Form	9	90	Return of Organization Exempt From In			OMB No. 1545-0047
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (exc		oundations	
		of the Treasury	Do not enter social security numbers on this form as it may be Go to www.irs.gov/Form990 for instructions and the latest int	•		Open to Public Inspection
			endar year, or tax year beginning $10/01/2022$ and ending		0.0	9/30/2023
<u> </u>			C Name of organization			er identification number
В с	heck if a	pplicable:	ALLIANCE FOR SUSTAINABLE ENERGY, LLC			
	Addres	ss change	Doing business as		26-19	39342
	Name o	change	Number and street (or P.O. box if mail is not delivered to street address) Roor	n/suite		one number
	Initial r		15013 DENVER WEST PARKWAY RSF041		(303)	275-3000
	Final re	eturn/terminated	City or town, state or province, country, and ZIP or foreign postal code		G Gross re	
	Amend	led return	GOLDEN, CO 80401			786,331,979.
	Applica	ation pending	F Name and address of principal officer: DR. MARTIN KELLER		s a group return rdinates?	
			15013 DENVER WEST PARKWAY, GOLDEN, CO 80401		all subordinates	included? Yes N
I.	Tax-ex	empt status:	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	lf	"No," attach a	a list. See instructions.
J	Websi	ite: WV	W.ALLIANCEFORSUSTAINABLEENERGY.ORG	H(c) Grou	up exemption	number
к	Form	of organization	on: Corporation Trust Association X Other LLC L Year of fo	rmation: 200	8 M State	e of legal domicile: DE
Pa	art I	Summ	hary			
	1	Briefly des	scribe the organization's mission or most significant activities: OPERATES THE N	ATIONAL	RENEWA	BLE
ce		ENERGY	LABORATORY TO DEVELOP ENERGY EFFICIENT TECHNOLOGIES	5.		
Activities & Governance						
ver		Check this				net assets.
Ğ			f voting members of the governing body (Part VI, line 1a)			15
s 8			f independent voting members of the governing body (Part VI, line 1b)			15
/itie			ber of individuals employed in calendar year 2022 (Part V, line 2a)			3,457
ctiv			ber of volunteers (estimate if necessary)			15
A			lated business revenue from Part VIII, column (C), line 12			NON
	b	Net unrela	ated business taxable income from Form 990-T, Part I, line 11			NON
			_	Prior Y		Current Year
e			ons and grants (Part VIII, line 1h)	671,91	2,744.	786,152,855
Revenue			service revenue (Part VIII, line 2g)		NONE	
Rev			nt income (Part VIII, column (A), lines 3, 4, and 7d)		67.	9,136
			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,288.	169,988
			nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	672,08		786,331,979
			d similar amounts paid (Part IX, column (A), lines 1-3)	2	22,645.	283,342
			aid to or for members (Part IX, column (A), line 4)	200 00	NONE	
ses			bther compensation, employee benefits (Part IX, column (A), lines 5-10)	397,08		468,991,619
Expenses			hal fundraising fees (Part IX, column (A), line 11e)		NONE	NON
Ext			Iraising expenses (Part IX, column (D), line 25) NONE		1 1 C O	200 556 040
			enses (Part IX, column (A), lines 11a-11d, 11f-24e)	269,08		309,556,940
			enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	666,18		778,831,901 7,500,078
se	19	Revenue	ess expenses. Subtract line 18 from line 12	ວ, ອອ eginning of Cu	4,206. urrent Year	7,500,078 End of Year
Net Assets or Fund Balances	20	Total acco	ts (Part X, line 16)	146,82		175,027,158
Asse Bal			lities (Part X, line 26)	142,31		170,531,686
let /			s or fund balances. Subtract line 21 from line 20		3,985.	4,495,472
	rt II		ture Block	1,51	5,205.	1,199,172
		<u> </u>		its. and to the	best of my	knowledge and belief. it i
true	, corre		riego, declare that I have examined this return, including accompanying schedules and statement plete. Declaration of preparer (other than officer) is based on all information of which preparer has a Contract of the statement o			
		Jenn	fer Logan	4	/16/202	.4
Sig		Signature of	ioB38449D	Da	te	
Her	e	MS. JE	NNIFER LOGAN CFO			
	ŀ		nt name and title			
		Print/Type	preparer's name Date Date	Che	ck if	PTIN
Paid		ADAM R	SMITH CPA (Idam & Dmith 04/16/20		employed	P00958966
•	oarer	Firm's page		Firm's Ell	N 4	4-0160260
Use	Only	Firm's add		Phone no		19-471-4290
May	the		iss this return with the preparer shown above? See instructions			X Yes No
			uction Act Notice, see the separate instructions.			Form 990 (2022
	•		· · · · ·			

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.
 Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (*e-file*). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see	instructions.		Taxpayer identification nur	mber (TIN)	
print	ALLIANCE FOR SUSTAINABLE ENE	RGV LLC		26-1939342	,	
File by the	Number, street, and room or suite no. If a P.O. b			20 1999912	1	
due date for	15013 DENVER WEST PARKWAY R	SF041				
filing your return. See	City, town or post office, state, and ZIP code. For		dress, see instructions.			
instructions.	GOLDEN, CO 80401	0	,			
Enter the R	eturn Code for the return that this applicatio	n is for (file	a separate application f	or each return)		01
Application		Return	Application			Return
Is For		Code	Is For			Code
Form 990 c	r Form 990-EZ	01	Form 1041-A			08
Form 4720	(individual)	03	Form 4720 (other that	in individual)		09
Form 990-P	F	04	Form 5227	,		10
Form 990-1	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-1	(trust other than above)	06	Form 8870			12
	- (acrocration)	07				
Telephor	s are in the care of ► SUSAN SCRIVER		IAY RSF041 GOLDE Fax No. ► h the United States, che			
 The bool Telephor If the org If this is to for the who 	ks are in the care of ► SUSAN SCRIVER 15013 DENVER WE The No. ► 303 275-3000 manization does not have an office or place of for a Group Return, enter the organization's for le group, check this box	f business ir our digit Gro If it is for pa	Fax No. ► h the United States, che pup Exemption Number	ck this box	If th	nis is
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 The bool Telephor If the org If this is if for the who a list with the 1 I requised for the X 2 If the X 3a If this nonree b If this 	As are in the care of ► <u>SUSAN</u> <u>SCRIVER</u> 15013 DENVER WE 15013 DENVER WE an No. ► <u>303</u> 275-3000 Janization does not have an office or place of for a Group Return, enter the organization's fill le group, check this box \blacktriangleright \blacksquare \blacksquare \blacksquare an automatic 6-month extension of time of e organization named above. The extension of calendar year 20 or tax year beginning 10 tax year entered in line 1 is for less than 12 is Change in accounting period application is for Forms 990-PF, 990-T fundable credits. See instructions. application is for Forms 990-PF, 990-T	f business ir our digit Gro If it is for pa <u>sion is for.</u> until is for the org /01_, 2022 months, chea , 4720, or	Fax No. ► In the United States, cher pup Exemption Number (art of the group, check for 08/15, 202 ganization's return for: , and ending ck reason: Initial r 6069, enter the ter 6069, enter any ref	ck this box	If th and at organizat 20 <u>23</u> .	ion return
 The bool Telephor If the org If this is for the who a list with the 1 I required for the b X 2 If the for the anonreside this b If this 	ks are in the care of ► <u>SUSAN_SCRIVER</u> 15013 DENVER WE 15013 DENVER WE The No. ► <u>303_275-3000</u> Janization does not have an office or place of for a Group Return, enter the organization's fille group, check this box \blacktriangleright []. The names and TINs of all members the extension the names and TINs of all members the extension the names and TINs of all members the extension of time of the organization named above. The extension of calendar year 20 or tax year entered in line 1 is for less than 12 is Change in accounting period application is for Forms 990-PF, 990-T fundable credits. See instructions. application is for Forms 990-PF, 990-T ated tax payments made. Include any prior year	f business ir our digit Gro If it is for pa sion is for. until s for the org /01 , 2022 months, cher , 4720, or ar overpayr	Fax No. ► In the United States, cher pup Exemption Number (art of the group, check for 08/15, 202 ganization's return for: 2, and ending ck reason: Initial r 6069, enter the ter 6069, enter any refinent allowed as a credit	ck this box	If th and at organizat 20 <u>23</u> .	ion return
 The bool Telephor If the org If this is for the who a list with the 1 I required for the b x 2 If the for the x 2 If the for the b If this estimation of the Balan 	As are in the care of ► <u>SUSAN</u> <u>SCRIVER</u> 15013 DENVER WE 15013 DENVER WE an No. ► <u>303</u> 275-3000 Janization does not have an office or place of for a Group Return, enter the organization's fill le group, check this box \blacktriangleright \blacksquare \blacksquare \blacksquare an automatic 6-month extension of time of e organization named above. The extension of calendar year 20 or tax year beginning 10 tax year entered in line 1 is for less than 12 is Change in accounting period application is for Forms 990-PF, 990-T fundable credits. See instructions. application is for Forms 990-PF, 990-T	f business ir our digit Gro If it is for pa sion is for. until s for the org /01_, 2022 months, cher , 4720, or ar overpayr nclude you	Fax No. ► the United States, che pup Exemption Number art of the group, check the 08/15, 202 ganization's return for: ck reason: Initial r 6069, enter the ter 6069, enter any ref nent allowed as a credit r payment with this f	ck this box	If th and at organizat 20 <u>23</u> . 	nis is tach ion return

instructions.

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

Form 8868 (Rev. 1-2022)

FED

Tax Return 3927QH		Return Type 990	
Taxpayer ALLIANCE FOR SUSTAIN	ABLE ENERGY, LLC	Account 5974	
Submitted Date	2023-11-15 11:12:1	4	
Acknowledgement Date	2023-11-15 11:32:5	4	
Status	Accepted		
Submission ID	8402272023319500	00004	

ALLIANCE	FOR	SUSTAINABLE	ENERGY,	LLC
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For	n 990 (202	2)				Page 2
Pa	art III	Statement of Program Se				
-	Daiothead			ny line in this Pa	rt III	Х
1		escribe the organization's n	NISSION:			
	SEE SC	HEDULE O				
2	Did the	organization undertake any	v significant program service	es during the y	ear which were not listed on	the
						Yes X No
	If "Yes,"	describe these new service	s on Schedule O.			
3	Did the	organization cease cond	ucting, or make significan	t changes in	how it conducts, any progr	
						Yes X No
		describe these changes on		a far aaab af	its three largest program of	niaco os mossurad hu
4	expense	s. Section 501(c)(3) and s		required to re	its three largest program se port the amount of grants ar	
4a	(Code:) (Expenses \$	777,735,962. including gra	nts of \$	283,342.) (Revenue \$	169,988.)
	· –	HEDULE O			/(
<u>4h</u>	(Code:) (Expanses \$	including gra	nts of \$) (Revenue \$)
70	(Coue) (Expenses ψ	Including gra	πισ οι φ) (Revenue \$)
4-	(C a d a :) (ت سمیر میروند)	in alu dia a saa	ata af f) (Revenue \$)
4C	(Code: _) (Expenses \$	including gra	nis or \$) (Revenue \$)
4d	-	ogram services (Describe o	-			
	(Expense		ing grants of \$) (Revenu	Je \$)	
4e	Total pro	ogram service expenses	777,735,962.			• • •
2E1	020 1.000					Form 990 (2022)
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_	90 (2022)		F	Page 3
Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	<u> </u>
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,			
-	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
-	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		37
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			37
9	<i>complete Schedule D, Part III</i> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8		X
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		v
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		X
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
u	complete Schedule D, Part VI	11a		х
h	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more	114		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
Ŭ	of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		х
Ь	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	L
JSA 2E1021	1.000	Form	990	(2022)

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Form **990** (2022) **9**

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-	90 (2022)		F	Page 4
Part	V 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			1
~~	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	23	х	
24 0	employees? If "Yes," complete Schedule J. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	~	
24a	\$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		
25 a	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		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,	21		
	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		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	22		v
33	<i>complete Schedule N, Part II</i> . Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and		37	
Part	 19? Note: All Form 990 filers are required to complete Schedule O. V Statements Regarding Other IRS Filings and Tax Compliance 	38	Х	
r ant	Check if Schedule O contains a response or note to any line in this Part V			
		•••	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b NONE			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?		Х	
JSA 2E1030				(2022)
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Form 990 (2022)

Page 5

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3,457			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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 Accounts (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 transaction?	5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit 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 contributions or			
	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 services 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			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11				
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-		
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 organization is licensed to issue gualified health plans			
		14a		x
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	140		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
		15		Λ
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	10		Δ
17				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form 9	90 (2022) ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939	342	F	Page 6
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		X
Sect	on A. Governing Body and Management		Yes	No
			res	NO
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15 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	-		
b	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	80	Х	
a	The governing body?	8a 8b	X	
b	Each committee with authority to act on behalf of the governing body?	00	А	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i> .	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	-	.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	16a		Х
h.	with a taxable entity during the year?	Tua		
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed <u>CA, NY</u> ,			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	F (sec	tion 5	01(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)	. (000		0.(0)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or and financial statements available to the public during the tax year.	of inter	rest p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and record SUSAN SCRIVER 15013 DENVER WEST PARKWAY RSF041 GOLDEN, CO 80401			
JSA 2E1042	303-275-3000 1.000	Form	990	(2022)
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-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 nor any related organization compensated any current officer, director, or trustee.

(iist any hours for related organizations below dotted line)0 a related organizations below dotted line)0 a related organizations below dotted line)0 a related organizations below dotted line)0 a related organizations below dotted line)0 a related organizations below dotted line)0 related organizations related organizations related organizations below dotted line)0 related organizations related organizations related organizations related organizations related organizations related organizations related organizations related organizations related organizations related organizations related organizations related organizations related organizations related organization related related organization related related organization related related related related related related related related related related related <br< th=""><th></th></br<>	
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(7) DR. WILLIAM TUMAS 40.00	
	18.
ABSOCIATE LAD DIRECTOR INUNE A 4/1,932. NONE 1	12.
(8) MR. WILLIAM FARRIS 40.00	
ASSOCIATE LAB DIRECTOR NONE X 467,033. NONE -15,90)1.
(9) MR. JOHN STOLPA 40.00	
SECRETARY NONE X 429,973. NONE -29,11	.2.
(10) MS. JENNIFER LOGAN 40.00	
CFO NONE X 365,394. NONE 31,89	<i>)</i> 0.
(11) DR. MARK PETERS 1.00	
CHAIRMAN OF THE BOARD NONE X X NONE NONE NONE NO	ONE
(12) MR. EDWARD C. ANDERSON JR. 1.00	
BOARD MEMBER NONE X NONE NONE NONE NO	ONE
(13) DR. ROBERT ARMSTRONG 1.00	
BOARD MEMBER - THRU 6/27/23 NONE X NONE NONE NONE	ONE
(14) MS. REACHEL BEICHLEY 1.00	
BOARD MEMBER - THRU 5/15/23 NONE X NONE NONE NONE NO	ONE

Form 990 (2022) Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	nplo	ove	es.	and H	lia	hest Compensat	ed Employees (a	Page 8
(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average hours per week (list any hours for	box,	unle: er an	heck ss pe d a c	erson lirect	e than c is both or/trust	an ee)	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15) DR. WALTER COPAN	1.00									
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(<u>16</u>) <u>DR. YI CUI</u>	1.00	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(17) DR. DEAN GRAY	1.00	-								
BOARD MEMBER - THRU 2/10/23	NONE	X						NONE	NONE	NONE
(18) MR. TODD HARRINGTON	1.00	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(<u>19</u>) DR. ALAN A. RUDOLPH	1.00	-								
BOARD MEMBER - THRU 7/1/23	NONE	X						NONE	NONE	NONE
(20) DR. MASSIMO RUZZENE	1.00	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(21) MS. LEANNE STRIBLEY	1.00	-								
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(22) MR. MATT VAUGHAN	1.00	_								
BOARD MEMBER	NONE	X						NONE	NONE	NONE
(23) MS. KRISTINE WERKING	1.00	_								
BOARD MEMBER	NONE	Х						NONE	NONE	NONE
(24) DR. WILLIAM JEFFREY	1.00									
BOARD MEMBER - STARTING 3/6/23	NONE	Х						NONE	NONE	NONE
(25) DR. CHRISTA JOHNSON	1.00									
BOARD MEMBER - STARTING 7/2/23	NONE	Х						NONE	NONE	NONE
1b Sub-total								5,265,945.	NONE	138,315.
c Total from continuation sheets to Part VII,	Section A							NONE	NONE	NONE
d Total (add lines 1b and 1c)						<u></u> .		5,265,945.	NONE	138,315.
2 Total number of individuals (including but no reportable compensation from the organization		hose					o re	ceived more than	\$100,000 of	

	reportal	ole compensa	tion from the	organization	
--	----------	--------------	---------------	--------------	--

3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated	
	employee on line 1a? If "Yes," complete Schedule J for such individual	3
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	
	individual	4
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual	
	for services rendered to the organization? If "Yes," complete Schedule J for such person	5
~		

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Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of 1 compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address	(C) Compensation	
2	Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ►		

Yes No

Form 990 (2022) Part VII Section A. Officers, Directors, Tr	ustees Ke	v Fn	nlo		96	and H	lia	hest Compensat	ed Employ		ontinue		Page 8
(A)	(B)		ipic		cs, C)		ng	(D)		yees (c	Untinue	(F)	
Name and titleAverage hours per week (list anyPositionReportable compensation 							an	timated nount of other	f				
	hours for related organizations below dotted line)	Ind or o	a Institutional trustee	a Officer	Key employee	Highest compensated	e) Former	the organization (W-2/1099-MISC)	organiza (W-2/1099		fro orga and	pensatio om the anizatio d related anizatior	in d
26) DR. AMY MANNING-BOG BOARD MEMBER - THRU 3/5/23	1.00 NONE	x						NONE		NONE			NON
27) MR. LUKE MCGLYNN BOARD MEMBER -STARTING 5/16/23	1.00 NONE	x						NONE		NONE			NONI
28) DR. ROBERT STONER BOARD MEMBER -STARTING 6/28/23	1.00 NONE	x						NONE		NONE			NON
29) DR. IAN COLRAIN VICE CHAIRMAN OF THE BOARD	1.00 NONE	x		x				NONE		NONE			NON
30) MR. RICHARD THOMAS FLEENER BOARD MEMBER - THRU 12/31/22	1.00 NONE	x						NONE		NONE			NONI
31) MR. MARTIN NEVSHEMAL BOARD MEMBER -STARTING 1/1/23	<u>1.00</u> NONE	x						NONE		NONE			NONI
		-											
		-											
 1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) 2 Total number of individuals (including but not reportable compensation from the organization) 	limited to t		•••	•••			► ► •	eceived more than	\$100,000	of			
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Sched											3	Yes	No X
4 For any individual listed on line 1a, is the organization and related organizations gr	sum of represented	portab 1 \$15	ole o 50,0	com 00?	per P <i>lt</i>	nsation <i>"Ye</i> s	па s,"	nd other compension of the complete schedu	sation from	the	4	37	
 <i>individual</i> 5 Did any person listed on line 1a receive or for services rendered to the organization? <i>If "</i>Y 	accrue co	mpen	sati	on	fron	n any	un	related organization	on or indivi		4	X	X
Section B. Independent Contractors	· · · ·												
 Complete this table for your five highest con compensation from the organization. Report of year. 													
(A) SEE SCHEDULE O Name and business ad	dress							(B) Description of se	ervices	С	(C) ompens	sation	
							\vdash						

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **>** 277 JSA 2E1055 1.000

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Par	t VII						
		Check if Schedule O contains a respon	ise or note to ar	-			•••••
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1a b c d e f g	Federated campaigns1aMembership dues1bFundraising events1cRelated organizations1dGovernment grants (contributions)1eAll other contributions, gifts, grants, and similar amounts not included above1fNoncash contributions included in lines 1a-1f1g	786,152,855.				
an Co	h	Total. Add lines 1a-1f		786,152,855.			
			Business Code				
Program Service Revenue	2a b c d						
ò	е						
₽.	f	All other program service revenue					
	<u></u> з	Total. Add lines 2a-2f Investment income (including dividends, other similar amounts)	interest, and	NONE 9,136.			9,136.
	4	Income from investment of tax-exempt bond	proceeds .	NONE			
	5	Royalties		169,988.	169,988.		
	6a b c	Gross rents 6a Less: rental expenses 6b Rental income or (loss) 6c	(ii) Personal				
	d	Net rental income or (loss)		NONE			
enue	7a b	Gross amount from (i) Securities sales of assets other than inventory 7a Less: cost or other basis and sales expenses . 7b	(ii) Other				
Rev	с	Gain or (loss)					
Other Rev	d 8a	events (not including \$ of contributions reported on line 1c). See Part IV, line 18	NONE				
	b C	Less: direct expenses 8b Net income or (loss) from fundraising events		NONE			
	9a	Gross income from gaming activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses	NONE				
	С	Net income or (loss) from gaming activities.	• • • • • • • •	NONE			
	10a b	Gross sales of inventory, less returns and allowances Less: cost of goods sold	NONE	1			
	c	Net income or (loss) from sales of inventory	<u></u> .	NONE			
sn			Business Code				
leol	11a						
llan /en	b						
Miscellaneous Revenue	C d						
Ň	d	All other revenue	L	NONE			
	<u>е</u> 12	Total revenue. See instructions		786,331,979.	169,988.	NONE	9,136.
					,		2,200.

Part IX Statement of Functional Expenses

Check if Schedule O contains a resp				
Do not include amounts reported on lines 6b, 7b, 3b, 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	283,342.	283,342.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	NONE			
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE NONE			
5 Compensation of current officers, directors,	NONE			
trustees, and key employees	2,903,301.	2,272,024.	631,277.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and	NONE			
persons described in section 4958(c)(3)(B)7 Other salaries and wages	363,236,478.	363,222,144.	14,334.	
	36,625,129.	36,625,129.		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	50,025,127.	50,025,127.		
9 Other employee benefits	39,079,885.	39,079,885.		
9 Other employee benefits 10 Payroll taxes	27,146,826.	27,146,826.		
11 Fees for services (nonemployees):	2,7210,0201			
a Management	NONE			
b Legal	2,088,106.	2,088,106.		
c Accounting	84,012.	84,012.		
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17	NONE			
f Investment management fees	NONE			
g Other. (If line 11g amount exceeds 10% of line 25, column				
(A), amount, list line 11g expenses on Schedule O.)	11,121,718.	11,001,842.	119,876.	
2 Advertising and promotion	NONE			
3 Office expenses	3,066,004.	2,761,745.	304,259.	
4 Information technology	28,223,541.	28,223,541.		
15 Royalties	122,840.	122,840.		
6 Occupancy	10,178,178.	10,178,178.		
7 Travel	10,595,972.	10,594,279.	1,693.	
8 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	NONE			
9 Conferences, conventions, and meetings	6,008,966.	6,008,966.		
20 Interest	338,798.	338,798.		
21 Payments to affiliates	NONE	455.000		
2 Depreciation, depletion, and amortization	477,239.	477,239.		
23 Insurance	NONE			
24 Other expenses. Itemize expenses not covered				
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.)				
	173,565,681.	173,541,181.	24,500.	
a SUBCONTRACTS b LAB EQUIPMENT AND SUPPLIES	44,623,769.	44,623,769.	27,500.	
c MAINTENANCE AND REPAIR	14,636,878.	14,636,878.		
d DUES AND SUBSCRIPTIONS	4,425,238.	4,425,238.		
e All other expenses	1,123,230.	.,		
25 Total functional expenses. Add lines 1 through 24e	778,831,901.	777,735,962.	1,095,939.	NO
 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if 	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	1,000,000.	100.

2E1052 1.000

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following SOP 98-2 (ASC 958-720)

Form **990** (2022)

ALLIANCE FOR SUSTAINABLE ENERGY, LLC

Page

	990 (2				Page 11
Pa	rt X				
		Check if Schedule O contains a response or note to any line in this Pa	art X		<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	772,316.	1	1,677,237
	2	Savings and temporary cash investments	5,108,877.	2	5,019,179
	3	Pledges and grants receivable, net	NONE	3	NON
	4	Accounts receivable, net	127,419,516.	4	153,203,224
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE	5	NON
	6	Loans and other receivables from other disqualified persons (as defined			
	-	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NON
S	7	Notes and loans receivable, net	NONE		NON
Assets	8	Inventories for sale or use	163,327.	8	159,314
As	9	Prepaid expenses and deferred charges	12,471,152.		12,503,220
	-	Land, buildings, and equipment: cost or other	, , ,	-	, ,
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation	NONE	10c	
	11	Investments - publicly traded securities.	NONE		NON
	12	Investments - other securities. See Part IV, line 11.	NONE		NON
	13	Investments - program-related. See Part IV, line 11	NONE		NON
	14	Intangible assets	NONE		NON
	15	Other assets. See Part IV, line 11	890,183.		2,464,984
	16	Total assets. Add lines 1 through 15 (must equal line 33)	146,825,371.		175,027,158
_	17	Accounts payable and accrued expenses	97,676,311.		119,855,710
	18	Grants payable			NON
	10	Deferred revenue	NONE		NON
	20		NONE		NON
	20 21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D	NONE		NON
	22	Loans and other payables to any current or former officer, director,	NOINE	21	INOIN
	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE	22	NON
LIa	23	Secured mortgages and notes payable to unrelated third parties	NONE		NON
	23 24	Unsecured notes and loans payable to unrelated third parties			
			NONE	24	NON
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	<i>11 625 075</i>	25	
	26	Total liabilities. Add lines 17 through 25.	44,635,075.	25	50,675,976
	20		142,311,386.	26	170,531,686
Ses		Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.			
and	27	Net assets without donor restrictions	4 512 005	07	4 405 470
Ra	27		4,513,985.	27	4,495,472
	28	Net assets with donor restrictions.	NONE	28	NON
Ī		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
Net Assets or Fund Balances	20				
its	29 20	Capital stock or trust principal, or current funds		29	
SSG	30 24	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ϋ́	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ne	32	Total net assets or fund balances	4,513,985.	32	4,495,472.
- 1	33	Total liabilities and net assets/fund balances	146,825,371.	33	175,027,158.

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ALLIANCE	FOR	SUSTAINABLE	ENERGY,	LLC
			•	

Form 99	00 (2022)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	786	, 3	31,	<u>979</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2	778	, 8	31,	<u>901</u> .
3	Revenue less expenses. Subtract line 2 from line 1	3	7	, 5	00,	<u>078</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4	, 5	13,	<u>985</u> .
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-7	',5	18,	<u>591</u> .
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	4	, 4	95,	<u>472</u> .
Part						
	Check if Schedule O contains a response or note to any line in this Part XII			• •		
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain (on			
	Schedule O.					
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 com	piled	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	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited	ed on	a			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis X Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	-			37	
	the audit, review, or compilation of its financial statements and selection of an independent accountar		· · -	2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fort			20		v
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under			3b		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	uits 🛯		วม		<u> </u>

Form **990** (2022)

SCHEDULE	A
(Form 990)	

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.

OMB No. 1545-0047 G

Department of the Treasury Internal Revenue Service			Go to www.irs.gov/Form990 for instructions and the latest information.						
Nam	e of the organization						Employer identif		
ALI	LIANCE FOR SUS	TAINABLE	ENERGY, LLC				26-1	939342	
Ра	rt I Reason fo	r Public Ch	arity Status. (All	organizations must	comple	ete this p	part.) See instruction	าร.	
The	organization is not	a private fou	ndation because it	t is: (For lines 1 throu	gh 12, ch	eck only	one box.)		
1				tion of churches desc			70(b)(1)(A)(i).		
2				. (Attach Schedule E	-				
3		-	-	rganization described					
4		-		conjunction with a ho	spital de	scribed ir	n section 170(b)(1)(A)(iii). Enter the	
_	hospital's nam	•							
5		-		a college or universi	ty owned	d or ope	erated by a governme	ental unit described in	
~			Complete Part II.)	romontol unit do coribo	م ای م م م	ion 170/	L\/4\/A\/\		
6 7		-	-	rnmental unit describe		-		om the general public	
')(1)(A)(vi). (Compl	-	ipport in	Jili a yu		oni the general public	
8				o)(1)(A)(vi). (Complete	Part II)				
9			-	ed in section 170(b)(1		nnerated	l in conjunction with a	land-grant college	
Ŭ			-	griculture (see instruc		-			
	university:		grant conogo or a	g				i ilio concigo ci	
10	An organizatio	n that norma	Illy receives (1) mo	ore than 331/3 % of its	support	from cor	ntributions, membersh	hip fees, and gross	
	support from g	receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses							
				975. See section 509					
11	<u> </u>	0		usively to test for publ	2			rry out the purposes of	
12		-	-	-	-			ction 509(a)(3). Check	
			-	bes the type of support		-			
а		-					-	-	
		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 o	rganization.	You must complet	te Part IV, Sections A	and B.				
b	Type II. A su	pporting org	anization supervis	ed or controlled in co	nnectior	with its	supported organizati	on(s), by having	
	control or ma	anagement o	of the supporting c	organization vested in	the sam	e persor	ns that control or mar	hage the supported	
		-	-	, Sections A and C.					
С		-		ng organization opera				lly integrated with,	
		-		ns). You must comple					
d				porting organization on nization generally must					
		-		omplete Part IV, Sect			-	u an allenliveness	
е		-		a written determination				II Type III	
•		-		tionally integrated sup				, .) Þ o	
f				· · · · · · · · · · · · · ·					
g	Provide the follow	ing information	on about the supp	orted organization(s).					
	(i) Name of supported o	rganization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of	
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)	
					Yes	No			
(A)									
(B)									
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
(C)									
(D)									
(E)									
Tota	al								
								1	

Schedule A (Form 990) 2022

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	493,545,097.	546,285,329.	602,878,882.	671,912,744.	786,152,855.	3,100,774,907.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	493,545,097.	546,285,329.	602,878,882.	671,912,744.	786,152,855.	3,100,774,907.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						NONE
6	Public support. Subtract line 5 from line 4						3,100,774,907.
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	493,545,097.	546,285,329.	602,878,882.	671,912,744.	786,152,855.	3,100,774,907.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,483.	31,888.	67,531.	169,355.	179,124.	452,381.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						NONE
11	Total support. Add lines 7 through 10						3,101,227,288.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here.	<u></u>	<u></u>				
Sec	tion C. Computation of Public Supp		•				
14	Public support percentage for 2022 (lin		,. ,			14	99.99 %
15	Public support percentage from 2021					15	99.99 %
16a	331/3% support test - 2022. If the org	-					
	box and stop here. The organization qu	•		•			
b	331/3% support test - 2021. If the org						
	this box and stop here. The organization	-		-			
17a	10%-facts-and-circumstances test - 2		-				
	10% or more, and if the organization						
	Part VI how the organization meets t			•	•		
h	organization						
D		•					
	15 is 10% or more, and if the organiz in Part VI how the organization meets					-	
	organization			•			
18	Private foundation. If the organization						
10	-						
	instructions						<u>••••</u>

Schedule A (Form 990) 2022

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Page 3

Schedule A	(Form	000	2022
Schedule A		990) ZUZZ

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.)

16 Public support percentage from 2021 Schedule A, Part III, line 15	Sec	tion A. Public Support						
researd. (Denot includes any 'unsust greats') Some completion advancementandexis solid or services performed, or ballies turnised in any advancementandexis some accepted from ad	Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
2 Costs receipts from definitions within the second purpose	1	Gifts, grants, contributions, and membership fees						
soft or services publications of the interest		received. (Do not include any "unusual grants.")						
timeled in any anisy halls instead to the organization's the endits are at a unrelied trade of business under action 513	2	Gross receipts from admissions, merchandise						
a Gross receipts to excluse status of a set on an unvested trade or business under sectors 51 a.		sold or services performed, or facilities						
3 Gross receipts from activities had are not an unrelated fade or business under section 513 .		furnished in any activity that is related to the						
unvestion take or taskes under sector 513. Image: Constraint of the sector of the organization's benefit and either paid to organization's benefit and e		organization's tax-exempt purpose						
unrelated induce of tables sound a section 513 . Image: the section 513 . Image: the section 513 . 4 Tax revenues lowed for the organization's benefit and either paid to organization's benefit and either paid to or expended on its behalt	3	Gross receipts from activities that are not an						
or expanded on its behalf								
or expended on its behalf	4	Tax revenues levied for the						
or expended on its behalf		organization's benefit and either paid to						
furnished by a governmental unit to the organization without charge		•						
or ganization window charge	5	The value of services or facilities						
or ganization window charge		furnished by a governmental unit to the						
7a Amounts included on lines 1, 2, and 3 received from disquilified persons b Amounts included on lines 2 and 3 received from other than disquilified 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		organization without charge						
7a Amounts included on lines 1, 2, and 3 received from disquilified persons b Amounts included on lines 2 and 3 received from other than disquilified 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	6							
received from disqualified persons b and the stand and the stan	7a							
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year image: image								
persons that exceed the greater of \$5,000 i i i or 1% of the amount on line 13 for the year i i i a Public support. i i i i Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 9 Amounts from line 6,	b							
or 1% of the amount on line 13 for the year								
c Add lines 7a and 7b. Image: Support. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 9 Amounts from line 6. Image: Support Percentage 10 Versum Support Support Support Percentage Image: Support Support Support Support Percentage 11 Versum Support Support Percentage Support Support Percentage Image: Support Support Support Support Percentage Support Support Percentage Support Support Percentage Support Support Percentage For 2022 (Ima Support Support Support Percentage For 2022 (Ima Support S								
8 Public support. (Subtract line 7c from line 6). Intend. Intend. 10 6.1 Section B. Total Support (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 9 Amounts from line 6,	с							
line 6,								
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 9 Amounts from line 6,								
Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 9 Amounts from line 6	Sec							
9 Amounts from line 6			(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
10a Gross income from interest, dividends, payments received on securities loans, rents, royalities, and income from similar sources								
reits, royalties, and income from similar sources		Gross income from interest, dividends,						
sources								
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
section 511 taxes) from businesses acquired after June 30, 1975	b							
acquired after June 30, 1975		section 511 taxes) from businesses						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. 12 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage form 2021 Schedule A, Part III, line 15. 16 Og 26ction D. Computation of Investment Income Percentage 17 Investment income percentage form 2021 Schedule A, Part III, line 17. 18 Investment income percentage form 2021 Schedule A, Part III, line 17 19 331/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . 19 331/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . 10 Private foundation. If the organization did not check a box on line 14, or 19b, check this box and sein structions . </td <td></td> <td>,</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		,						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. 12 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 16 O 26ction D. Computation of Investment Income Percentage 17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 18 Investment income percentage for 2021 Schedule A, Part III, line 17 19 331/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . 18 is more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . 19 331/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported o	с	Add lines 10a and 10b						
or not the business is regularly carried on. 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
or not the business is regularly carried on. 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		activities not included on line 10b, whether						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Image: Computation of Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) Image: Computation of Part VI.) Image: Computation of Part VI.) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Image: Computation of Public Support Percentage 15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) Image: Computation of Investment Income Percentage 16 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) Image: Computation of Investment Income Percentage 17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) Image: Computation of Investment Income Percentage 18 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) Image: Computation of Investment Income Percentage 17 Investment income percentage for 2021 Schedule A, Part III, line 17 Image: Computation of Investment Income Percentage 18 Investment income percentage for 2021. If the organization did not check a box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization .								
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(Complete only if you checked a box on line 12 of 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")? If "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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 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.**
- **b** 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.*
- **10 a** 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

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

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Schedule A (Form 990) 2022

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Page 5

1

2

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	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 detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations			
			Yes	No

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 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.
- 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.

Section C. Type II Supporting Organizations

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 1

Section 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?				
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? <i>If "No," explain in Part VI how</i>				
	the organization maintained a close and continuous working relationship with the supported organization(s).				
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If</i> "Yes," <i>describe in Part VI</i> the role the organization's				
	supported organizations played in this regard.				

Section 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	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>					
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instru	uction	s).		
		[Yes	No		
2	Activities Test. Answer lines 2a and 2b below.					
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of					

u	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.					

- 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.
- 3 Parent of Supported Organizations. *Answer lines 3a and 3b below.*
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

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Schedule A (Form 990) 2022

2a

2b

3a

3b

Schedule A (Form 990) 2022 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See 1 instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 2 3 3 Other gross income (see instructions) 4 Add lines 1 through 3. 4 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of 6 property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 4 see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 6 7 7 Recoveries of prior-year distributions 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1. 2

3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 4 Enter greater of line 2 or line 3. 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2022

Schedu	le A (Form 990) 2022				Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)		
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide 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	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ns	(iii) Distributable Amount for 2022
_1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required - <i>explain in Part VI).</i> See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI.</i> See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
0	and 4c. Breakdown of line 7:				
8					
 	Excess from 2018				
b	Excess from 2019				
 d	Excess from 2020 Excess from 2021				
	Excess from 2021				
e					

Schedule A (Form 990) 2022

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

OMB No. 1545-0047

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

Employer identification number

ALLIANCE FOR SUSTAINAE	ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939342					
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation				
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ion				
	501(c)(3) taxable private foundation					

Check if your organization is covered by the General Rule or a Special Rule.

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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

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

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3927QH 5974 04/16/2024 16:35:15

Name of organization Employer identification number ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939342 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Х 1 N/A Person Payroll \$ 786,152,855. Noncash (Complete Part II for noncash contributions.) (b) (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person Payroll \$ Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Page 2

Page		m 990) (2022)		
identification number		ization	Name of org	
6-1939342	26-	ALLIANCE FOR SUSTAINABLE ENERGY, LLC		
needed.	Part II if additional space is ne	oncash Property (see instructions). Use duplicate copies	Part II	
(d) Date received	(c) FMV (or estimate) (See instructions.)	(b) Description of noncash property given	(a) No. from Part I	
	 \$			
(d) Date received	(c) FMV (or estimate) (See instructions.)	(b) Description of noncash property given	(a) No. from Part I	
	 \$			
(d) Date received	(c) FMV (or estimate) (See instructions.)	(b) Description of noncash property given	(a) No. from Part I	
	 \$			
(d) Date received	(c) FMV (or estimate) (See instructions.)	(b) Description of noncash property given	(a) No. from Part I	
	 \$			
(d) Date received	(c) FMV (or estimate) (See instructions.)	(b) Description of noncash property given	(a) No. from Part I	
	 \$			
(d) Date received	(c) FMV (or estimate) (See instructions.)	(b) Description of noncash property given	(a) No. from Part I	
	(c) FMV (or estimate) (See instructions.) (See instructions.) (C) FMV (or estimate) (See instructions.) (See instructions.) (See instructions.) (See instructions.)	(b) Description of noncash property given (b) Description of noncash property given	(a) No. from Part I (a) No. from Part I (a) No. from	

Schedule B (Form 990) (2022)

Schedule B	(Form 990) (2022)			Page 4	
Name of or	rganization			Employer identification number	
	ALLIANCE FOR SUSTAINA			26-1939342	
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if additi	the year from any ons completing Par e year. (Enter this in	one contributor. C t III, enter the total of formation once. Se	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	Transferee's name, address, a	(e) Transf and ZIP + 4	-	hip of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	Transferee's name, address, a	(e) Transf and ZIP + 4	_	hip of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
		(e) Transf	er of gift		
	Transferee's name, address, a		ransfer of gift Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	Transferee's name, address, a	(e) Transf and ZIP + 4	_	hip of transferor to transferee	
JSA				Schedule B (Form 990) (2022)	

(5)					-
(6)					-
For Paperwork	Reduction	Act Notice se	a the Instructions	for Form 990 c	000_F7
For Paperwork	Reductior	n Act Notice, se	e the Instructions	for Form 990 c	or 990-EZ.
For Paperwork	Reductior	n Act Notice, se	e the Instructions	for Form 990 c	or 990-EZ.
For Paperwork	Reductior	n Act Notice, se	e the Instructions	for Form 990 c	or 990-EZ.
·	Reductior	n Act Notice, se	e the Instructions	for Form 990 c	990-EZ.

Politica	Campaign and	d Lobbvinc	Activities	

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.

Internal Revenue Service 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.

SCHEDULE C

Department of the Treasury

(Form 990)

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

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

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

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

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

Nam	e of organization	Employer identification	number	
ALI	LIANCE FOR SUSTAINABLE ENERGY, LLC	26-1939342		
Pa	rt I-A Complete if the organization is exempt under section 501(c) or is a section	on 527 organization	-	
1	Provide a description of the organization's direct and indirect political campaign activi	ities in Part IV. See	instructi	ons for
	definition of "political campaign activities."			
2	Political campaign activity expenditures. See instructions	\$		
3	Volunteer hours for political campaign activities. See instructions			
Par	t I-B Complete if the organization is exempt under section 501(c)(3).			
1	Enter the amount of any excise tax incurred by the organization under section 4955	\$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		Yes	No
4a	Was a correction made?		Yes	No
b	If "Yes," describe in Part IV.			
Par	rt I-C Complete if the organization is exempt under section 501(c), except sect	tion 501(c)(3).		
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities			
2	Enter the amount of the filing organization's funds contributed to other organizations for sec 527 exempt function activities			
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-P line 17b	POL,		
4	Did the filing organization file Form 1120-POL for this year?		Yes	No

Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Schedule C (Form 990) 2022



Sch	edule C (Form 990) 2022 ALLIAN	CE FOR SUSTAINABLE ENERGY, LLC	26	-1939342 Page 2
Pa	art II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) a	nd filed Form 5768 (ele	ction under
Α		ongs to an affiliated group (and list in Part IV of excess lobbying expenditures).	each affiliated group mem	ber's name, address,
В	Check if the filing organization che	ecked box A and "limited control" provisions a	apply.	
		ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	public opinion (grassroots lobbying)		
b	• Total lobbying expenditures to influence	a legislative body (direct lobbying)		
С	: Total lobbying expenditures (add lines 1a	a and 1b)		
d	Other exempt purpose expenditures		778,831,901.	
е	e Total exempt purpose expenditures (add	I lines 1c and 1d)	778,831,901.	
f	Lobbying nontaxable amount. Enter the	e amount from the following table in both		
	columns.		1,000,000.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	<u>).</u>	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25	% of line 1f)	250,000.	
h	Subtract line 1g from line 1a. If zero or le	ss, enter -0-		
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0-		
j	If there is an amount other than zero	on either line 1h or line 1i, did the organi	zation file Form 4720	
	reporting section 4911 tax for this year?			Yes X No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total			
2a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.			
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.			
С	Total lobbying expenditures								
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.			
е	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.			
f	Grassroots lobbying expenditures								

Schedule C (Form 990) 2022

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

F ar	For each "Was" response on lines to through the below provide in Part IV a datailed		a)	(b)	
	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.			Amount	
1	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 b c	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d e	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?				
f g	Grants to other organizations for lobbying purposes?				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
j 2a	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b c d	If "Yes," enter the amount of any tax incurred under section 4912 . If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	section	

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			

 Part III-B
 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

 1
 Due sectore and similar exempts from members

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		
	political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
	Carryover from last year.		
	Total	-	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditures next year?	4	
5	Taxable amount of lobbying and political expenditures. See instructions.		

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEE	DULE D
(Form	990)

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. **Open to Public** Inspection

2

OMB No. 1545-0047

Name	of the	organization	
------	--------	--------------	--

Department of the Treasury

Internal Revenue Service

JSA 2E1268 1.000 أكلكم ملما يرمينهم ومرام

Nam	e or the organization	Employer identification number
ALI	LIANCE FOR SUSTAINABLE ENERGY, LLC	26-1939342
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(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 writing that the assets held in	
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fur	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for an	
	conferring impermissible private benefit?	YesNo
Pa	rt I Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (for example, recreation or education)	f a historically important land area
	Protection of natural habitat Preservation o	f a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in t	he form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С		2c
d	Number of conservation easements included in (c) acquired after July 25, 2006, and not on	
		2d
3	Number of conservation easements modified, transferred, released, extinguished, or termin	
Ū	tax year	ated by the organization during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspectio	n handling of
Ū	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing c	
Ū		enconvation bacomonic during the your
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing cor	nservation easements during the year
•		loor valion ousemente dannig the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	p(170(b)(4)(B)(i))
Ū	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its rev	
9	balance sheet, and include, if applicable, the text of the footnote to the organization's fina	-
	organization's accounting for conservation easements.	inclar statements that describes the
Pa	Int III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets
10	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	ommar Assets.
		states and the large should be also be at some the
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue of art, historical treasures, or other similar assets held for public exhibition, education, c	statement and balance sneet works or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes the	ese items.
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue sta	
	art, historical treasures, or other similar assets held for public exhibition, education, or resea	arch in furtherance of public service,
	provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	\$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar as	ssets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1.	
b	Assets included in Form 990, Part X.	
For	Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2022

Scheo	lule D (Form 990) 2022 ALI	IANCE 1	FOR SUS	STAINAB	LE ENER	GY, LI	ЪС			26-1	939342	Page 2
Ра	rt III Organizations Maintain							Other	Similar A	ssets (C	ontinuec	1)
3	Using the organization's acquisition	on, acces	sion, and	other rec	ords, che	ck any d	of the	follow	ving that m	ake sign	ificant us	e of its
	collection items (check all that app	oly):										
а	Public exhibition			d [Loan	or exch	ange	prograi	m			
b	Scholarly research			e	Othe	r						
С	Preservation for future gene	rations										
4	Provide a description of the orga	nization's	collection	ns and ex	plain how	they fu	rther	the org	ganization's	s exempt	purpose	in Part
	XIII.											
5	During the year, did the organization	on solicit c	or receive	donations	of art, his	torical ti	reasu	res, or o	other simila	ar		
	assets to be sold to raise funds rati	her than to	be main	ntained as	part of the	organiz	ation'	s colled	ction?		Yes	No
Ра	rt IV Escrow and Custodial A	rrangem	ents.									
	Complete if the organiza	ation ansv	wered "Y	es" on F	orm 990,	Part IV,	, line	9, or r	eported ar	n amoun	t on For	m
	990, Part X, line 21.											
1a	Is the organization an agent, trus	stee, custo	odian or	other inte	rmediary	for cont	ributi	ons or	other asse	ets not		
	included on Form 990, Part X?										Yes	No
b	If "Yes," explain the arrangement i	in Part XII	I and com	nplete the	following ta	able:						
										Amount		
С	Beginning balance						1c					
d	Additions during the year						1d					
е	Distributions during the year						1e					
f	Ending balance						1f					
2a	Did the organization include an am						or cu	stodial	account lial	bility?	Yes	No
b	If "Yes," explain the arrangement i										 	
	rt V Endowment Funds.											
	Complete if the organization	ation ans	wered "Y	/es" on F	orm 990,	Part IV	, line	10.				
	· · · · ·	(a) Cur	rent year	(b) F	rior year	(c) Tw	/o year	s back	(d) Three ye	ears back	(e) Four ye	ars back
1a	Beginning of year balance											
h	Contributions											
c	Net investment earnings, gains,											
U	and losses											
d	Grants or scholarships											
	Other expenditures for facilities											
C	and programs											
f	Administrative expenses											
, ,	End of year balance											
g 2	Provide the estimated percentage	of the cu	rront voa	r and hala	aco (lino 1)		a (a))	hold as				
2 a	Board designated or quasi-endown		iteni yeai	%		, colum	r (a))		•			
b	Permanent endowment	%										
c	Term endowment %											
	The percentages on lines 2a, 2b, a		ould equa	l 100%.								
3a	Are there endowment funds not in				zation tha	t are he	ld and	d admir	nistered for	the		
	organization by:			J							Y	es No
	(i) Unrelated organizations										3a(i)	
	(ii) Related organizations										3a(ii)	
b	If "Yes" on line 3a(ii), are the relat										3b	
4	Describe in Part XIII the intended	•										
Ра	rt VI Land, Buildings, and Eq Complete if the organiz											
	Complete if the organiz	ation ans										
	Description of property			or other basis estment)		t or other b (other)	asis		cumulated eciation	(d)	Book value	Ð
1a	Land											
b	Buildings											
с	Leasehold improvements	F										
d	Equipment	F										
е	Other											
Tota	I. Add lines 1a through 1e. (Columi	n (d) must	equal Fo	rm 990, Pa	art X, colur	nn (B), lii	ne 10	c.)				

Schedule D (Form 990) 2022

Part VII	Investments - Other Securities.			
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11b. See Form 990, Part X, line 12.	
	 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financia	I 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" on Form 990	, Part IV, line 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11d. See Form 990, Part X, line 15.	
	(a) De	scription	(b) Book value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	ımn (b) must equal Form 990, Part X, col. (B) l	ine 15.)		
Part X	Other Liabilities. Complete if the organization answered line 25.	"Yes" on Form 990	, Part IV, line 11e or 11f. See Form 990, Part X,	
1.		tion of liability	(b) Book value	
	al income taxes			
(2)ADVANC			50,675,976	
(3)				÷
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 25.)		50,675,976	
			the organization's financial statements that reports the	·

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . JSA 2E1270 1.000

	IN ALLIANCE FOR SUSTAINABLE ENERGY, LLC	26	-1939342 Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	786,331,979.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities 2b		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	786,331,979.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) 4b		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	786,331,979.
Part		urn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	urn.	778,831,901.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements		778,831,901.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:		778,831,901.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities		778,831,901.
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements		778,831,901.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements		778,831,901.
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)		778,831,901.
1 2 b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	1	778,831,901.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	1 2e	
1 2 b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	1 2e	
1 2 b c d e 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses. Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 2e	
1 2 b c d e 3 4 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	1 2e	
1 2 d c 3 4 a 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Arounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	1 2e 3 4c	

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

SEE SUPPLEMENTAL PAGE

SCHEDULE D, PART X, LINE 2

UNCERTAIN TAX POSITIONS:

MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE F (Form 990)	Statement of Activities Outside the United Statement of Activities Outside the United Statement of Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, Attach to Form 990.	OMB No. 1545-0047				
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the lates			Inspection			
Name of the organization		Employer identification number				
ALLIANCE FOR SUSTAINABLE ENERGY, LLC		26-1939342				
	Aformation on Activities Outside the United States. Complete if the Part IV, line 14b.	organizat	ion answered "Yes" on			
-	Does the organization maintain records to substantiate the amount of its the grantees' eligibility for the grants or assistance, and the selection crite or assistance?	ria used to				

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region	
(1) EAST ASIA AND THE PACIFIC	NONE	2	PROGRAM SERVICES	SEE ATTACHED	35,406.	
(2) EUROPE	NONE	2	PROGRAM SERVICES	SEE ATTACHED	43,917.	
	NONE	2			13,517.	
(3) SOUTH AMERICA	NONE	1	PROGRAM SERVICES	SEE ATTACHED	60,251.	
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
10)						
11)						
12)						
13)						
14)						
15)						
16)						
(4-7)						
3a Subtotal	NONE	5.			139,574	
b Total from continuation sheets to Part I						
c Totals (add lines 3a and 3b)	NONE	5.			139,574	

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 2E1274 1.000

2E1275 1.000

Schedule F (Form 990) 2022

26-1939342

				DRDROT/ DI			10 1)))II			· •.9• —
Part II	Grants and Other	Assistance to	• Organizations or	Entities Outs	side the l	United States.	Complete if the	organization	answered "Yes"	on Form 990,
	Part IV, line 15, for	any recipient	who received more	than \$5,000.	Part II ca	in be duplicated	d if additional spa	ice is needed.		

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax

Page 2

40

Page 3

Schedule F	(Form 990) 2022 ALLIANCE	E FOR SUSTAINABLE E	NERGY, LI	JC	26-193	9342		Page 3
Part III	Grants and Other Assistance Part III can be duplicated if add	to Individuals Outside	the United	States. Complete	if the organiz	zation answered "Yes	" on Form 990	, Part IV, line 16.
	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022	ALLIANCE	FOR	SUSTAINABLE	ENERGY,	LLC
Part IV Foreign Fo	orms				

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE F, PART I, LINE 3

ASIA:

ONE EMPLOYEE WORKED 50% FOR ALLIANCE AND 50% AS A VISITING PROFESSOR AT KYUSHU UNIVERSITY IN JAPAN. THE EMPLOYEE PARTICIPATED IN A SPEAKER SERIES ON GLOBAL ENERGY GOALS AND CHALLENGES IN REACHING 100% RENEWABLE/CLEAN ENERGY. ONE EMPLOYEE PARTICIPATED IN MEETINGS AND TRAINING SESSIONS SUPPORTING THAILAND'S NET ZERO WORLD ACTIVITIES.

EUROPE:

ONE EMPLOYEE WORKED 50% FOR ALLIANCE AND 50% AS A VISITING SCIENTIST AT THE ECOLE POLYTECHNIQUE FEDERALE DE LAUSANNE (EPFL) LABORATORIES IN SWITZERLAND. THE EMPLOYEE'S ALLIANCE/NREL WORK WAS RESEARCH WORK IN SILICO. ONE EMPLOYEE WORKED 10% FOR ALLIANCE RESEARCHING AND COLLABORATING WITH PERSONNEL AT THE UNIVERSITY OF COMILLAS IN SPAIN ON THE CAPABILITY OF RNM-US TO CREATE UTILITY MODELS IN AREAS OF LIMITED AVAILABLE DATA. Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SOUTH AMERICA:

ONE EMPLOYEE WORKED 50% FOR ALLIANCE AND 50% AS A VISITING PROFESSOR AT THE UNIVERSITY OF MEDELLIN IN COLOMBIA. THE EMPLOYEE'S ALLIANCE/NREL WORK WAS RESEARCH WORK IN WIND AND SOLAR RESOURCE ASSESSMENT AND TECHNICAL POTENTIAL MODELING AND PARTICIPATING IN SEMINARS AND TRAININGS IN THIS FIELD OF STUDY.

SCHEDULE F, PART I, LINE 3, COLUMN (F)

DESCRIPTION OF ACCOUNTING METHOD:

ALLIANCE FOR SUSTAINABLE ENERGY USES THE ACCRUAL ACCOUNTING METHOD FOR

AMOUNTS ENTERED IN SCHEDULE F, PART I, LINE 3 COLUMN (F).

SCHEDULE I (Form 990) G Com		OMB No. 1545-0047					
Internal Revenue Service	Go t	o www.irs.gov/	Form990 for the la	test information.			Inspection
Name of the organization						Employer identificat	ion number
ALLIANCE FOR SUSTAINABLE ENERGY,						26-1939342	
Part I General Information on Grants a	and Assistanc	e					
 Does the organization maintain records to the selection criteria used to award the gra Describe in Part IV the organization's proc Part II Grants and Other Assistance to 	ants or assistance edures for more	e? hitoring the use	of grant funds in the	e United States.			X Yes No
Part IV, line 21, for any recipient		-					,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) COMMUNITY SHARES OF COLORADO							
789 SHERMAN ST. #230 DENVER, CO 80203	74-2401941	501(C)(3)	22,785.				SUPPORT ORGANIZATION
(2) NREL FOUNDATION							
601 16TH ST. SUITE C452 GOLDEN, CO 80401	86-3498248	501(C)(3)	200,000.				SUPPORT ORGANIZATION
(3) THE ACTION CENTER							
8745 W 14TH AVE. LAKEWOOD, CO 80215	23-7019679	501(C)(3)	10,010.				SUPPORT ORGANIZATION
(4) MILE HIGH UNITED WAY INC							
711 PARK AVE. W DENVER, CO 80205	84-0404235	501(C)(3)	7,000.				SUPPORT ORGANIZATION
(5) DENVER PUBLIC SCHOOLS							
1860 LINCOLN ST. DENVER, CO 80203	84-1224325	501(C)(3)	6,000.				SUPPORT ORGANIZATION
(6) CO LABS INC							
2440 PEARL ST. BOULDER, CO 80302	26-0373539	501(C)(3)	10,000.				SUPPORT ORGANIZATION
(7) DENVER METRO CHAMBER OF COMMERCE							
1445 MARKET ST. SUITE 400 DENVER, CO 80202	84-0186760	501(C)(6)	12,500.				SUPPORT ORGANIZATION
(8)							
(9)							
(10)							
(11)							
(12)							
 2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations 	-	-					6 1

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

Schedule I (Form 990) 2022

ALLIANCE FOR SUSTAINABLE ENERGY, LLC

26-1939342

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	
1						
2						
3						
4						
5						
6						
7						
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional						

information.

SCHEDULE I, PART I, LINE 2

DESCRIPTION FOR MONITORING GRANTS:

ALLIANCE HAS A CONTINUING RELATIONSHIP WITH VARIOUS LOCAL CHARITABLE, EDUCATIONAL, AND CIVIC ORGANIZATIONS. PRIOR TO PROVIDING DONATIONS, THE ORGANIZATIONS ARE IDENTIFIED AS NON-PROFIT ORGANIZATIONS IN GOOD FINANCIAL AND NON-PROFIT STANDING. THE ENTITIES PROVIDE INFORMATION TO

THE PUBLIC AND ALLIANCE ON THE GOOD BEING ACCOMPLISHED THROUGH DONATIONS

LIKE THOSE FROM ALLIANCE.

Page 2

SCHEDULE J (Form 990) Compensation Information OMB No. 1545-0047 Department of the Treasury Internal Revenue Service For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees OMB No. 1545-0047 Department of the Treasury Internal Revenue Service 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. Ome no Public Inspection Name of the organization Employer identification number ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939342 Part1 Questions Regarding Compensation Yes No
Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Open to Public Inspection Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Inspection Name of the organization Employer identification number ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939342 Part I Questions Regarding Compensation Yes
Department of the Treasury Internal Revenue Service Attach to Form 990. Open to Public Inspection Name of the organization Employer identification number ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939342
Name of the organization Employer identification number ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939342 Part I Questions Regarding Compensation
ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939342 Part I Questions Regarding Compensation Yes No
Part I Questions Regarding Compensation Yes No
Yes No
1a 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?
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 X Written employment contract
X Independent compensation consultant X Compensation survey or study
Form 990 of other organizations 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:
a Receive a severance payment or change-of-control payment?
b Participate in or receive payment from a supplemental nonqualified retirement plan?
c Participate in or receive payment from an equity-based compensation arrangement?
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:
a The organization? 5a X 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:
a The organization?
b Any related organization?
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
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
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 (4958-6(c))
Regulations section 53.4958-6(c)? 9 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 202

Schedule J (Form 990) 2022

26-1939342

Page **2**

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

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

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

		(B) Breakdown of W-2 a	nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
DR. MARTIN KELLER	(i)	532,280.	286,004.	42,905.	-8,959.	34,898.	887,128.	
1 PRESIDENT	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
MR. JOHN STOLPA	(i)	313,758.	84,731.	31,484.	-62,676.	33,564.	400,861.	
2 SECRETARY	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
DR. PETER GREEN	(i)	382,984.	186,810.	24,063.	9,212.	24,798.	627,867.	
3 SENIOR VICE PRESIDENT	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
MS. JULIE BAKER	(i)	376,902.	189,767.	59,939.	-17,832.	31,778.	640,554.	
4 SENIOR VICE PRESIDENT	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
DR. JOHNEY GREEN	(i)	343,553.	121,059.	21,628.	-19,411.	32,222.	499,051.	
5 ASSOCIATE LAB DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
MR. WILLIAM FARRIS	(i)	298,785.	113,573.	54,675.	-41,448.	25,547.	451,132.	
6 ASSOCIATE LAB DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
MR. JUAN TORRES	(i)	327,703.	120,369.	35,596.	-3,517.	10,965.	491,116.	
7 ASSOCIATE LAB DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
DR. WILLIAM TUMAS	(i)	337,798.	117,932.	22,202.	-23,586.	23,598.	477,944.	
8 ASSOCIATE LAB DIRECTOR	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
MS. JENNIFER LOGAN	(i)	145,289.	92,443.	127,662.	17,143.	14,747.	397,284.	
9 CFO	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
MS. CHRISTINE HERRERA	(i)	258,037.	92,642.	123,372.	30,823.	26,449.	531,323.	
10 CHIEF HR OFFICER	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2022

Schedule J (Form 990) 2022

Part III Supplemental Information

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

SCHEDULE J, PART I, LINE 7

THE ALLIANCE'S INCENTIVE PROGRAM INCLUDES TWO PLANS AND MULTIPLE

TIERS WITHIN EACH PLAN. THESE TIERS ARE TARGETED TO SPECIFIC JOB

TITLES, WITH EACH FEATURING A TARGET INCENTIVE AS A PERCENTAGE OF

BASE PAY. PAYOUTS ARE BASED ON TWO FACTORS: EACH PARTICIPANT'S

INDIVIDUAL PERFORMANCE AND THE LAB'S OVERALL PERFORMANCE.

Page 3

Supplemental Information to Form 990 or 990-EZ

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

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service	
Name of the organization	

Employer identification number

ALLIANCE FOR SUSTAINABLE ENERGY, LLC

26-1939342

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

DESCRIPTION IN DIFFERENCE OF VOTING RIGHTS:

ALLIANCE FOR SUSTAINABLE ENERGY HAS 15 BOARD MEMBERS 5 ARE ELECTED BY MRIGLOBAL, 5 BY BATTELLE & 5 CORE UNIVERSITY MEMBERS. ALL BOARD MEMBERS CAN VOTE ON GENERAL BUSINESS AND POLICY MATTERS. MRIGLOBAL AND BATTELLE BOARD MEMBERS ARE THE ONLY MEMBERS THAT CAN VOTE ON ECONOMIC AND OTHER INTERESTS IN THE COMPANY AND OR THE MEMBERS' BUSINESS REPUTATIONS.

FORM 990, PART VI, SECTION A, LINE 6

DESCRIBE CIRCUMSTANCES FOR HAVING MEMBERS:

ALLIANCE FOR SUSTAINBLE ENERGY HAS TWO MEMBERS:

- MRIGLOBAL
- BATTELLE MEMORIAL INSTITUTE

FORM 990, PART VI, SECTION A, LINE 7A

MEMBERS WHO CAN ELECT MEMBERS OF THE GOVERNING BODY:

EACH MEMBER HAS THE RIGHT TO NOMINATE AND ELECT 5 MEMBER DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B

DECISIONS OF GOVERNING BODY SUBJECT TO APPROVAL BY MEMBERS:

THE MEMBERS HAVE THE RIGHT TO AMEND AND APPROVE THE OPERATING AGREEMENT.

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

DESCRIPTION OF PROCESS FOR REVIEWING 990:

- 1. CONTROLLER REVIEWS THE DRAFT 990 AND SENDS TO THE FINANCE AND AUDIT COMMITTEE (FAC) MEMBERS FOR REVIEW.
- 2. FAC REVIEW THE DRAFT 990 AND EACH APPROVES THE 990 FOR FILING.
- 3. THE DRAFT 990 IS POSTED ON THE BOARD SITE FOR THREE BUSINESS DAYS. IF
- NO COMMENTS OR EDITS ARE RECEIVED, THE 990 IS FILED.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.



Department of the Treasury Internal Revenue Service Name of the organization

ALLIANCE FOR SUSTAINABLE ENERGY, LLC

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

DESCRIPTION OF PROCESS FOR MONITORING CONFLICT OF INTEREST POLICY: ALL ALLIANCE EMPLOYEES ARE REQUIRED TO ATTEND ETHICS TRAINING WHICH PERIODICALLY INCLUDES THE PROCESS FOR IDENTIFICATION AND DISCLOSURE OF CONFLICTS OF INTEREST. EMPLOYEES ARE REQUIRED TO FILE A WRITTEN DISCLOSURE STATEMENT CONCERNING OUTSIDE ACTIVITIES AND/OR ACTUAL OR POTENTIAL CONFLICTS OF INTEREST BETWEEN THE EMPLOYEE'S WORK AND PERSONAL. FINANCIAL, OR ALLIANCE FOR SUSTAINABLE ENERGY, LLC 26-1939342 BUSINESS INTERESTS. THE EMPLOYEE'S COGNIZANT LINE MANAGEMENT IS RESPONSIBLE FOR THE REVIEW AND APPROVAL OF EMPLOYEE REQUESTS FOR APPROVAL OF OUTSIDE ACTIVITIES WHICH ARE OF CONCERN TO ALLIANCE. EMPLOYEES WHOSE REGULAR RESPONSIBILITIES INVOLVE MANAGING OR EXECUTING LICENSE AGREEMENTS FOR INTELLECTUAL PROPERTY OR THE PREPARATION OR EXECUTION OF COOPERATIVE RESEARCH AND DEVELOPMENT AGREEMENTS (CRADAS) OR OTHER TECHNOLOGY TRANSFER OR TECHNOLOGY PARTNERSHIP ARRANGEMENTS MUST ANNUALLY OR UPON CHANGES IN RELEVANT PERSONAL OR FAMILY CIRCUMSTANCES OR THE NATURE OF WORK ASSIGNED, COMPLETE AN EMPLOYEE'S STATEMENT OF ECONOMIC INTEREST. IF AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST EXISTS, THE EMPLOYEE CONSULTS WITH THE GENERAL COUNSEL OR DESIGNEE TO IDENTIFY AND IMPLEMENT MITIGATION OR AVOIDANCE ACTIONS, OR RECUSES SELF IF AN APPROPRIATE MITIGATION OR AVOIDANCE ACTION CANNOT BE IDENTIFIED. ALL ALLIANCE OFFICERS AND BOARD OF DIRECTOR MEMBERS ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST DISCLOSURE UPON APPOINTMENT, AND AN ANNUAL CONFLICT OF INTEREST DISCLOSURE AND RECEIVE ANNUAL ORGANIZATIONAL CONFLICTS OF INTEREST TRAINING. THE ALLIANCE BOARD OF DIRECTORS USES DISCLOSURE STATEMENTS TO DETERMINE IF A

Supplemental Information to Form 990 or 990-EZ

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



Department of the Treas	Y Attach to rom 350 or 350-E2.	Open to Public
Internal Revenue Service	► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs	s.gov/form990. Inspection
Name of the organization		Employer identification number
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CONFLICT OF INTEREST EXISTS. IF SO, THE BOARD OF DIRECTORS IMPLEMENTS AVOIDANCE OR MITIGATION ACTIONS AND ANY DIRECTOR OR OFFICER MAY NOT TAKE PART IN DISCUSSION OR VOTING ON MATTERS RELATED TO A DISCLOSED INTEREST.

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

DESCRIPTION OF PRESIDENT AND OTHER OFFICER COMPENSATION PROCESS: GOVERNANCE OF EXECUTIVE COMPENSATION IS CHARTERED THROUGH THE ALLIANCE HUMAN RESOURCES COMPENSATION COMMITTEE. EXTERNAL THIRD PARTY RESOURCES ARE RETAINED ON A BIENNIAL BASIS TO REVIEW ALL ELEMENTS OF EXECUTIVE REMUNERATION (BASE SALARY, ANNUAL INCENTIVES, RETIREMENT BENEFITS, HEALTH AND WELFARE BENEFITS, AND EXECUTIVE PREREQUISITES) TO INSURE COMPETITIVENESS OF ALL THE ELEMENTS OF CASH COMPENSATION RELATIVE TO THE MARKET FOR BOTH BASE COMPENSATION AND TOTAL COMPENSATION. THERE ARE NO PERSONS SERVING ON THE COMPENSATION COMMITTEE WITH A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENTS. CONTEMPORANEOUS DOCUMENTATION AND RECORDS ARE RETAINED. THE LAST COMPENSATION REVIEW OCCURRED IN 2023 BY MERCER.

FORM 990, PART VI, SECTION C, LINE 19

DESCRIPTION OF GOVERNING DOCUMENTS MADE AVAILABLE TO THE PUBLIC: ALLIANCE MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST.

ALLIANCE DOES NOT PROVIDE FINANCIAL STATEMENTS TO THE PUBLIC. AS A FEDERALLY FUNDED RESEARCH AND DEVELOPMENT CENTER FOR THE U.S. DEPARTMENT OF ENERGY, ALLIANCE FOR SUSTAINABLE ENERGY, LLC ONLY PROVIDES FINANCIAL STATEMENTS TO THE FEDERAL AGENCY FUNDING THE PROJECT.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
ALLIANCE FOR SUSTAINABLE ENERGY, LLC

26-1939342

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FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS

DESCRIPTION OF OTHER CHANGE IN NET ASSETS:

(7,518,591) - DISTRIBUTION TO MEMBERS

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FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE MISSION OF THE ALLIANCE FOR SUSTAINABLE ENERGY LLC (ALLIANCE) IS TO OPERATE THE U.S. DEPARTMENT OF ENERGY'S NATIONAL RENEWABLE ENERGY LABORATORY TO ADVANCE THE SCIENCE AND ENGINEERING OF ENERGY EFFICIENCY, SUSTAINABLE TRANSPORTATION, AND RENEWABLE POWER TECHNOLOGIES, AND PROVIDES THE KNOWLEDGE TO INTEGRATE AND OPTIMIZE ENERGY SYSTEMS.

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FORM 990, PART III - PROGRAM SERVICE

LINE 4A, PROGRAM SERVICE

ON OCTOBER 1, 2008, ALLIANCE BEGAN MANAGEMENT OF THE U.S. DEPARTMENT OF ENERGY'S (DOE) NATIONAL RENEWABLE ENERGY LABORATORY UNDER PRIME CONTRACT NUMBER DE-AC36-08-GO28308. THE NATIONAL RENEWABLE ENERGY LABORATORY (NREL) IS THE NATION'S PRIMARY LABORATORY FOR RENEWABLE ENERGY AND ENERGY EFFICIENCY RESEARCH AND DEVELOPMENT (R AND D). ALLIANCE PROVIDES THE LEADERSHIP AND STRATEGY THROUGH ITS MANAGEMENT AND OPERATION CONTRACT OF THE NATIONAL RENEWABLE ENERGY LABORATORY (NREL) TO EXECUTE RESEARCH, DEVELOPMENT, DEMONSTRATION, TECHNICAL ASSISTANCE AND ANALYSIS PROGRAMS ON BEHALF OF DOE, OTHER FEDERAL AGENCIES AND THE PRIVATE SECTOR. IT STEWARDS THE UNDERLYING CAPABILITIES AND RESEARCH ASSETS THAT ENABLE MISSION ACCOMPLISHMENT. IT ALSO PROVIDES THE LEADERSHIP TO SAFELY, SECURELY AND SUSTAINABLY MANAGE AND OPERATE TWO MAJOR NREL CAMPUSES LOCATED IN COLORADO, AND ONE NREL CAMPUS IN FAIRBANKS, ALASKA, AS WELL AS SEVERAL OFF-CAMPUS RESEARCH AND OFFICE FACILITIES, AND TO OPERATE AND CONTINUOUSLY IMPROVE BUSINESS SYSTEMS, INCLUDING FINANCE, HUMAN RESOURCES, PROCUREMENT, AND QUALITY. ALLIANCE PARTNERS WITH INDUSTRY, OTHER GOVERNMENT AGENCIES, AND ACADEMIA TO TRANSFER THE KNOWLEDGE, KNOW HOW, AND INTELLECTUAL PROPERTY TO ENABLE NEW PRODUCT DEVELOPMENT AND THEN SCALE UP WITHIN THE NATION'S ENERGY INFRASTRUCTURE. THIS EFFORT SUPPORTS ENERGY SECURITY AND A VIBRANT ECONOMY WHILE ENSURING STEWARDSHIP OF THE ENVIRONMENT.

ALLIANCE PROVIDES LEADERSHIP AND TECHNICAL CAPABILITIES FOR WORK WITHIN THE FOLLOWING AREAS:

RENEWABLE ELECTRICITY GENERATION THIS AREA INCLUDES ADVANCEMENTS IN RENEWABLE ELECTRICITY GENERATION TECHNOLOGIES INCLUDING SOLAR, WATER, WIND AND GEOTHERMAL.

ENERGY PRODUCTIVITY THIS AREA INCLUDES ADVANCEMENTS, TECHNOLOGIES, AND SYSTEMS INTEGRATION TO INCREASE ENERGY PRODUCTIVITY IN HOMES, BUILDINGS, AND INDUSTRIAL PLANTS.

SUSTAINABLE TRANSPORTATION THIS AREA INCLUDES ADVANCEMENTS IN TRANSPORTATION AND VEHICLE TECHNOLOGIES AND ALTERNATIVE FUELS.

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FORM 990, PART III - PROGRAM SERVICE _____

ENERGY ANALYSIS

CREDIBLE AND OBJECTIVE ENERGY ANALYSIS INCREASES THE UNDERSTANDING OF HOW THE ENERGY SYSTEMS OPERATE. WE EXPLORE HOW ENERGY POLICIES, MARKETS, RESOURCES, TECHNOLOGIES, ENVIRONMENTAL IMPACTS, AND INFRASTRUCTURE INTERACT. ANALYSES, DATA, AND TOOLS INFORM INVESTMENT DECISIONS AS ENERGY-EFFICIENT AND RENEWABLE ENERGY TECHNOLOGIES ADVANCE FROM CONCEPT TO COMMERCIAL APPLICATION.

ENERGY SYSTEMS INTEGRATION

ENERGY SYSTEMS INTEGRATION RESEARCH ADDRESSES TRADEOFFS ACROSS ENERGY CARRIERS (SUCH AS ELECTRICITY, THERMAL PATHWAYS, FUELS, AND WATER) WITHIN INFRASTRUCTURES (GRIDS, BUILDINGS AND CAMPUSES, COMMUNITIES, COMMUNICATIONS AND TRANSPORTATION) TO MAXIMIZE EFFICIENCY AND MINIMIZE WASTE.

NREL TRANSFORMS ENERGY THROUGH SCIENCE BY FOCUSING ITS EXPERTISE AND RESOURCES ON THREE DISTINCT RESEARCH AREAS THAT RECOGNIZE EMERGING MEGATRENDS TO HELP GUIDE ITS RESEARCH.

INTEGRATED ENERGY PATHWAYS FOCUSES ON MODERNIZING THE GRID TO SUPPORT A BROAD SELECTION OF GENERATION TYPES, ENCOURAGE ACTIVE PARTICIPATION BY THE CONSUMER, AND EXPAND OPTIONS FOR TRANSPORTATION ELECTRIFICATION.

ELECTRONS TO MOLECULES FOCUSES ON THE USE OF RENEWABLE, AFFORDABLE ELECTRICITY AS THE DRIVING FORCE FOR THE CONVERSION OF LOW-ENERGY MOLECULES-SUCH AS WATER AND CARBON DIOXIDE-TO GENERATE HIGHER-VALUE, HIGHER-ENERGY CHEMICALS, FUELS, AND MATERIALS.

CIRCULAR ECONOMY FOR ENERGY MATERIALS FOCUSES ON REDUCING WASTE AND PRESERVING RESOURCES THROUGH THE DESIGN OF MATERIALS AND PRODUCTS WITH REUSE, RECYCLING, AND UPCYCLING IN MIND FROM THE START.

NREL IS POSITIONED TO HELP THE NATION ADVANCE ITS ENERGY GOALS THROUGH THE ALLIANCE STRATEGY FOR ACCELERATING IMPACT. THE LABORATORY DELIVERS MARKET-RELEVANT, HIGH-IMPACT KNOWLEDGE/INNOVATIONS; AMPLIFIES MARKET IMPACT THROUGH STRATEGIC PARTNERSHIPS; STEWARDS DISTINCTIVE CAPABILITIES AND SUSTAINS OPERATIONAL EXCELLENCE. NREL SUPPORTS COLLABORATIVE RESEARCH PROJECTS, DISSEMINATES RESEARCH RESULTS BROADLY, PROTECTS INTELLECTUAL PROPERTY THROUGH PATENTS AND COPYRIGHTS, LICENSES

JSA

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FORM 990, PART III - PROGRAM SERVICE

TECHNOLOGIES AND WORKS WITH PUBLIC AND PRIVATE PARTNERS TO IMPLEMENT TECHNOLOGIES. INNOVATIVE TECHNOLOGIES ARE ANNUALLY RECOGNIZED WITH MULTIPLE R&D 100 AWARDS, WHICH ARE CONSIDERED THE MOST PRESTIGIOUS TECHNOLOGY INNOVATION AWARDS IN THE UNITED STATES. THE ENGINEERING AND SCIENCE BEHIND THESE TECHNOLOGY TRANSFER SUCCESSES AND AWARDS DEMONSTRATE ALLIANCE'S COMMITMENT TO DEVELOPING AND APPLYING INNOVATIVE RENEWABLE ENERGY SOLUTIONS TO ACHIEVE THE NATION'S SECURE AND SUSTAINABLE ENERGY FUTURE.

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FORM 990, PART VII-COMPENSATION OF THE 5 HIGH		
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
MA MORTENSON COMPANY		
700 MEADOW LANE NORTH		
MINNEAPOLIS, MN 55422	CONSTRUCTION	13,672,582.
SUN CONSTRUCTION DESIGN SERVICES INC		
1232 BOSTON AVE		
LONGMONT, CO 80501	CONSTRUCTION	9,213,997.
ACCENTURE FEDERAL SERVICES LLC		
1255 TREAT BLVD SUITE 250		
WALNUT CREEK, CA 94597	CONSULTING SERVICES	8,510,034.
STATE OF COLORADO SCHOOL OF MINES		
1200 16TH STREET		
GOLDEN, CO 80401	RESEARCH SERVICES	4,747,589.
REGENTS OF THE UNIVERSITY OF COLORAD		
3100 MARINE STREET		
BOULDER, CO 80309	RESEARCH SERVICES	3,939,623.

Schedule O (Form 990 or 990-EZ) 2022