	Page 2
Par	t III Organizations Maintaining Co	ollections of Ar	t, Hist	orical Tre	asures, o	r Other	Simila	r Assets	(continu	ed)
3	Using the organization's acquisition, accessio	n, and other record	ls, check	any of the f	ollowing that	t make siç	gnificant ι	use of its		
	collection items (check all that apply):									
а	Public exhibition	•	: L	Loan or exc	hange progra	am				
b	Scholarly research	•	e 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's col	lections and explai	n how th	ey further th	e organizatio	on's exem	npt purpo	se in Part	XIII.	
5	During the year, did the organization solicit or	receive donations	of art, his	storical treas	sures, or othe	er similar	assets		_	
	to be sold to raise funds rather than to be mai								Yes	No
Par	t IV Escrow and Custodial Arrang		ete if the	organizatio	n answered	"Yes" on	Form 990), Part IV, I	ine 9, or	
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodia							_	_	
	on Form 990, Part X?							L	Yes	X No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fo	llowing t	able:						
									Amount	
	Beginning balance									
d	Additions during the year									
е	Distributions during the year									
f	Ending balance							77	7	
	Did the organization include an amount on Fo						ty?	LX	Yes	∐ No
Par	If "Yes," explain the arrangement in Part XIII.									X
rai	t V Endowment Funds. Complete if							vaara haak	(a) Four	yooro book
		(a) Current year	(0) F	rior year	(c) Two yea	15 Dack	(a) Tillee y	ears back	(e) Four y	tais Dack
	Beginning of year balance									
	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
	Administrative expenses									
g	End of year balance		- /:		\					
2	Provide the estimated percentage of the curre	•	•	j, column (a)) neid as:					
a	Board designated or quasi-endowment		%							
	Permanent endowment ► Term endowment ► 9	%								
C	· · · · · · · · · · · · · · · · · · ·	-								
20	The percentages on lines 2a, 2b, and 2c should be there and authors the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentages on lines 2a, 2b, and 2c should be the percentage of the percentage	•	otion the	t are hold ar	d administa	rad far th	o organiza	ation		
Sa	Are there endowment funds not in the posses	sion of the organiz	ation tha	t are neid ar	ia aaministei	rea for the	e organiza	ation	Г	res No
	by:									100 110
	(i) Unrelated organizations								3a(i)	_
h	(ii) Related organizations	iona listad on roqui	rod on C	shadula D2					3a(ii) 3b	_
4	Describe in Part XIII the intended uses of the								_ JD _	
	t VI Land, Buildings, and Equipme		willelit	urius.						
	Complete if the organization answered		0. Part IV	. line 11a. S	ee Form 990). Part X. I	ine 10.			
	Description of property	(a) Cost or o			or other	 	cumulate	24	(d) Book	value
	besofiption of property	basis (invest			(other)		reciation		(a) Dook	value
12	Land	· ` `	-7		/					
	Buildings									
	Leasehold improvements			79	9,571.		64,1	60.	735	,411.
	Equipment				- , - · - ·		, -			<u>,</u>
	Other			43	1,468.	4	26,0	68.	5	,400.

Schedule D (Form 990) 2021

740,811.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

94-2711707	Page 3
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	Complete if the organization answered "Ves" of	n Form QQQ Dart IV line	11h Soc Form 900 Part V line 12
(a) Descrip	Complete if the organization answered "Yes" or tion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
., .	al derivatives		
•	held equity interests		
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments - Program Related.		
	Complete if the organization answered "Yes" o	n Form 990. Part IV. line	e 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)			
(3) (4)			
(5)			
(6)			
(7)			
(1)			
(0)			
(8)			
(9)	b) must aqual Form 000 Part V cal /D) lina 12)		
(9) F otal . (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		
(9)	Other Assets.	n Form 990. Part IV line	e 11d. See Form 990. Part X. line 15.
(9) otal. (Col. (Other Assets. Complete if the organization answered "Yes" of		
(9) otal. (Col. (Part IX	Other Assets. Complete if the organization answered "Yes" of	n Form 990, Part IV, line Description	e 11d. See Form 990, Part X, line 15. (b) Book value
(9) Fotal. (Col. (Part IX) (1)	Other Assets. Complete if the organization answered "Yes" of		
(9) Total. (Col. (Part IX) (1) (2)	Other Assets. Complete if the organization answered "Yes" of		
(9) Fotal. (Col. (Part IX) (1) (2) (3)	Other Assets. Complete if the organization answered "Yes" of		
(9) Total. (Col. (Part IX) (1) (2) (3) (4)	Other Assets. Complete if the organization answered "Yes" of		
(9) Fotal. (Col. (Part IX) (1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered "Yes" of		
(9) Fotal. (Col. (Part IX) (1) (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" of		
(9) Total. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" of		
(9) Total. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered "Yes" of		
(9) Total. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" c (a) [Description	
(9) Total. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Columnation)	Other Assets. Complete if the organization answered "Yes" o (a) [Description	
(9) Total. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered "Yes" of (a) [a]	Description 15.)	(b) Book value
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(9) fotal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) fotal. (Col. (Part X)	Other Assets. Complete if the organization answered "Yes" of the organization of liability	Description 15.)	(b) Book value
(9) fotal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) fotal. (Col. (Part X) [.]	Other Assets. Complete if the organization answered "Yes" of the complete if the organization of liability deral income taxes	Description 15.)	(b) Book value the 11e or 11f. See Form 990, Part X, line 25. (b) Book value
(9) rotal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) rotal. (Col. Part X) (1) Fec. (2) DE	Other Assets. Complete if the organization answered "Yes" of the organization of liability	Description 15.)	(b) Book value
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(9) fotal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) fotal. (Col. (Part X) 1. (1) Fec (2) DE (3) (4) (5) (6)	Other Assets. Complete if the organization answered "Yes" of the complete if the organization of liability deral income taxes	Description 15.)	(b) Book value the 11e or 11f. See Form 990, Part X, line 25. (b) Book value
(9) Fotal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col. (Part X) I. (1) Fec (2) DE (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" of the complete if the organization of liability deral income taxes	Description 15.)	(b) Book value the 11e or 11f. See Form 990, Part X, line 25. (b) Book value
(9) Fotal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Col. (Part X) 1. (1) Fec. (2) DE (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered "Yes" of the complete if the organization of liability deral income taxes	Description 15.)	(b) Book value the 11e or 11f. See Form 990, Part X, line 25. (b) Book value
(9) fotal. (Col. (Part IX) (1) (2) (3) (4) (5) (6) (7) (8) (9) fotal. (Col. (Part X) 1. (1) Fec (2) DE (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered "Yes" of the complete if the organization of liability deral income taxes	Description 15.)	(b) Book value the 11e or 11f. See Form 990, Part X, line 25. (b) Book value

Schedule D (Form 990) 2021

		Reconciliation of Revenue per Audited Financial Statem	ents With F	Revenue per Ret	urn.		agc -
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.	•			
1	Total				1	13,892,7	88.
2	Amou	ints included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net u	nrealized gains (losses) on investments	2a	781,141.			
b	Dona	ted services and use of facilities	2b				
С	Reco	veries of prior year grants	2c				
d	Other	(Describe in Part XIII.)	2d				
е		nes 2a through 2d			2e	781,1	
3		act line 2e from line 1			3	13,111,6	<u>47.</u>
4	Amou	ints included on Form 990, Part VIII, line 12, but not on line 1:	1 1				
а		tment expenses not included on Form 990, Part VIII, line 7b					
b		(Describe in Part XIII.)	4b				^
		nes 4a and 4b			4c	12 111 6	47
5 D a	Total	revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Reconciliation of Expenses per Audited Financial Stater	mente With	Evnences per P	5 Otur	13,111,6	4/.
га	I L AII			Exhelises hel u	eturi		
_	.	Complete if the organization answered "Yes" on Form 990, Part IV, line 12		T	_	9,989,9	2 5
1		expenses and losses per audited financial statements			1	9,909,9	<u> </u>
2		ints included on line 1 but not on Form 990, Part IX, line 25:	ا ء ا				
a		ted services and use of facilities	l I				
b		year adjustments	1 2 1				
C		losses					
d		(Describe in Part XIII.)			0-		Λ
е 3		ines 2a through 2d act line 2e from line 1			2e 3	9,989,9	25
4		act line 2e from line 1 Ints included on Form 990, Part IX, line 25, but not on line 1:				2,202,2	<u> </u>
a		tment expenses not included on Form 990, Part VIII, line 7b	4a				
b		(Describe in Part XIII.)					
		ines 4a and 4b			4c		0.
5		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	9,989,9	$\frac{1}{25}$
	rt XIII	Supplemental Information.				- , , -	
Prov	ide the	descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV, lines 1b a	and 2b; Part V, line 4;	Part 2	X, line 2; Part XI,	
		4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac					
PAI	RT I	V, LINE 2B:					
TH:	E OR	GANIZATION HOLDS FUNDS ON BEHALF OF TH	HE ORGAN	IZATIONS W	HO I	MAKE UP	
						_	
TH)	E NO	RTH AMERICAN STRATEGIC ENERGY MANAGEME	ENT COLL	ABORATIVE	IN Z	A	
~ TT/	7m0D	TAL ADDANGUEDIO					
CU	STOD	IAL ARRANGEMENT.					

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

2027

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT ECONOMY

Employer identification number 94-2711707

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u>X</u>
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		<u>X</u>
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		<u>X</u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		<u>X</u>
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2021

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.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	· · · · · ·	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) STEVE NADEL	(i)	297,561.	0.	3,070.	15,148.	23,344.	339,123.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) NAOMI BAUM	(i)	229,750.	0.	2,467.	11,388.	2,000.	245,605.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) THOMAS COX	(i)	147,653.	0.	1,961.	7,896.	30,760.	188,270.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) WENDY KOCH	(i)	173,728.	0.	3,636.	8,521.	0.	185,885.	0.
l l	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) NORA ESRAM	(i)	154,561.	0.	2,580.	8,144.	11,787.	177,072.	0.
I	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CORINNE ABBOTT	(i)	163,476.	0.	2,191.	8,091.	1,948.	175,706.	0.
DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ANDREW DELASKI	(i)	156,118.	0.	2,184.	7,707.	1,200.	167,209.	0.
EXEC DIRE, APPLIANCE STANDA	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ED RIGHTOR	(i)	139,549.	0.	2,863.	6,870.	1,264.	150,546.	0.
DIRECTOR OF INDUSTRIAL PROGRAM	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
((ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
((ii)							
	(i)							
	(ii)							
	(i)							
((ii)							
	(i)							
	(ii)							

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 O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. 2021
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT ECONOMY

Employer identification number 94-2711707

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

ANALYSIS ADVANCES INVESTMENTS, PROGRAMS, AND BEHAVIORS THAT USE ENERGY

MORE EFFICIENTLY AND HELP BUILD AN EQUITABLE CLEAN ENERGY FUTURE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PROMOTES THE HEALTH, SAFETY & WELLBEING OF ALL.

FORM 990, PART VI, SECTION A, LINE 1A:

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 EXECUTIVE COMMITTEE SHALL PROVIDE OVERSIGHT AND ADVISE THE

EXECUTIVE DIRECTOR ON LONG-TERM ISSUES THAT NEED DECISIONS BETWEEN THE

BOARD MEETINGS SUCH AS MAJOR UNDERTAKINGS, MAJOR STAFFING CHANGES, AND

CONTROVERSIAL ISSUES IN ORGANIZATIONAL CONDUCT AND SHALL TAKE SUCH OTHER

ACTIONS AS MAY BE NECESSARY FOR THE PROPER SUPERVISION OF THE CORPORATION'S

AFFAIRS WHEN THE BOARD IS NOT IN SESSION. THE EXECUTIVE COMMITTEE SHALL

HAVE ALL THE AUTHORITY OF THE BOARD, EXCEPT THAT THE EXECUTIVE COMMITTEE,

REGARDLESS OF BOARD RESOLUTION, MAY NOT:

- A) FILL VACANCIES ON THE BOARD OF DIRECTORS OR ON ANY COMMITTEE;
- B) FIX COMPENSATION OF DIRECTORS FOR SERVING ON THE BOARD OF ANY COMMITTEE;
- C) DISSOLVE THE CORPORATION;
- D) AMEND OR REPEAL BY-LAWS OR ADOPT NEW BY-LAWS;
- E) AMEND OR REPEAL ANY RESOLUTION OF THE BOARD OF DIRECTORS OR OF ANY OTHER COMMITTEE;

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

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page 2

Name of the organization AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT ECONOMY

Employer identification number 94-2711707

- F) APPOINT ANY OTHER COMMITTEES OF THE BOARD OF DIRECTORS OR THE MEMBERS
 THEROF;
- G) SPEND CORPORATE FUNDS TO SUPPORT A NOMINEE FOR DIRECTORS 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 RESCUE 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:

Schedule O (Form 990) 2021 Page **2**

Name of the organization AMERICAN COUNCIL FOR AN ENERGY-EFFICIENT EMPloyer
ECONOMY 94-

Employer identification number 94-2711707

THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS ESTABLISHES AND

APPROVES THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND THE CHIEF OPERATING

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 JANUARY OF 2021. COMPARABILITY DATA, COLLECTED

EVERY THREE YEARS, IS USED TO HELP DETERMINE PAY. A COMPENSATION CONSULTANT

CONDUCTED A COMPREHENSIVE BENCHMARKING OF STAFF SALARIES AND A SURVEY OF

PEERS IN 2021, AND THE NEXT TO BE PERFORMED IN 2024.

FORM 990, PART VI, SECTION C, LINE 18:

VIA HYPERTEXT LINK

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

1,001,111.

MANAGEMENT AND GENERAL EXPENSES

98,642.

FUNDRAISING EXPENSES

21,446.

TOTAL EXPENSES

1,121,199.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A

1,121,199.

FORM 990, PART XII, LINE 2C

DURING THE TAX YEAR, ACEEE DID NOT CHANGE ITS PROCESSES FOR OVERSIGHT

OF THE AUDIT AND SELECTION OF AN INDEPENDANT ACCOUNTANT.