WEGNER CPAS, LLP 419 N LEE ST ALEXANDRIA, VA 22314-2301

> THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION PO BOX 33878 WASHINGTON, DC 20033

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Department of the Treasury Internal Revenue Service

### \*\* PUBLIC DISCLOSURE COPY \*\*

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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



AF	or th	e 2020 calendar year, or tax year beginning and	ending	_	
B C a	heck if pplicat	THE NATIONAL ENERGY AND UTILITY		D Employer identific	cation number
X	Addr	AFFORDABILITY COALITION			
	Name Chan			52-15597	09
	Initial returr Final returr	Number and street (or P.U. box if mail is not delivered to street address)	Room/suite	E Telephone number 202-530-	
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	586,535.
	Amer returr	INT CUTNOMON DC 20022		H(a) Is this a group re	
	Appli tion pend	F Name and address of principal officer: SAUNTEEL JENKINS		for subordinates <b>H(b)</b> Are all subordinates in	? Yes X No
<u> </u>	ax-ex	$x = 10^{-10}$ $x = 10^{$	or 527		list. See instructions
		te: ► NEUAC • ORG		H(c) Group exemption	
-		f organization: X Corporation Trust Association Other	I Year		State of legal domicile: VA
	rt I	-			
	1	Briefly describe the organization's mission or most significant activities:	NATION	AL ENERGY A	ND UTILITY
Activities & Governance	-	AFFORDABILITY COALITION IS A BROAD-BASED	COALI	TION OF DIV	ERSE MEMBER
rna	2	Check this box      if the organization discontinued its operations or dispo	sed of more	than 25% of its net as	sets.
ove	3			3	32
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			32
s 8	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			2
vitie	6	Total number of volunteers (estimate if necessary)			70
ctiv	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
A		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		458,950.	419,732.
Revenue	9	Program service revenue (Part VIII, line 2g)		447,494.	165,992.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,330.	196.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,095.	615.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		908,869.	586,535.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	7,780.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Se	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		226,533.	261,986.
sue	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	38.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		523,292.	279,728.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		749,825.	549,494.
	19	Revenue less expenses. Subtract line 18 from line 12		159,044.	37,041.
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year
alar	20	Total assets (Part X, line 16)		987,939.	986,297.
t As Id B	21	Total liabilities (Part X, line 26)		99,359.	60,676.
Fur	22	Net assets or fund balances. Subtract line 21 from line 20		888,580.	925,621.

#### Part II Signature Block

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

Sign Here	Signature of officer RHONDA HARPER, PRESIDE Type or print name and title	ENT	Da	te				
Paid	Print/Type preparer's name GLENN MILLER, CPA	Preparer's signature	Date 11/3/21	Check PTIN if self-employed P00086726				
Preparer	Firm's name 🕨 WEGNER CPAS, LLF		Firi	m's EIN ▶ 39-0974031				
Use Only	Firm's address 🖕 419 N LEE ST							
	ALEXANDRIA, VA 2	22314-2301	Ph	one no.703-519-0990				
May the IF	May the IRS discuss this return with the preparer shown above? See instructions							
032001 12-2	3-20 LHA For Paperwork Reduction Act Not	ice, see the separate instructions.		Form <b>990</b> (2020)				
S	EE SCHEDULE O FOR ORGANIZ	ZATION MISSION STATEM	IENT CON	TINUATION				

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		ORDABILITY, UN AND COMMUNITY			KGI	
		ULNERABLE POPU				
OVERNMENT,	TRIBAL, AN	ND UTILITY SEC	TORS. TOPIC	S INCLUDE EN	IERGY	
		RS FOR MORE TH. SPANNING THE CO				ч <u>р</u>
		UAL CONFERENCE				
ode:) (Expense NNUAL CONFE		66,147. including grants HE NATIONAL EN		0. (Revenue \$ LITY AFFORDA	55, ABILITY	94.
evenue, if any, for each	program service re	eported.	-			
		e accomplishments for each ns are required to report the				
"Yes," describe these of	changes on Sched	lule O.				
"Yes," describe these r id the organization ceas		chedule O. make significant changes in	how it conducts. anv pr	ogram services?	Yes	X
rior Form 990 or 990-EZ					Yes	Χ
		ant program services during				
		ING AWARENESS ( STERING PUBLIC				
HE NATIONAL	ENERGY AN	ND UTILITY AFF				
			iis Part III			
	-	•				
90 (2020)	AFFORDAB			<u> </u>	-1559709	Pa
riefl 'HE	Statement of Check if Schedule y describe the orga NATIONAL	AFFORDAB Statement of Program Servi Check if Schedule O contains a resp y describe the organization's mission: NATIONAL ENERGY A	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in th y describe the organization's mission: NATIONAL ENERGY AND UTILITY AFF	Statement of Program Service Accomplishments         Check if Schedule O contains a response or note to any line in this Part III         y describe the organization's mission:         S NATIONAL ENERGY AND UTILITY AFFORDABILITY C	Statement of Program Service Accomplishments         Check if Schedule O contains a response or note to any line in this Part III         y describe the organization's mission:         S NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION IS	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III

THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION

Form 990 (2020)

Part IV Checklist of Required Schedules

1         Is the organization described in section 511(k)[0] or 4947[0](1) (pther than a private foundation?         1         X           2         Is the organization requiped in decircle indication private foundations of the organization requiped in the circle indication (CR) (CR) organization indication indication indication indication indication soft in the organization requiped in bobbying activities, or have a section 501(h) electrion in effect during the tax year // 11 Yes, 'complete Schedule C, Part //         4         X           5         Is the organization margina in bobbying activities, or have a section 501(h) electrion in effect during the tax year // 11 Yes, 'complete Schedule C, Part //         4         X           5         Is the organization markins and done of any similar funds or accounts?         5         X           6         Dott the organization markins and done or any similar done or accounts?         7         X           7         Dott the organization markins and done or any similar done or accounts?         7         X           8         Dott the organization markins or advocumt search and part and done any similar done or accounts?         7         X           9         Dott the organization markins and anonus in Part X, line 21, for escore or actoriad transure, or other similar asset?         7         X           10         Datt the organization repert an annount in Part X, line 21, for escore or actoriad in account lability, serve as a curotorian for anonus in the Part X, line 12, for escore dist bata assets reported in Par				Yes	No
2         Is the organization engine in direct or Midet Schedule 9. Centributore         2         X           3         Dot the organization engine in direct or Midet Schedule 2, Part I         3         X           4         Section 501(c)(3) organizations. Did the organization engine in lobbying activities, on have a section 501(t)) election in effect 4         X           5         Is the organization ascelins 501(c)(4). 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Persum Procedure 89170 (* Y*s, "complete Schedule 2, Part II         4         X           6         Did the organization martain any donar advised funds or any similar funds or accounts for which domors have the right to provide advise on the distribution or investment of anounts in such Indires vaccounts for Wes, "complete Schedule 0, Part II         6         X           7         Did the organization martain any donar advised funds or any similar funds or accounts for Wes, "complete Schedule 0, Part II         7         X           8         Did the organization martain schedule 2, Part II         8         X           9         Did the organization martain schedule 2, Part II         8         X           9         Did the organization organization and the Part X, Inc 21, for score or occulatid account lability, serve as a custodian for amount in Part X, Inc 21, for score or occulatid account lability, serve as a custodian for amount in Part X, Inc 21, Part X, Inc 21, Part S, Complete Schedule 0, Part X         10	1	•			
3         Dot the organization engage in direct or mollicel political campaign activities on behalf of or in opposition to candidates for public oftee? If "Yes," complete Schedule C, Part II         a         X           4         Section SOI(QS) organizations. Both the organization engage in lobbying activities, or have a section SOI(Y) election in effect during the tax year II "Yes," complete Schedule C, Part II         a         X           5         Is the organization markina and yound available for the organization in that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 89-191 If "ys," complete Schedule D, Part II         6         X           7         Dot the organization markina any doora availased finds or any smilling essements to preserve open space, the environment, historic land areas, or historic structures? If "yes," complete Schedule D, Part II         7         X           9         Dot the organization markina any doora availased finds or any smilling essements to preserve open space, the environment, historic and causes available, serve as a custodiain for amounts on listed in Part X, or provide endit courseling, doit managament, endit repair, or dath negatiation servicea?         7         X           9         Dot the organization any organization any the loading gaussion is "Yes," then complete Schedule D, Part IV         10         X           10         Dot the organization any or the following question is "Yes," then complete Schedule D, Part VIII, IV, or X         3         X           10         Dot the organization report an amount for insthinet					
public office <i>Pl</i> 'Yes, ' complete Schedule <i>C</i> , <i>Perl</i> I         3         X           4         Section 501(6)(3) organizations. Dth er organization engage in bibbying activities, or have a section 501(h) election in effect during the tax year <i>Pl</i> 'Yes, ' complete Schedule <i>C</i> , <i>Petl</i> II.         4         X           5         Is the organization a section 501(c)(5), of 501(c)(5) or 501(c)(5) or 501(c)(5) or 200 ary similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such tanks or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such tanks or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such tanks or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such tanks or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such tanks or accounts for which donors have the approximate the environment, historic later area, or historic structures <i>Pl</i> 'Yes, ' complete Schedule <i>D</i> , <i>Parl I</i> .         7         X           8         Did the organization report an amount in Parl X, line 21, for secret or crustoid al account liability, serve as a custodian for amounts not listed in Parl X, ine 21, for secret or crustoid ad account liability, serve as a custodian for amounts not listed in Parl X, ine 21, for secret or crustoid ad account liability, serve as a custodian for amounts not listed in Parl X, ine 21, for secret or crustoid ad account liability, serve as a custodian for amounts not listed in Parl X, ine 21, for secret or crustoid ad account liability or complete Schedule <i>D</i> , Parl V         10         X			2	X	
4         Section 50 ft(c)(3) organizations. Did the organization ergage in lobbying activities, or have a section 50 ft(r) election in effect during the taxy year? II "Yes," complete Scheduke C, Pert II.         4         X           5         Is the organization a section 50 (fc)(6), 50 fc)(6), 50	3		_		v
during the tax year/# Yres," complete Schedule C, Part II         4         X           6         Is the organization a section Schedule C, Part II         5           7         X         Schedule C, Part II         5           8         Did the organization marks and y done advised funds or any similar funds or accounts for which donors have the right to provide advice on the disthulton or investment of amounts in such funds or accounts for which donors have the right to provide advice on the disthulton or investment funds or accounts for which donors have the right to provide advice on the disthulton or investment funds or accounts for which donors have the right to provide advice on the disthulton or investment funds or accounts for which donors have the right to provide advice on the disthulton or investment funds or accounts for which donors have the right to provide critical mass, or historic at transure, or other animilar assets? If Yes, "complete Schedule D, Part II         7         X           8         Did the organization function of the funds or acquination, hold assets in donor restricted endowments         7         X           9         Did the organization function or the funds borganization, hold assets in a donor restricted endowments         10         X           11         If the organization report an amount for investments - program rested in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If Yes, "complete Schedule D, Part VI         11         X           12         Did the organization report an amount for investments - program rested in Part X, line 12, that is 5% or mo			3		<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 dufined in Reviews Procedure 98 1971 **es, "complete Schedule D, Part III         5         X           6         Did the organization mathemating updone advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for breakers, provide advised by the organization mathematic nollections of works of at, historical treasures, or other similar assets? If 'Yes," complete Schedule D, Part II         6         X           7         X         8         X           9         Did the organization reports and onlice the ord works of at, historical treasures, or other similar assets? If 'Yes," complete Schedule D, Part II         7         X           10         Did the organization function and onlice the ord works of at, historical treasures, or other similar assets? If 'Yes," complete Schedule D, Part V         10         X           11         the organization function and mount for levels or and onlice the organization asset in a onlice the organization, hold assets in Part X, line 12, that is 5% or more of the total assets reported in Part X, line 120, Part V         10         X           10         Did the organization report an amount for investments - order related in Part X, line 12, that is 5% or more of the total assets reported in Part X, line 107 If 'Yes," complete Schedule D, Part X	4			v	
similar amounts as defined in Revenue Procedure 98-197 // Yes," complete Schedule D, Part II     5     X       6     Dot the organization maintain any door adviced funds or any submit funds or accounts for which doros have the right to part of the arganization maintain any door adviced funds or any submit funds or accounts for which doros have the right to part II     6     X       7     Dot the organization maintain collections of works of art, historical reserves or pen space, the environment, historical areas, on historical conselling, dott management, credit repair, or debt negotiation services?     7     X       8     Dot the organization maintain collections of works of art, historical reserves, or other similar assets? If "Ne," complete Schedule D, Part II     8     X       9     Dot the organization, directly or through a related organization, hold assets in donor restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part VI     10     X       10     Dot the organization answer to any of the following questions is "Yes," then complete Schedule D, Part VI, UII, UII, K, or X as applicable.     10     X       11     If the organization report an amount for investments - order securities in Part X, line 12, that is S% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part VI     111     X       12     Did the organization report an amount for investments - order securities in Part X, line 12, that is S% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part X     111     X       13     Did the organization re	-		4	л	
6       Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide divise on the distribution or investment of amounts in such funds or accounts if It''se, "complete Schedule D, Part II       6       X         7       Did the organization maintain collections of works of art, historical treasures, or other similar asset? If 'Yes, "complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar asset? If 'Yes, "complete Schedule D, Part II       7       X         9       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for anounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt neoptiation services?       9       X         10       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes, "complete Schedule D, Part V       10       X         11       If the organization report an amount for investments - or nore of its total assets reported in Part X, line 16? If 'Yes, "complete Schedule D, Part VI       11a       X         12       Did the organization report an amount for investments - program related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes, "complete Schedule D, Part VI       11a       X         13       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total asse	5		5		x
provide advice on the distribution or investment of anounts in such funds or accounts // *es," complete Schedule D, Part //         6         X           7         Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures // *es," complete Schedule D, Part //         7         X           8         Did the organization maintain collections of works of art, historical treasures, or other similar assets? // *'Re," complete Schedule D, Part //         8         X           9         Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts no listed in Part X, vo provide credit conseling, debt management, credit repair, or debt negotiation services?         9         X           10         Did the organization, directly or through a related organization, hold assets in donor-restricted endowments?         10         X           11         If the organization report an amount for levestments - organization services?         9         X           11         If the organization report an amount for levestments - organization assets reported in Part X, line 10?         111a         X           11         It the organization report an amount for levestments - program related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16?         111a         X           11         West, ine 16?         West, ine 26?         114         X	6		5		- 23
7       Did the organization receive or hold a conservation easement, including essements to preserve open space, the environment, histonic fand areas, or historic structures? If "Fes," complete Schedule D, Part II       7       X         8       Did the organization matination collection of works of art, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part II       8       X         9       Did the organization negotian collection of works of art, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part V       8       X         10       Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for anount on though a related organization, hold assets in donor restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? III "Yes," complete Schedule D, Part V       11a       X         12       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 II "Yes," complete Schedule D, Part VI       11a       X         13       Did the organization report an amount for investments for the say are include a foother that addresses the organization separate or consolidated financial statements for the tax year? II Yes," complete Schedule D, Part X       114       X         14       Did the organization separate, independent audited financial statements f	0		6		x
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part II       8       X         9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, for provide credit counseling, debt management, credit repair, or debt negotiation services?       9       X         10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments' II' Yes,' complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 17. If 'Yes,' complete Schedule D, Part V       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 17. If 'Nes,' complete Schedule D, Part VI       11a       X         13       Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167. If 'Yes,' complete Schedule D, Part VI       11a       X         14       Did the organization report an amount for investments - other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167. If 'Yes,' complete Schedule D, Part X       11a       X         20       Did the organizatio	7				
8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III       X         9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation services?       9         10       Did the organization, directly or through a related organization, hold assets in donorrestricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI       11       X         12       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part VI       11       X         13       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part X       114       X         14       Did the organization report an amount for other assets in Part X, line 257 If 'Yes,' complete Schedule D, Part X       114       X         15       Did the organization included in consolidated financial statements for the tax year' II 'Yes,' complete Schedule D, Part X       114       X         16       Ut en or	•		7		x
Schedule D, Part III       8       X         9 Did the organization popt an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services?       8       X         9 Did the organization, directed to courseling, debt management, credit repair, or debt negotiation services?       9       X         9 Did the organization, directed to private the D, Part V       10       X       10       X         11 If the organization is answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VII, VI, or X as applicable.       10       X       10       X         a lot the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VIII       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII       11a       X         c Did the organization report an amount for investments - other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X VII       11d       X         2 Did the organization report an amount for the resets 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 X       11d       X         2 Did the organiz	8		•		
9         Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?         9         X           10         Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments?         10         X           11         If the organization, directly or through a related organization, hold assets in donor-restricted endowments?         10         X           11         If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V         11a         X           12         Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII         11a         X           13         X         11d         X         11d         X           14         Did the organization report an amount for other labilities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII         11d         X           15         Did the organization is eparate or consolidated financial statements for the tax year?         11d         X           14         Did the organization separate or consolidated, independent audited financial statements for the tax yea	Ū		8		x
amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?     9     X       10     Did the organization, directly or through a related organization, hold assets in donor-restricted endowments     10     X       11     If the organization directly or through a related organization, should assets in donor-restricted endowments     10     X       11     If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Parts VI, VII, VII, VII, VI, VII, VII, VX, or X as applicable.     11     11       12     Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII     11     X       11     Did the organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII     11     X       11     Did the organization report an amount for investments - 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 VII     11     X       12     Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X     114     X       13     LX     114     X     114     X       14     Did the organization report an amount for other assets in Part X, line 25? If "	9				
If "Yes," complete Schedule D, Part IV     9     X       10     Did the organization, directly or through a related organization, hold assets in donorrestricted endowments     10     X       11     If the organization, directly or through a related organization, hold assets in donorrestricted endowments     10     X       11     If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, VII, VII, VII, VII,	-				
10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, UI, VIII, IX, or X as applicable.       10       X         a)       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         b)       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         c)       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 VII       11c       X         11d       Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         12       Did the organization is paparate, independent audited financial statements for the tax year? IIf "Yes," complete Schedule D, Parts XI and XII       11d       X         13       Is the organization included in ocnosildated, independent audited financial statements for the tax year?       11f       X         14a       Did the organization as expare, complete Schedule D, Parts XI and XII s optional       11k			9		х
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, NX, or X as applicable.       11       11       11       X         a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // "Yes," complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part VIII       11d       X         d Did the organization report an amount for other labilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part IX       11d       X         e Did the organization separate (nochalized financial statements for the tax year include a footnote that addresses the organization aschares aparate (nochalized financial statements for the tax year? // "Yes," complete Schedule D, Part X       11d       X         12a Did the organization ascholdsex descont Discont T306 (D)(A)(Q)(P) // Yes," complete Schedule D, Part X       11f       X         12a X       11d       X       11d       X         12a X       11d       X       11d       X         12a X       11d	10				
11       If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI, VII, VIII, VX, or X as applicable.       11       Image: Complete Schedule D, Part VI         2       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes," complete Schedule D, Part VI       11a       X         2       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VII       11c       X         2       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes," complete Schedule D, Part VII       11d       X         4       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 X       11d       X         4       Did the organization report an amount for other labilities in Part X, line 15? If 'Yes," complete Schedule D, Part X       11t       X         11       The organization is applicable       Complete Schedule D, Part X       11t       X         12       Did the organization ischolared in ancial statements for the tax year? If 'Yes," complete Schedule D, Part X       11t       X         12a       X       Did the organization included in consolidated, independent audited financial statements f		or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         e Did the organization report an amount for other labilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f Did the organization separate, independent audited financial statements for the tax year? Complete Schedule D, Part X       11f       X         12a       Did the organization onsultated, independent audited financial statements for the tax year?       11f       X         12a       Did the organization onsultated, independent audited financial statements for the tax year?       12a       X         13       Is the organization onsultated, independent audited financial statements for the tax year?       12a       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X </td <td>11</td> <td></td> <td></td> <td></td> <td></td>	11				
Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11c       X         e Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11f       X         12a       X       12a       X         13 Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       11a       X         14a       Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundralsing, 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       14a       X         15       Did the		as applicable.			
b       Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         d       Did the organization report an amount for other faibilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization obtain separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year?       11t       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13i       X         14a       Did the organization asintain an office, employees, or agents outside of the United States?       14a       X         14b       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         14b <t< td=""><td>а</td><td>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,</td><td></td><td></td><td></td></t<>	а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XX       11c       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         111       X       11d       X       11d       X         112       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11t       X         113       Is the organization answerd "No" to line 12a, then completing Schedule D, Part X and XI is optional       112a       X         114       Did the organization maintain an office, employees, or agents outside of the United States?       11a       X         115       Did the organization maintain an office, employees, or agents outside of the United States?       11a       X         114       Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraisin			11a		X
c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX       11d       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11t       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule D, Part X and XII is optional       11z       X         14a       Did the organization naminatian on office, employees, or agents outside of the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization?       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of a	b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11td       X         12       Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11td       X         12       Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII       12a       X         b Was the organization asswered "No" to line 12a, then completing Schedule D, Part X line other assistance to nor one of the organization as achool described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule E       13       X         14a       X       14a       X         15       Did the organization nawered "No" to line 12a, then completing Schedule E       14a       X         14a       Did the organization nawered "No" to line 12a, then completing Schedule E       13       X         14a       X       14a       X       14a			11b		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11e       X         12a       Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization iscluded in consolidated, independent audited financial statements for the tax year?       11f       X         13       the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         14a       Did the organization aschool described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule E       13       X         14a       Did the organization nave aggregate revenues or expenses of more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       16       X         16       X       17	С				
Part X, line 16? If "Yes," complete Schedule D, Part IX       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII       12a       X         b Was the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         b Was the organization a school described in section 170(b)(11/0(iii)? If "Yes," complete Schedule E       13       X         13       Is the organization navered "No" to line 12a, then completing Schedule E       13       X         14a       Did the organization a school described in section 170(b)(11/0(iii)? If "Yes," complete Schedule E       13       X         14a       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X			11c		<u> </u>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11e       X         12a       Did the organization is apparte, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII       12a       X         b       Was the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       X       14a       X         15       Did the organization neored described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       X       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the P Parts II and IV       14b       X         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 any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16	d	• • •			v
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12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         12a       X       12b       X       12b       X         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization neored If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnts or other assistance to or for any foreign 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       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign 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 G, Part I       17       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, colu	T				v
Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization nave 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       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I       17       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       18       X <td>100</td> <td></td> <td></td> <td></td> <td></td>	100				
b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12         If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule G, Part II       17       X	IZd		120	x	
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report an 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 G, Part I       17       X         18       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       17       X	h	· · · · · · · · · · · · · · · · · · ·	120		
13       Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       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 G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II       17       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X </td <td>5</td> <td></td> <td>12h</td> <td></td> <td>x</td>	5		12h		x
14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign 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 II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       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 G, Part II       17       X         18       Did the organization report more than \$15,000 of appressional fundraising services on Part IX, column (A), line 3, more than gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization report more than \$15,000 of grass income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       X <td>13</td> <td></td> <td></td> <td></td> <td>X</td>	13				X
b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign 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 II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 3, more than \$5,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 12 m of the organization report than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       X       Did the organization operate					X
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       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 H       20a       X					
or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       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 H       20a       X         20a       Did the organization per more than \$15,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule H       20a       X         20a       Did the organization organization attach a					
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       X         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       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II       18       X         19       Did the organization operate one or more thospital facilities? If "Yes," complete Schedule H       20a       X         20a       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 H       20a       X         20a       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       20b       20a         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," co			14b		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       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         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 operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         16       X       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       Did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part	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			
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17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         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,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       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       20a       X	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 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,"       18       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       19       X         20a       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       20a       X		or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       19       X         20a       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       20b       20b	17				
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,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization neport 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       X			17		X
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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       X	18				
complete Schedule G, Part III       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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       X			18		<u> </u>
20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       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       X	19				v
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       X		complete Schedule G, Part III			
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       X					
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			200		<u> </u>
	21		21	x	
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	THE NATIONAL ENERGY AND UTILITY			
Form	990 (2020) AFFORDABILITY COALITION 52-	1559709	Р	age <b>4</b>
Par	t IV Checklist of Required Schedules (continued)			<u> </u>
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	nt		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J		Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of	the		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	,		
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	t l	1	
	that the transaction has not been reported on any of the organization's prior Forms 900 or 900 F72 If "Ves." complete		1 '	1

	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If Fes, complete
	Schedule L, Part I
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II
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
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV
	instructions, for applicable filing thresholds, conditions, and exceptions):
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If

a	A current of former officer, director, distee, key employee, creator of founder, of substantial contributor in
	"Yes," complete Schedule L, Part IV
b	A family member of any individual described in line 28a? If "Yes." complete Schedule L. Part IV

	, ,	,		,		
с	A 35% controlled entity of one or more individuals and/or organ	nizatic	ons described i	n lines 28a	or 28b? <i>lf</i>	
	"Yes," complete Schedule L, Part IV					
29	Did the organization receive more than \$25,000 in non-cash co	ontribu	tions? If "Yes,"	complete \$	Schedule M	
30	Did the organization receive contributions of art historical treas	sures	or other simila	rassets or	qualified conservat	rion

	contributions? If "Yes," complete Schedule M
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete
	Schedule N, Part II
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R. Part I

34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV	
	Part V, line 1	

35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	
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	

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		
	Note: All Form 990 filers are required to complete Schedule O	38	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		

	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	1a	7			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming			
	(gambling) winnings to prize winners?			1c		

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Pai	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 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
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		X
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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		L
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 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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.			
a	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:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a	-		
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
100	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	120		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	104		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
D	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a		14a		x
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			
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Form **990** (2020)

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Form 990 (2020)

#### THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION

Form 990 (2020)

52-1559709 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	Check if Schedule O contains a response or note to any line in this Part VI					2
Sec	tion A. Governing Body and Management					
				1	Yes	1
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	32			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	32			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with any other				
	officer, director, trustee, or key employee?		2			1
3	Did the organization delegate control over management duties customarily performed by or under th					
	of officers, directors, trustees, or key employees to a management company or other person?	-	3			2
4	Did the organization make any significant changes to its governing documents since the prior Form S					
5	Did the organization become aware during the year of a significant diversion of the organization's as					
6	Did the organization have members or stockholders?		····	_	Х	
	Did the organization have members, stockholders, or other persons who had the power to elect or ap		–			_
1 d			-		x	
	more members of the governing body?		78	1		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, s		_			
	persons other than the governing body?		<b>7</b> 1	<b>)</b>		
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?		88		X	
b	Each committee with authority to act on behalf of the governing body?		81	<b>)</b>	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached at the				
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9			
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)				
				١	Yes	
0a	Did the organization have local chapters, branches, or affiliates?		10	a		
	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10	ь		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod				х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	, serere ining the left.		-		
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12		х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				x	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Y</i>		12			
			10		x	
	in Schedule O how this was done				X	
	Did the organization have a written whistleblower policy?			_	X	
14	Did the organization have a written document retention and destruction policy?		14	•	^	
15	Did the process for determining compensation of the following persons include a review and approva	•				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			a	Х	
b	Other officers or key employees of the organization		15	b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment with a				
	taxable entity during the year?		16	a		
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its participation				
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization's				
b			16	b		
b	exempt status with respect to such arrangements?					
	exempt status with respect to such arrangements?					
Sec	tion C. Disclosure					ał
ec <sup>:</sup>	tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed	nd 990-T (Section 501)	c)(3)s o	nlv) :	avail	
Sec	tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed ▶       NONE         Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 1024 or 1024-A	nd 990-T (Section 501(	c)(3)s o	nly) a	availa	
ec <sup>:</sup>	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, at for public inspection. Indicate how you made these available. Check all that apply.		c)(3)s o	nly) i	availa	
<b>ec</b> 17 18	tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed ▶       NONE         Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply.       Own website       Another's website       X       Upon request       Other (explain	on Schedule O)				
ec <sup>:</sup>	tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed ▶       NONE         Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply.       Own website       Other (explain)         Describe on Schedule O whether (and if so, how) the organization made its governing documents, comparison of the section of th	on Schedule O)				
<b>ec</b> 17 18	tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed ▶       NONE         Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply.       Own website       Another's website       X       Upon request       Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, constatements available to the public during the tax year.	on Schedule O) onflict of interest policy				
<b>ec</b> 17 18	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, co statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's bo	on Schedule O) onflict of interest policy				
<b>ec</b> 17 18	tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed ▶ NONE         Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and         for public inspection. Indicate how you made these available. Check all that apply.         Own website       Another's website         X       Upon request       Other (explain)         Describe on Schedule O whether (and if so, how) the organization made its governing documents, constatements available to the public during the tax year.         State the name, address, and telephone number of the person who possesses the organization's book         KATRINA       METZLER	on Schedule O) onflict of interest policy				
<b>ec</b> 17 18	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, co statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's bo	on Schedule O) onflict of interest policy	, and fir	nanc	cial	
<b>6ec</b> 17 18 19	tion C. Disclosure         List the states with which a copy of this Form 990 is required to be filed ▶ NONE         Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and         for public inspection. Indicate how you made these available. Check all that apply.         Own website       Another's website         X       Upon request       Other (explain)         Describe on Schedule O whether (and if so, how) the organization made its governing documents, constatements available to the public during the tax year.         State the name, address, and telephone number of the person who possesses the organization's book         KATRINA       METZLER	on Schedule O) onflict of interest policy	, and fir	nanc		

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

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

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

AFFORDABILITY COALITION

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.

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

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

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

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

See 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.

(A) Name and title	(B) Average hours per	(do box	not cl	(C) Position ot check more than one nless person is both an r and a director/trustee)				<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Offlicer		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) KATRINA METZLER	40.00			37				122 746	0	
EXECUTIVE DIRECTOR	1 00			Х				132,746.	0.	28,022.
(2) SAUNTEEL JENKINS	1.00	37		37					0	0
PRESIDENT	1 00	X		Х				0.	0.	0.
(3) MIKE BRADFORD	1.00			37					0	0
PAST PRESIDENT	1 00			Х				0.	0.	0.
(4) RHONDA HARPER	1.00	v		v					0	0
1ST VICE CHAIR	1 00	Х		Х				0.	0.	0.
(5) KIM CAMPBELL	1.00	v		x				0.	0.	0
2ND VICE CHAIR	1.00	X		Λ				0.	0.	0.
(6) MARY WILKINS	1.00	v		x				0.	0.	0
TREASURER	1.00	X		Λ				0.	0.	0.
(7) BRENDA WATSON	1.00	x		x				0.	0.	0.
SECRETARY (THRU JUNE)	1.00	^		Δ				0.	0.	0.
(8) KIM RIKALO SECRETARY	1.00	x		х				0.	0.	0.
(9) ARIEL DREHOBL	1.00	^		Δ				0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(10) BONNIE TEMME	1.00	~						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(11) CELIA ANDRADE	1.00								0.	
DIRECTOR	1.00	x						0.	0.	0.
(12) CHERE COLEMAN	1.00								••	
DIRECTOR		x						0.	Ο.	0.
(13) CHERYL STOWELL	1.00									
DIRECTOR		x						0.	Ο.	0.
(14) CONNIE SANCHEZ	1.00							•		
DIRECTOR		х						0.	Ο.	0.
(15) DAVID CONN	1.00									
DIRECTOR		х						0.	0.	0.
(16) DAVID RINEBOLT	1.00									
DIRECTOR		х						0.	0.	0.
(17) EDITH BALTIERREZ	1.00									
DIRECTOR		х						0.	Ο.	0.
032007 12-23-20						_				Form <b>990</b> (2020)

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Form 990 (2020) AFFORDAB	ILITY CO	CAC	LI?	ΓIC	ΟN				52-1559	9709	Р	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	rees	, and	d Hi	ghe	st C	Compensated Employe	es (continued)			
(A)	(B)			<u>,</u> (0		<u> </u>		(D)	(E)		(F)	
Name and title	Average			Pos	itior	ı		Reportable	Reportable	E	stimate	-d
	hours per			heck ss pe					compensation		nount	
	week			nd a d				from	from related		other	
	(list any	ctor						the	organizations	con	npensa	
	hours for	direc				pe		organization	(W-2/1099-MISC)		rom th	
	related	tee or	Istee			ensat		(W-2/1099-MISC)		org	ganizat	ion
	organizations	trus	nal tru		yee	ompe				an	d relat	ed
	below	Individual trustee or director	Institutional trustee	er	Key employee	est ci lo yee	Jer			org	anizati	ons
	line)	Indiv	Insti	Officer	Keye	Highest compensated employee	Former					
(18) FAYE KINNER	1.00											
DIRECTOR		X						0.	0.			0.
(19) FRANK RAPLEY	1.00											
DIRECTOR		x						0.	0.			0.
(20) GERRI DRUMMOND	1.00											
DIRECTOR	1.00	x						0.	0.			Ο.
	1.00						<u> </u>	0.	0.	<u>'</u>		0.
(21) JACQUIE MOSS	1.00							0	0			0
DIRECTOR	1 00	X						0.	0.	·		0.
(22) JOE DIAMOND	1.00											
DIRECTOR		Х						0.	0.	,		0.
(23) JOHN RICH	1.00											
DIRECTOR		X						0.	0.	,		Ο.
(24) KATHLEEN KERR	1.00											
DIRECTOR		X						0.	0.	,		Ο.
(25) KEELIE GUSTIN	1.00							-				-
DIRECTOR		x						0.	0.			0.
(26) MARIA DELAPLAIN	1.00	11								'		••
	1.00	x						0.	0.			Δ
DIRECTOR							Ļ				0 0	$\frac{0}{22}$
1b Subtotal								132,746.	0.		8,0	
c Total from continuation sheets to Part V	I, Section A							0.	0.		<u> </u>	0.
d Total (add lines 1b and 1c)								132,746.	0.	2	8,0	22.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bov	e) wl	ho r	received more than \$100	),000 of reportable			
compensation from the organization												1
											Yes	No
3 Did the organization list any former officer,	director, trust	ee, l	key (	emp	loye	e, o	r hic	phest compensated emp	oloyee on			
line 1a? If "Yes," complete Schedule J for s	uch individual			•	-					3		X
4 For any individual listed on line 1a, is the su	um of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from	the organization			
and related organizations greater than \$15			-							4	X	
5 Did any person listed on line 1a receive or a									idual for services			
rendered to the organization? If "Yes," com					-			ted organization of indiv	idual for services	5		x
Section B. Independent Contractors	piele Schedul	eji	01 5	ucn	pers	SOIT				5		- 23
· · · · · · · · · · · · · · · · · · ·									<u></u>			
1 Complete this table for your five highest co	•	•								sation	from	
the organization. Report compensation for	the calendar y	ear	endi	ing v	vith	or w	/ithi	n the organization's tax	year.			
(A)				_				(B)			C)	
Name and business	address	N	ONI	8				Description of s	services	Compe	ensatio	n
• Tatalasanaka (1.1. 1.1. 1.1. 1.1.	a altradit in the											
2 Total number of independent contractors (i	-	iot II	rnite	a to	tho	se II: N	steo	a above) who received n	iore than			
\$100,000 of compensation from the organi		<u> </u>		<u>, m -</u>			777				0000	
SEE PART VII, SECTIO	N A CON'	τŢΙ	NUZ	Α.Τ. ]	LOI	N S	эн	ББ.1.2 Г. Б. Г. Б		Form	<b>990</b> (	2020)
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#### THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION

(28) PATRICK STRICKLAND         1.00         X         0.0.0.0           DIRECTOR         1.00         X         0.0.0.0         0.00           (29) FAUL GRIFFIN         1.00         X         0.0.0.0         0.00           DIRECTOR         1.00         X         0.0.0.0         0.00           (30) SARAH SCHAFPER         1.00         X         0.0.0.0         0.00           DIRECTOR         X         0.0.0.0         0.00         0.00           (31) SILVIA ALDANA         1.00         X         0.0.0.0         0.00           DIRECTOR         X         0.0.0.0         0.00         0.00           (33) TANASIA POKE         1.00         X         0.0.0.0         0.00           DIRECTOR         X         0.0.0.0         0.00         0.00           (34) TANYA JONES         1.000         X         0.0.00         0.00           DIRECTOR         X         0.0.00         0.00         0.00           (35) TASHEENAH BROWN         1.000         X         0.0.00         0.00           DIRECTOR (THRU JUNE)         X         0.0.00         0.00         0.00           (36) ANALDERSON         1.000         X         0.0.00	Form 990 AFFORDA	BILITY CO	CAC	LI?	rI(	2NC	•			52-155	9709
Name and title         Average (star arrow of restance)         Position (star arrow of restance)         Position (sompanation being (star arrow of restance)         Reportable (sompanation the organization (W2/1099-MISC)         Estimated amount of the organization (W2/1099-MISC)           (27) MICHAEL BELL         1.000         X         0.         0.         0.           (28) FARICK SPRICKLAND         1.000         X         0.         0.         0.           (28) FARICK SPRICKLAND         1.000         X         0.         0.         0.           (23) FORM SCH SPRICKLAND         1.000         X         0.         0.         0.           DIRECTOR         1.000         X         0.         0.         0.         0.           DIRECTOR         1.000         X         0.         0.         0.         0.           DIRECTOR         1.000         X         0.         0.         0.         0.           DIRECTOR         1.000	Part VII Section A. Officers, Directors, 1	rustees, Key E	mplo	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)	
Provise prevent week (life)         (check all that apply) but s for billed organization (W2/1099-MISC)         compensation from related organizations (W2/1099-MISC)         anount of other compensation from related organizations (W2/1099-MISC)           (27) MICHARL BEL/ DIRECTOR         1.00 X         X         0         0.         0           (27) MICHARL BEL/ DIRECTOR         1.00 X         X         0.         0.         0           (27) MICHARL BEL/ DIRECTOR         1.00 X         X         0.         0.         0           (27) MICHARL BEL/ DIRECTOR         1.00 X         X         0.         0.         0           (28) FARL GRIFFIN         1.00 X         X         0.         0.         0           (33) TANASI PORE         1.00 X         X         0.         0.         0           (33) TANASI PORE         1.00 X         X         0.         0.         0           (33) TANASI PORE         1.00 X         X         0.         0.         0           (34) FARTY MILTOREH         1.00 X         X         0.         0.         0           DIRECTOR         X         0.         0.         0.         0           DIRECTOR         X         0.         0.         0.         0	(A)	(B)	(B) (C) (D)						(E)	(F)	
per hundres for generation below belo	Name and title	Average							Reportable	Reportable	Estimated
week nours for bars to ganizations in get in get			(C	heck	k all i	that	app	oly)			
(27) MICHAEL BELL       1.00       X       0.0.0.0         DIRECTOR       1.00       X       0.0.0.0         (28) PARTICK STRICKLAND       1.00       X       0.0.0.0         DIRECTOR       1.00       X       0.0.0.0         (29) PALL GRIFFIN       1.00       X       0.0.0.0         URECTOR       1.00       X       0.0.0.0         (30) GRAAM SCRAFFER       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         (31) TANABAL FOXE       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         (32) STEVE WHITWORTH       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR (THAU JUNE)       X       0.0.0.0       0       0         DIRECTOR (THAU JUNE)       X       0.0.0.0 <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td>a</td><td></td><td></td><td></td><td></td></t<>							a				
(27) MICHAEL BELL       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       X       0.0.0.0       0       0         (31) TANABLE PORE       1.00       X       0.0.0.0       0         (32) STEVE WHITWORTH       1.00       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         (33) TANABALE PORE       1.000       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR (THRU JUNE) <td></td> <td></td> <td>tor</td> <td></td> <td></td> <td></td> <td>ploye</td> <td></td> <td></td> <td><b>v</b></td> <td></td>			tor				ploye			<b>v</b>	
(27) MICHAEL BELL       1.00       X       0.0.0.0         DIRECTOR       1.00       X       0.0.0.0         (28) PARTICK STRICKLAND       1.00       X       0.0.0.0         DIRECTOR       1.00       X       0.0.0.0         (29) PALL GRIFFIN       1.00       X       0.0.0.0         URECTOR       1.00       X       0.0.0.0         (30) GRAAM SCRAFFER       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         (31) TANABAL FOXE       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         (32) STEVE WHITWORTH       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR (THAU JUNE)       X       0.0.0.0       0       0         DIRECTOR (THAU JUNE)       X       0.0.0.0 <t< td=""><td></td><td></td><td>r direc</td><td></td><td></td><td></td><td>ed em</td><td></td><td>5</td><td></td><td></td></t<>			r direc				ed em		5		
(27) MICHAEL BELL       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       X       0.0.0.0       0       0         (31) TANABLE PORE       1.00       X       0.0.0.0       0         (32) STEVE WHITWORTH       1.00       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         (33) TANABALE PORE       1.000       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR (THRU JUNE) <td></td> <td>related</td> <td>stee or</td> <td>ustee</td> <td></td> <td></td> <td>en sat</td> <td></td> <td></td> <td></td> <td>and related</td>		related	stee or	ustee			en sat				and related
(27) MICHAEL BELL       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       X       0.0.0.0       0       0         (31) TANABLE PORE       1.00       X       0.0.0.0       0         (32) STEVE WHITWORTH       1.00       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         (33) TANABALE PORE       1.000       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR (THRU JUNE) <td></td> <td>-</td> <td>al trus</td> <td>onal tr</td> <td></td> <td>loyee</td> <td>comp</td> <td></td> <td></td> <td></td> <td>organizations</td>		-	al trus	onal tr		loyee	comp				organizations
(27) MICHAEL BELL       1.00       X       0.0.0.0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       1.00       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       X       0.0.0.0       0       0         (31) TANABLE PORE       1.00       X       0.0.0.0       0         (32) STEVE WHITWORTH       1.00       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         (33) TANABALE PORE       1.000       X       0.0.0.0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       X       0.0.0.0       0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR       1.000       X       0.0.0.0       0         DIRECTOR (THRU JUNE) <td></td> <td></td> <td>dividu</td> <td>stitutio</td> <td>ficer</td> <td>y emp</td> <td>ghest</td> <td>rmer</td> <td></td> <td></td> <td></td>			dividu	stitutio	ficer	y emp	ghest	rmer			
DIRECTOR         X         0.         0.         0.           (28) PATRICK STRICKLAND         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (29) FAUL GRIFFIN         1.00         X         0.         0.         0.           (30) GARAH SCHAFFER         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (31) SILVIA ALDANA         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (32) STEVE WHITWORTH         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (33) STANSIA FOKE         1.000         X         0.         0.	(27) MICHARL BELL	,	Ē	ŝ	đ	ΥŔ	王	요 오			
(28) FATRICK STRICKLAND       1.00       X       0.00       0.00         DIRECTOR       X       0.00       0.00       0.00         (29) FAUL GRIFFIN       1.00       X       0.00       0.00         (30) SARAH SCHAFFER       1.00       X       0.00       0.00         (31) TARKTOR       X       0.00       0.00       0.00         (32) STLVIA ALDANA       1.000       X       0.00       0.00         DIRECTOR       X       0.00       0.00       0.00         (32) STEVE WHITWORTH       1.000       X       0.00       0.00         DIRECTOR       X       0.00       0.00       0.00         DIRECTOR (THRU JUNE)		1.00	x						0.	0.	0.
(29) PAUL GRIFFIN       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         OIRSCTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         OIRSCTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       1.000       X       0.       0.       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0. </td <td>(28) PATRICK STRICKLAND</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(28) PATRICK STRICKLAND	1.00									
DIRECTOR         X         0.         0.         0.         0.           (30) SARAH SCHAFFER         1.00         X         0.         0.         0.           (31) SILVIA ALDANA         1.00         X         0.         0.         0.           (31) SILVIA ALDANA         1.00         X         0.         0.         0.           (32) STEVE WINTWORTH         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (31) STANASIA POKE         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (33) TANASIA POKE         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (35) TASHEENAH BROWN         1.00         X         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.           (36) ANALDERSON         1.000         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)<	DIRECTOR		x						0.	0.	0.
(30) SARAH SCHAFFER       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         031) SILVIA ALDAN       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         031) SILVIA ALDAN       1.00       X       0.       0.       0.       0.       0.         032) STEVE WHITWOTH       1.00       X       0.       0.       0.       0.       0.         01RECTOR       X       0.	(29) PAUL GRIFFIN	1.00									
DIRECTOR         X         0.         0.         0.         0.           (31) SILVIA ALDANA         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (32) STEVE WHITWORTH         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (34) TANYA JONES         1.000         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (35) ATASHEENAH BROWN         1.000         X         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         <	DIRECTOR		Х						0.	0.	0.
(31) SILVIA ALDANA       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (32) STEVE WHITWORTH       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         01RECTOR       X       0.       0.       0.       0.       0.       0.       0.         01RECTOR       X       0.	(30) SARAH SCHAFFER	1.00									
DIRECTOR         X         0.         0.         0.         0.           (32) STEVE WHTWORTH         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (33) TANASIA POKE         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           OLIBECTOR         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           OLIBECTOR         THRU JUNE)         X         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.           OLIBECTOR (THRU JUNE)         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.	DIRECTOR		Х						0.	0.	0.
(32) STEVE WHITWORTH       1.00       X       0.       0.       0.         DIRECTOR       1.00       X       0.       0.       0.       0.         (33) TANASIA POKE       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         01RECTOR       X       0.       0.       0.       0.       0.       0.       0.         01RECTOR (THRU JUNE)       X       0.       <		1.00									0
DIRECTOR         X         0.         0.         0.           01301         TANASIA POKE         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           OIRECTOR         THRU JUNE)         X         0.         0.         0.         0.           OIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           OIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           OIRECTOR (THRU JUNE)         X         <		1 00	X						0.	0.	0.
(33) TANASIA POKE       1.00       X       0.       0.       0.         031) TANYA JONES       1.00       X       0.       0.       0.       0.         034) TANYA JONES       1.00       X       0.       0.       0.       0.       0.         01RECTOR       X       0.       0.       0.       0.       0.       0.         01RECTOR       X       0.       0.       0.       0.       0.       0.         035) TASHBEENAH BROWN       1.00       X       0.       0.       0.       0.       0.         036) ADREW BINEGAR       1.00       X       0.		1.00							0	0	0
DIRECTOR         X         0.         0.         0.           0(34) TANYA JONES         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           DIRECTOR         1.00         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           URACTOR (THRU JUNE)         X         0.         0.         0.         0.         0.		1.00	<u> </u>		-				0.	0.	0.
(34) TANYA JONES       1.00       X       0.       0.       0         DIRECTOR       X       0.       0.       0.       0         (35) TASHEENAH BROWN       1.00       X       0.       0.       0         DIRECTOR       X       0.       0.       0.       0       0         (36) ANREW BINEGAR       1.00       X       0.       0.       0       0         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0       0         (37) CAMI CAUDILL       1.00       X       0.       0.       0       0         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0       0         (38) DAN ALDERSON       1.000       X       0.       0.       0       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0       0       0         IRECTOR (THRU JUNE)       X       0.       0.       0.       0       0       0         IRECTOR (THRU JUNE)       X       0.       0.       0.       0       0       0       0         IRECTOR (THRU JUNE)       X       0.       0.       0       0		1.00	x						0.	0.	0.
DIRECTOR         X         0.         0.         0.           (35) TASHEENAH BROWN         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         1.00         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.         0.         0.         0.         0.           (40) SANDAM MENEZ         1.000         X         0.         0.         0.         0.           (41) SCOTT THACH         1.000         X         0.         0.         0.         0.           DIRECTOR (THRU JUNE)         X         0.		1.00									
(35) TASHEENAH BROWN       1.00       X       0.       0.       0         DIRECTOR       X       0.       0.       0.       0         (36) ANDREW BINEGAR       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (39) GARY SWAN       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (40) SANDRA MENDEZ       1.00       X       0.       0.       0         (41) SCOTT THACH       1.00       X       0.       0.       0         (42) SHERYH HIGGINS       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (43) SHERYL STEELE       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)			x						0.	0.	0.
(36) ANDREW BINEGAR       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0.00         (37) CANI CAUDILL       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0.00         (38) DAN ALDERSON       1.00       X       0.00       0.00         (39) GARY SWAN       1.00       X       0.00       0.00         (39) GARY SWAN       1.00       X       0.00       0.00         (10) SANDRA MENDEZ       1.00       X       0.00       0.00         (40) SANDRA MENDEZ       1.00       X       0.00       0.00         (41) SCOTT THACH       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0.00         (42) SHERRY HIGGINS       1.00       X       0.00       0.00         URECTOR (THRU JUNE)       X       0.00       0.00       0.00         (43) SHERYL STBELE       1.00       X       0.00       0.00       0.00         URECTOR (THRU JUNE)       X       0.00       0.00       0.00       0.00       0.00         URECTOR	(35) TASHEENAH BROWN	1.00									
DIRECTOR (THRU JUNE)       X       0.       0.       0         (37) CAMI CAUDILL       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (38) DAN ALDERSON       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (39) GARY SWAN       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (40) SANDRA MENDEZ       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (41) SCOTT THACH       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (42) SHERYH HIGGINS       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         URLECTOR (THRU JUNE)       X       0.       0.       0       0         DIRECTOR (THRU JUNE)       X	DIRECTOR		Х						0.	0.	0.
(37) CAMI CAUDILL       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0         (38) DAN ALDERSON       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0         (39) GARY SWAN       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0         (40) SANDRA MENDEZ       1.000       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0         (41) SCOTT THACH       1.000       X       0.00       0.00         (42) SHERRY HIGGINS       1.000       X       0.00       0.00         (43) SHERYL STEELE       1.000       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0.00         UIRECTOR (THRU JUNE)       X       0.00	(36) ANDREW BINEGAR	1.00									_
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(38) DAN ALDERSON       1.00       X       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.         (39) GARY SWAN       1.00       X       0.       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.       0.       0.         (40) SANDRA MENDEZ       1.00       X       0.       0.       0.       0.       0.         (41) SCOTT THACH       1.00       X       0.       0.       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.	••••	1.00	.,								0
DIRECTOR (THRU JUNE)       X       0.       0.       0         (39) GARY SWAN       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0         (40) SANDRA MENDEZ       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (41) SCOTT THACH       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (42) SHERRY HIGGINS       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (43) SHERYL STEELE       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         URACTOR (THRU JUNE)       X       0.       0.       0       0         URACTOR (THRU JUNE)       X       0.       0.       0       0         URACTOR (THRU JUNE)       X       0.       0.       0       0       0       0       0       0       <		1 00	X						0.	0.	0.
(39) GARY SWAN       1.00       X       0.00000000000000000000000000000000000		1.00							0	0	0
DIRECTOR (THRU JUNE)       X       0.       0.       0.         (40) SANDRA MENDEZ       1.00       X       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.         (41) SCOTT THACH       1.00       X       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.         (42) SHERRY HIGGINS       1.00       X       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.         (43) SHERYL STEELE       1.00       X       0.       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.       0.       0.         UIRECTOR (THRU JUNE)       X       0.       0.       0.       0.       0.       0.         UIRECTOR (THRU JUNE)       X       0.       0		1 00					-		0.	0.	0.
(40) SANDRA MENDEZ       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0.00         (41) SCOTT THACH       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0.00         (42) SHERRY HIGGINS       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0.00         (43) SHERYL STEELE       1.00       X       0.00       0.00         DIRECTOR (THRU JUNE)       X       0.00       0.00       0.00         URECTOR (THRU JUNE)       URECTOR       URECTOR       URECTOR       0.00       0.00         URECTOR (THRU JUNE)       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR		1.00	x						0.	0.	0.
DIRECTOR (THRU JUNE)       X       0.       0.       0.         (41) SCOTT THACH       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (42) SHERRY HIGGINS       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         (43) SHERYL STEELE       1.00       X       0.       0.       0         DIRECTOR (THRU JUNE)       X       0.       0.       0       0         URECTOR (THRU JUNE)       X       0.       0.       0       0       0         URECTOR (THRU JUNE)       X       0.       0.       0.       0       0       0       0       0         URECTOR (THRU JUNE)       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR       URECTOR       UR		1.00									
(41) SCOTT THACH       1.00       X       0.       0.       0.         DIRECTOR (THRU JUNE)       1.00       X       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.         (43) SHERYL STEELE       1.00       X       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.         URECTOR (THRU JUNE)       X       0.       0.       0.       0.       0.         URECTOR (THRU JUNE)       URECTOR       URECTOR       URECTOR       0.       0.       0.         URECTOR (THRU JUNE)       URECTOR       URECTOR       URECTOR       URECTOR       0.       0.	DIRECTOR (THRU JUNE)		x						0.	0.	0.
(42) SHERRY HIGGINS       1.00       X       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.         (43) SHERYL STEELE       1.00       X       0.       0.       0.       0.         DIRECTOR (THRU JUNE)       X       0.       0.       0.       0.       0.       0.	(41) SCOTT THACH	1.00									
DIRECTOR (THRU JUNE)     X     0.     0.     0.       (43) SHERYL STEELE     1.00     X     0.     0.     0.       DIRECTOR (THRU JUNE)     X     0.     0.     0.	DIRECTOR (THRU JUNE)		Х						0.	0.	0.
(43) SHERYL STEELE     1.00     X     0.0.0.0       DIRECTOR (THRU JUNE)     X     0.0.0     0.0.0	(42) SHERRY HIGGINS	1.00									
DIRECTOR (THRU JUNE) X 0. 0. 0. 0.	DIRECTOR (THRU JUNE)		Х						0.	0.	0.
	(43) SHERYL STEELE	1.00									
	DIRECTOR (THRU JUNE)		X						0.	0.	0.
Total to Part VII, Section A, line 1c			-								
Total to Part VII, Section A, line 1c						-		-			
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c			1								
Total to Part VII, Section A, line 1c											
	Total to Part VII, Section A, line 1c										

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### THE NATIONAL ENERGY AND UTILITY

			2020) AFFORDABILITY	COALITI	ON		52-1559	709 Page 9
Pa	rt V	/111						
			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
					( <b>A)</b> Total revenue	(B) Related or exempt function revenue	Unrelated	Revenue excluded
its	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
a, C			Fundraising events 1c					
Gifi İlar		d	Related organizations 1d					
ns, Simi			Government grants (contributions) 1e					
er S		f	All other contributions, gifts, grants, and	44.0 80.0				
Oth			similar amounts not included above 1f	419,732.				
pu			Noncash contributions included in lines 1a-1f	5,622.	110 732			
a C		h	Total. Add lines 1a-1f	Business Code	419,732.			
•	2	~	MEMBERSHIP DUES	900099	110,050.	110,050.		
Program Service Revenue	2	a h	ANNUAL CONFERENCE	561920	55,942.	55,942.		
Ser		c		001010				
am		d						
ogu		е						
Ā		f	All other program service revenue					
		g	Total. Add lines 2a-2f	►	165,992.			
	3		Investment income (including dividends, intere-	est, and				
			other similar amounts)		196.			196.
	4		Income from investment of tax-exempt bond p	proceeds				
	5		Royalties					
	-		(i) Real	(ii) Personal				
	6		Gross rents 6a					
			Less: rental expenses 6b Rental income or (loss) 6c					
			Not rental income or (loca)					
			Gross amount from sales of (i) Securities	(ii) Other				
	•	ŭ	assets other than inventory <b>7a</b>	()				
		b	Less: cost or other basis					
en			and sales expenses 7b					
evenue		с	Gain or (loss)					
		d	Net gain or (loss)					
Other R	8	а	Gross income from fundraising events (not					
ō			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8b	L				
			Net income or (loss) from fundraising events Gross income from gaming activities. See	····· <b>P</b>				
	J	a	Part IV, line 19					
		b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
			Gross sales of inventory, less returns					
			and allowances 10a	a				
		b	Less: cost of goods sold 10k					
		с	Net income or (loss) from sales of inventory					
S				Business Code				
Miscellaneous Revenue	11							
ven		b						
Sce		C		900099	615.			615.
ΪΣ			All other revenue		615.			010.
	12	e	Total. Add lines 11a-11d		586,535.	165,992.	0.	811.
03200		-23		F	.,			Form <b>990</b> (2020)

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# THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION

Form 990 (2020) AFFORDABILITY COAL

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

Check if Schedule O contains a response	se or note to any line in	this Part IX		
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,780.	7,780.	<b>-</b> 1	
2 Grants and other assistance to domestic	.,	.,		
individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
5 Compensation of current officers, directors,				
trustees, and key employees	160,768.	96,462.	32,153.	32,153.
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,875.	5,325.	1,775.	1,775.
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	12 510	0 1 1 1		0 804
9 Other employee benefits	13,519. 78,824.	8,111. 47,294.	2,704. 15,765.	2,704. 15,765.
10 Payroll taxes	/8,824.	47,294.	15,/05.	15,/05.
<b>11</b> Fees for services (nonemployees):				
a Management				
b Legal	10,965.		10,965.	
c Accounting d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,				
column (A) amount, list line 11g expenses on Sch 0.)	148,136.	109,056.	16,364.	22,716.
12 Advertising and promotion				
13 Office expenses	8,337.	1,829.	6,508.	
14 Information technology	11,602.	6,962.	2,320.	2,320.
15 Royalties	17 064	10 770	2 5 0 2	2 502
16 Occupancy	17,964. 5,560.	10,778. 3,336.	3,593. 1,112.	3,593. 1,112.
17 Travel	5,50U.	3,330.	1,112.	1,112.
<b>18</b> Payments of travel or entertainment expenses				
for any federal, state, or local public officials <b>19</b> Conferences, conventions, and meetings	72,621.	71,587.	1,034.	
	72,021.	/1,50/.	1,0510	
20       Interest         21       Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	4,543.		4,543.	
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 0.)				
- <sup>/</sup> · · / [				
ab				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	549,494.	368,520.	98,836.	82,138.
<b>26 Joint costs</b> . Complete this line only if the organization				
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2020)

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Form 990	(2020)
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#### THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION

	1 990 (			52-	1559709 Page <b>11</b>
Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	522,662.	1	282,335.
	2	Savings and temporary cash investments	329,520.	2	525,920.
	3	Pledges and grants receivable, net	113,000.	3	161,500.
	4	Accounts receivable, net		4	
	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		5	
	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)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	22,757.	9	16,542.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b			10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	987,939.	16	986,297.
	17	Accounts payable and accrued expenses	30,784.	17	10,326.
	18	Grants payable		18	
	19	Deferred revenue	68,575.	19	50,350.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to any current or former officer, director,			
liti		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26	Total liabilities. Add lines 17 through 25	99,359.	26	60,676.
S		Organizations that follow FASB ASC 958, check here $\blacktriangleright$ X			
ő		and complete lines 27, 28, 32, and 33.			
Net Assets or Fund Balances	27	Net assets without donor restrictions	630,580.	27	665,621.
Ä	28	Net assets with donor restrictions	258,000.	28	260,000.
ŭ		Organizations that do not follow FASB ASC 958, check here 🕨 📖			
Ĕ		and complete lines 29 through 33.			
ts c	29	Capital stock or trust principal, or current funds		29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
ťÅ	31	Retained earnings, endowment, accumulated income, or other funds		31	
Re	32	Total net assets or fund balances	888,580.	32	925,621.
	33	Total liabilities and net assets/fund balances	987,939.	33	986,297.

Form **990** (2020)

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	THE NATIONAL ENERGY AND UTILITY				
Form	1990 (2020) AFFORDABILITY COALITION	52-155	9709	Pa	ge <b>1</b> 2
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,5	
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,4	
3	Revenue less expenses. Subtract line 2 from line 1	3		7,0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	88	8,5	80
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			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	92	5,6	21
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	e 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 compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sc	hedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	-			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	uired audit			

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

Form 990 (2020)

3b

032012 12-23-20

SC	HEDUL	EA									OMB No. 1545-0047	
(Fo	rm 990 oi	r 990-EZ)				blic Charity Status and Public Support					2020	
				Co		te if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.					2020	
	tment of the				l l	Attach to Form 990 or	Form 990-	EZ.			Open to Public	
	al Revenue S					gov/Form990 for instruct			nformation.		Inspection	
Nam	e of the o	organizati	on			ENERGY AND U	ILITY	-			identification number	
De		<u> </u>	(a.v. F			COALITION					2-1559709	
						S. (All organizations must				18.		
						is: (For lines 1 through 12,						
1						ation of churches describe			1)(A)(i).			
	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)											
<ul> <li>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</li> <li>A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter 1</li> </ul>							the beenitel's name					
4		y, and state		i organiza	ation operated in	conjunction with a hospita	a describe	u in sectio		Jun). Enter	the hospital's hame,	
5	·			erated fo	or the benefit of a	college or university owne	d or opera	ted by a d	overnmental	init descrit	ned in	
5		-	-		omplete Part II.)			icu by a g	overnmentar			
6						rnmental unit described in	section 1	70(b)(1)(A)	(v).			
7				-	-	stantial part of its support				he general	public described in	
					omplete Part II.)							
8		-				(b)(1)(A)(vi). (Complete Pa	rt II.)					
9	🗌 An	agricultura	al rese	earch org	anization describ	oed in section 170(b)(1)(A)	(ix) operate	ed in conju	unction with a	land-grant	college	
	or	university o	or a n	on-land-g	rant college of a	griculture (see instructions	. Enter the	name, cit	y, and state o	f the colleg	le or	
	uni	iversity:										
10	📖 An	organizatio	on tha	at normal	ly receives (1) mo	ore than 33 1/3% of its sup	port from	contributio	ons, members	hip fees, a	nd gross receipts from	
	act	tivities relat	ted to	its exem	npt functions, sub	pject to certain exceptions	and (2) no	more tha	n 33 1/3% of	its support	from gross investment	
	inc	ome and u	Inrela	ted busin	iess taxable inco	me (less section 511 tax) f	rom busine	esses acqu	uired by the o	rganization	after June 30, 1975.	
			-		nplete Part III.)							
11		-		-	-	lusively to test for public s	-					
12		-		-	-	lusively for the benefit of,	-			-		
						ribed in section 509(a)(1)					Sheck the box in	
			-			e of supporting organization		-		-	( diving	
а					-	d, supervised, or controlled o regularly appoint or elect	•					
				-		, Sections A and B.	amajonty				apporting	
b		-				sed or controlled in conne	ction with i	ts support	ed organizatio	on(s), by ha	avina	
-			•••		•	organization vested in the			•		•	
						IV, Sections A and C.				5 1	,	
с	ר 🗌 ו	ype III fun	nction	nally inte	grated. A suppor	rting organization operated	l in connec	tion with,	and functiona	lly integrat	ed with,	
	it	ts supporte	ed org	ganizatior	n(s) (see instructi	ons). You must complete	Part IV, Se	ections A,	D, and E.			
d	ר 🗌 ו	Type III noi	n-fun	ctionally	<b>integrated.</b> A su	upporting organization ope	rated in co	nnection \	with its suppo	rted organ	ization(s)	
	t	hat is not f	unctio	onally inte	egrated. The orga	anization generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness	
	r	equiremen	t (see	e instructi	ons). <b>You must d</b>	complete Part IV, Section	s A and D	, and Part	۷.			
е		Check this	box if	f the orga	nization received	a written determination fr	om the IRS	6 that it is a	а Туре I, Туре	II, Type III		
		-	-	-	•	ctionally integrated suppor					]	
g		the followi me of suppo	<u> </u>	formation	about the suppo (ii) EIN	orted organization(s). (iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount o	fmonetary	(vi) Amount of other	
		organization				(described on lines 1-10	in your govern Yes	anization listed ing document? <b>No</b>	support (see ii		support (see instructions)	
		-				above (see instructions))	103					
											ļ	
Tota												
LHA	For Pape	erwork Re	ducti	on Act N	otice, see the In	istructions for Form 990 $1$		032021 01	-25-21 Sche	dule A (Fo	rm 990 or 990-EZ) 2020	

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#### 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.)

Se	Section A. Public Support								
Cale	endar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	(d) 2019	(e) 2020	<b>(f)</b> Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	259,955.	239,821.	490,702.	458,950.	419,732.	1869160.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge $\dots$								
4	Total. Add lines 1 through 3	259,955.	239,821.	490,702.	458,950.	419,732.	1869160.		
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)						723,030.		
6	Public support. Subtract line 5 from line 4.						1146130.		
Se	ction B. Total Support								
Cale	endar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	(b) 2017 239,821.	(c) 2018	(d) 2019	(e) 2020	(f) Total		
7	Amounts from line 4	259,955.	239,821.	490,702.	458,950.	419,732.	1869160.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources $\dots$	570.	156.	338.	1,330.	196.	2,590.		
9	Net income from unrelated business								
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10						1871750.		
12	Gross receipts from related activities,	etc. (see instructi	ons)		•	12 1	,922,723.		
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3)			
	organization, check this box and stop	here							
Se	ction C. Computation of Publ	ic Support Pe	rcentage						
14	Public support percentage for 2020 (	line 6, column (f), c	livided by line 11,	column (f))		14	61.23 %		
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	65.87 %		
<b>16</b> a	1 33 1/3% support test - 2020. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo			
	stop here. The organization qualifies	as a publicly supp	orted organizatior				► X		
k	<b>33 1/3% support test - 2019.</b> If the o	organization did no	t check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box		
	and stop here. The organization qual	ifies as a publicly s	supported organiz	ation					
17a	10% -facts-and-circumstances tes	t - 2020. If the org	anization did not o	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the fact	s-and-circumstanc	es test, check this	s box and <b>stop he</b>	re. Explain in Part	VI how the organiz	ation		
	meets the facts-and-circumstances te	est. The organization	on qualifies as a p	ublicly supported of	organization	-			
b	0 10% -facts-and-circumstances tes	t - 2019. If the org	anization did not o	heck a box on line					
	more, and if the organization meets th	-							
	organization meets the facts-and-circ								
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	Ind see instruction	s ►		
					Scho	dule A (Form 990	or 900-E7) 2020		

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### Schedule A (Form 990 or 990 EZ) 2020 AFFORDABILITY COALITION

#### 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.)

1	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	(b) 2017	(c) 2018	(d) 2019	(e)	2020	(f) Total
· · ·	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in							
	any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus- iness under section 513							
	Tax revenues levied for the organ-							
	ization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
	Total. Add lines 1 through 5			+		<u> </u>		
ı a	Amounts included on lines 1, 2, and							
h	3 received from disqualified persons Amounts included on lines 2 and 3 received							
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b							
	Public support. (Subtract line 7c from line 6.)							
ec	tion B. Total Support							
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e)	2020	(f) Total
	Amounts from line 6	(4) 2010			(4) 2010	(0)	2020	(i) fotul
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b							
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
2	Other income. Do not include gain or loss from the sale of capital							
3	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)							
	<b>First 5 years.</b> If the Form 990 is for th	e organization's fi	rst. second. third.	fourth, or fifth tax	vear as a section !	1 501(c)(3)	organizati	on.
4	-	e erganzanen e n			-		-	► <b></b>
14	check this hox and ston here			<u></u>				
	check this box and stop here	c Support Pe						
Sec	tion C. Computation of Publi		rcentage	column (f))		15		0/
<b>ec</b> 15	tion C. Computation of Publi Public support percentage for 2020 (li	ne 8, column (f), c	<b>rcentage</b> divided by line 13,			15		%
<b>ec</b> 5	tion C. Computation of Publi Public support percentage for 2020 (li Public support percentage from 2019	ne 8, column (f), c Schedule A, Part	rcentage divided by line 13, III, line 15			15 16		%
ie 15 16	tion C. Computation of Public Public support percentage for 2020 (li Public support percentage from 2019 tion D. Computation of Invest	ne 8, column (f), c Schedule A, Part stment Incom	rcentage divided by line 13, III, line 15 e Percentage	,		16		%
5 6 6 7	tion C. Computation of Public Public support percentage for 2020 (li Public support percentage from 2019 tion D. Computation of Invest Investment income percentage for 20	ne 8, column (f), c Schedule A, Part stment Incom 20 (line 10c, colur	rcentage divided by line 13, III, line 15 e Percentage nn (f), divided by l	ine 13, column (f))		16 17		%
iec 15 16 17 18	tion C. Computation of Public Public support percentage for 2020 (li Public support percentage from 2019 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2	ne 8, column (f), c Schedule A, Part Stment Incom 20 (line 10c, colur 2019 Schedule A,	rcentage           livided by line 13,           III, line 15           e Percentage           nn (f), divided by l           Part III, line 17	ine 13, column (f))		16 17 18		% %
Sec 15 16 Sec 17 18	tion C. Computation of Public Public support percentage for 2020 (li Public support percentage from 2019 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2020. If the	ne 8, column (f), c Schedule A, Part stment Incom 20 (line 10c, colur 2019 Schedule A, organization did r	rcentage divided by line 13, III, line 15 e Percentage nn (f), divided by l Part III, line 17 not check the box	ine 13, column (f)) on line 14, and line	e 15 is more than 3	<b>16</b> <b>17</b> <b>18</b> 33 1/3%,	and line 1	% %
<b>i</b> ec 15 16 17 18 19a b	tion C. Computation of Public Public support percentage for 2020 (li Public support percentage from 2019 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2020. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2019. If the	ne 8, column (f), c Schedule A, Part stment Incom 20 (line 10c, colur 2019 Schedule A, organization did r nd stop here. The organization did r	rcentage divided by line 13, III, line 15 e Percentage nn (f), divided by l Part III, line 17 not check the box organization qual not check a box or	ine 13, column (f)) on line 14, and line ifies as a publicly s n line 14 or line 19a	e 15 is more than 3 supported organiza a, and line 16 is mo	16           17           18           33 1/3%,           ation           ore than	33 1/3%, a	% % 7 is not 
<b>i</b> ec 15 16 17 18 19a b	tion C. Computation of Public Public support percentage for 2020 (li Public support percentage from 2019 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2020. If the more than 33 1/3%, check this box ar	ne 8, column (f), c Schedule A, Part stment Incom 20 (line 10c, colur 2019 Schedule A, organization did r nd stop here. The organization did r	rcentage divided by line 13, III, line 15 e Percentage nn (f), divided by l Part III, line 17 not check the box organization qual not check a box or	ine 13, column (f)) on line 14, and line ifies as a publicly s n line 14 or line 19a	e 15 is more than 3 supported organiza a, and line 16 is mo	16           17           18           33 1/3%,           ation           ore than	33 1/3%, a	% % 7 is not 
<b>iec</b> 15 16 <b>iec</b> 17 18 19a b	tion C. Computation of Public Public support percentage for 2020 (li Public support percentage from 2019 tion D. Computation of Invest Investment income percentage for 20 Investment income percentage from 2 33 1/3% support tests - 2020. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2019. If the	ne 8, column (f), c Schedule A, Part stment Incom 20 (line 10c, colur 2019 Schedule A, organization did r nd stop here. The organization did r ck this box and st	rcentage divided by line 13, III, line 15 e Percentage nn (f), divided by l Part III, line 17 not check the box organization qual not check a box or op here. The orga	ine 13, column (f)) on line 14, and line ifies as a publicly s n line 14 or line 19a anization qualifies a	e 15 is more than 3 supported organiza a, and line 16 is mo as a publicly suppo	16           17           18           33 1/3%,           ation           ore than           orted org	33 1/3%, a anization	% % 7 is not 

#### THE NATIONAL ENERGY AND UTILITY Schedule A (Form 990 or 990-EZ) 2020 AFFORDABILITY COALITION

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? 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 or 990-EZ).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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.)

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Pa	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion 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 office	rs,		
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	ad		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
		-	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeafsee instruct	ions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	L The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (	ee instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
		0-		
	that these activities constituted substantially all of its activities.	2a		

- 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.

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

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2b

3a

3b

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#### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 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	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	Illy integra	ted Type III supporting or	anization (see

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

Schedule A (Form 990 or 990-EZ) 2020

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### THE NATIONAL ENERGY AND UTILITY

Sche	dule A (Form 990 or 990 EZ) 2020 AFFORDABILITY	COALITION		5	2-1559709 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continu</sub>	ied)	-
Sect	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemption	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	S	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		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	he organization is responsive	9		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 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-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
c	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
е	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

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Schedule A	(Form 990 or 990-EZ) 2020 AFFORI		Y AND UTILITY JITION		-1559709 Pag
Part VI	Supplemental Information. Pr Part IV, Section A, lines 1, 2, 3b, 3c, 4 line 1; Part IV, Section D, lines 2 and 3	ovide the explanations r o, 4c, 5a, 6, 9a, 9b, 9c, 1 ; Part IV, Section E, lines	equired by Part II, line 10; 1a, 11b, and 11c; Part IV, 1c, 2a, 2b, 3a, and 3b; Pa	Part II, line 17a or 17b; Section B, lines 1 and : art V, line 1; Part V, Sec	Part III, line 12; 2; Part IV, Section C, tion B, line 1e; Part V,
	Section D, lines 5, 6, and 8; and Part \ (See instructions.)	, Section E, lines 2, 5, ar	nd 6. Also complete this pa	art for any additional int	formation.
	· · · · ·				
32028 01-25-3	21		22	Schedule A (F	orm 990 or 990-EZ)
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### Schedule B

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

Name of the organization

Organization type (check one):

#### \*\* PUBLIC DISCLOSURE COPY \*\*

### Schedule of Contributors

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

OMB No. 1545-0047

2020

Employer identification number

THE	NATIONAL	ENERGY	AND	UTILITY
AFFC	ORDABILITY	COALIT	<b>FION</b>	

52-1559709

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

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

#### **General Rule**

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

#### Special Rules

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

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

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

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

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

Schedule B	(Form	990,	990-EZ,	or 990	-PF)	(2020)

noncash contributions.)

	rganization		Emplo	yer identification number
	ATIONAL ENERGY AND UTILITY DABILITY COALITION		52	-1559709
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
1		\$ <u>52,5</u>	<u>.00</u>	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
2		\$10,0	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
3		\$40,0	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
4		\$10,0	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
5		\$ <u>10,0</u>	00.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
6		\$42,5	<u>.</u>	Person X Payroll Noncash (Complete Part II for

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023452 11-25-20

Name of organization THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION

Page 2

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Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>12</u> 023452 11-25		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2020)

rm 990, 990-EZ, or 990 (⊢ -) (2

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Name of organization THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION Page 2

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Part I	Contributors (see instructions). Use duplicate copies of Part I i	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
023452 11-25		Schedule B (Form 26	990, 990-EZ, or 990-PF) (2020

Schedule B (	(Form 990,	990-EZ, or	1990-PF)	(2020)
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Name of organization

THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION

Employer identification number

52-1559709

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I MEALS FOR EVENT ATTENDEES 1 5,622. 02/27/20 \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ 023453 11-25-20 Schedule B (Form 990, 990-EZ, or 990-PF) (2020) 27 2020.04030 THE NATIONAL ENERGY AND UTI 13415\_31

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Schedule B (Form 9	990, 990-EZ,	01 990-FF) (2020)

Page	4

Name of or	rganization ATIONAL ENERGY AND UTI	LITY	Employer identification number
	DABILITY COALITION		52-1559709
Part III	Exclusively religious, charitable, etc., contrib	(a) through (e) and the following line entry. F s, charitable, etc., contributions of <b>\$1,000 or less</b>	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F		(e) Transfer of gift	
F	Transferee's name, address,	and ZIP + 4	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
-		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	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
		(e) Transfer of gift	
	Transferee's name, address,	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
		(e) Transfer of gift	_
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
023454 11-25	-20	28	Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

SCHEDULE C	CHEDULE C Political Campaign and Lobbying Activities							
(Form 990 or 990-EZ)	Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527							
	-	if the organization is describe				Open to Public		
Department of the Treasury Internal Revenue Service		Go to www.irs.gov/Form990 for				Inspection		
If the organization ans	wered "Yes," or	Form 990, Part IV, line 3, or Fo	orm 990-EZ, Part V, li	ne 46 (Political Camp	aign Acti	ivities), then		
<ul> <li>Section 501(c)(3) org</li> </ul>	ganizations: Con	nplete Parts I-A and B. Do not co	mplete Part I-C.		•			
<ul> <li>Section 501(c) (othe</li> </ul>	r than section 50	01(c)(3)) organizations: Complete	Parts I-A and C below	. Do not complete Pa	t I-B.			
<ul> <li>Section 527 organiz</li> </ul>	ations: Complete	e Part I-A only.						
-		n Form 990, Part IV, line 4, or F						
	-	have filed Form 5768 (election u			-			
	•	have NOT filed Form 5768 (elect	·	.,, .		•		
If the organization ans Tax) (See separate inst		n Form 990, Part IV, line 5 (Pro>	(y Tax) (See separate	instructions) or Form	1 990-EZ,	Part V, line 35c (Proxy		
		tions: Complete Part III.						
Name of organization	-	IONAL ENERGY AND	UTILITY		Employe	r identification number		
5		BILITY COALITION				2-1559709		
Part I-A Comple		anization is exempt und		or is a section 5				
1 Provide a description	on of the organiz	ation's direct and indirect politic	al campaign activities	in Part IV.				
2 Political campaign	activity expendit	ures			▶\$			
3 Volunteer hours for	political campai	gn activities						
Deut I D Comm	ata if tha are	enization is exempt und	lar agation E01(a)	(2)				
		anization is exempt und						
		incurred by the organization unc incurred by organization manag						
		n 4955 tax, did it file Form 4720				Yes No		
		14303 tax, did it me i onn 4720						
<b>b</b> If "Yes," describe in								
		anization is exempt und	ler section 501(c)	, except section	501(c)(3	3).		
1 Enter the amount d	irectly expended	d by the filing organization for se	ction 527 exempt func	tion activities	▶\$			
2 Enter the amount o	f the filing organ	ization's funds contributed to ot	her organizations for s	ection 527				
exempt function ac					▶\$			
-	-	. Add lines 1 and 2. Enter here a			<b>.</b> .			
					►\$			
		nployer identification number (El tion listed, enter the amount pai						
	-	omptly and directly delivered to						
	•	additional space is needed, prov				- 3 3		
(a) Name	9	(b) Address	(c) EIN	(d) Amount paid f	rom	(e) Amount of political		
(-)			(-) =	filing organization	n's coi	ntributions received and		
				funds. If none, ente		promptly and directly lelivered to a separate		
						political organization.		
						If none, enter -0		
For Paperwork Reduct	ion Act Notice,	see the Instructions for Form	990 or 990-EZ.	Sched	ule C (Fo	rm 990 or 990-EZ) 2020		

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

032041 12-02-20

Schedule C (Form 990 or 990-EZ) 2020	AFFOR	DABILI	TY COALITIC	N	52-1	559709 Page 2
Part II-A Complete if the org	anizatio	on is exe	mpt under sectio	on 501(c)(3) and fil	ed Form 5768 (e	lection under
section 501(h)). A Check ► if the filing organizat	ieve le el eve		listed success (and list in			
expenses, and share		-	• • •	n Part IV each affiliated	group member's nan	ie, address, Elin,
		, ,	nd "limited control" pro	ovisions annly		
				ovisions apply.	(a) Filing	(b) Affiliated group
		oying Expe leans amou	nditures Ints paid or incurred.	)	organization's totals	totals
1a Total lobbying expenditures to influ	ence pub	lic opinion (	grassroots lobbying)			
<b>b</b> Total lobbying expenditures to influ						
c Total lobbying expenditures (add lir	nes 1a an	d 1b)				
d Other exempt purpose expenditure						
e Total exempt purpose expenditures	s (add line	s 1c and 1c	d)			
f Lobbying nontaxable amount. Ente	r the amo	unt from the	e following table in bot	th columns.		
If the amount on line 1e, column (a) or	r (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000	,000	\$100,00	0 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,50	00,000	\$175,00	0 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	000,000	\$225,00	0 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (en	ter 25% o	f line 1f)				
h Subtract line 1g from line 1a. If zero	o or less, e	enter -0- 💠				
i Subtract line 1f from line 1c. If zero						
j If there is an amount other than zer	o on eithe	er line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this	/ear?				[	Yes No
(Some organizations th		a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns b	pelow.
	Lobb	oying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) :	2017	<b>(b)</b> 2018	(c) 2019	( <b>d)</b> 2020	<b>(e)</b> Total
2a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount						
(150% of line 2a, column(e))						
<b>c</b> Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						ł
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2020

032042 12-02-20

#### THE NATIONAL ENERGY AND UTILITY Schedule C (Form 990 or 990-EZ) 2020 AFFORDABILITY COALITION

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

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
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:				
а	Volunteers?		Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х			
с	Media advertisements?		Х		
	Mailings to members, legislators, or the public?		Х		
е	Publications, or published or broadcast statements?		Х		
	Grants to other organizations for lobbying purposes?		Х		
	Direct contact with legislators, their staffs, government officials, or a legislative body?	Х		12	2,475.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i	Other activities?		Х		
j	Total. Add lines 1c through 1i			12	2,475.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
b	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
_	t III-B Complete if the organization is exempt under section 501(c)(4), section		-	ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		····· ·		
-	expenses for which the section 527(f) tax was paid).	Jui			
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				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
7	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
			4		
5	Taxable amount of lobbying and political expenditures (See instructions)				
	t IV Supplemental Information		5		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): Part I	I-A lines 1 :	and 2 (See	
instru	ictions); and Part II-B, line 1. Also, complete this part for any additional information. TII-B, LINE 1, LOBBYING ACTIVITIES:	, not), r art r	, iin oo 1 (		
TH	E NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITI	ON AD	/OCATE	S FOR	
UT	LITY ASSISTANCE VIA SCHEDULED MEETINGS WITH STAFF	AND MI	EMBERS	OF	
<u>C01</u>	IGRESS, HOSTING AN ACTION DAY FLY-IN TO SUPPORT THE	LOW	INCOME	HOME	
ENI	ERGY ASSISTANCE PROGRAM (LIHEAP), AND LEADING OR SU	PPORT	ING EF	FORTS	
ON	VARIOUS LETTERS THROUGHOUT THE YEAR, INCLUDING THE				)-EZ) 2020
03204	3 12-02-20 <b>31</b>	Schedu		530 01 330	5 627 2020

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2020.04030 THE NATIONAL ENERGY AND UTI 13415\_31

Part IV Supplemental Information (continued) CONGRESS IN SUPPORT OF LIHEAP. ON ALL POLICY ISSUES, NEUAC STRIVES TO FORWARD OUR MISSION TO HEIGHTEN THE AWARENESS OF ENERGY NEEDS OF LIMITED INCOME HOUSEHOLDS. WE REPRESENT OUR MEMBERSHIP, WHICH INCLUDES NONPROFITS, COMMUNITY ACTION AGENCIES, FUEL FUNDS, UTILITIES, AND OTHER ENERGY AFFORDABILITY STAKEHOLDERS.

Schedule C (Form 990 or 990-EZ) 2020

032044 12-02-20

			al Financial Statements		OMB No. 1545-0047
			2020		
(Forn	n 990) Pai	t IV, line 6, 7, 8, 9, 10	anization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		
	ment of the Treasury Revenue Service		Attach to Form 990. 90 for instructions and the latest informatio	n.	Open to Public Inspection
			Y AND UTILITY		ployer identification number
		BILITY COAL			52-1559709
Par	t I Organizations Maintain	ing Donor Advise	ed Funds or Other Similar Funds or	Αссοι	unts.Complete if the
	organization answered "Yes" or	n Form 990, Part IV, lir		(1) 5	
	<b>-</b>		(a) Donor advised funds	( <b>b)</b> Fun	ids and other accounts
1 2	Total number at end of year Aggregate value of contributions to (du				
2	Aggregate value of grants from (during				
4	Aggregate value at end of year				
5			writing that the assets held in donor advised f	unds	
	are the organization's property, subject	t to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees	s, donors, and donor a	advisors in writing that grant funds can be use	d only	
	• •		or donor advisor, or for any other purpose con	•	
Do					
Par		-	ganization answered "Yes" on Form 990, Part	IV, line 7	
1	Purpose(s) of conservation easements		· · · · · · · · · · · · · · · · · · ·	storically	important land area
	Protection of natural habitat	se (ioi example, recrea	Preservation of a ce	,	•
	Preservation of open space				
2	• •	ganization held a quali	fied conservation contribution in the form of a	conserv	ation easement on the last
	day of the tax year.				Held at the End of the Tax Year
а	Total number of conservation easement	nts		. 2a	
b	Total acreage restricted by conservation				
			ructure included in (a)	. <u>2</u> c	
d			after 7/25/06, and not on a historic structure	0.4	
3			leased, extinguished, or terminated by the org		l during the tax
U	year ►	ounieu, transierreu, re	cased, extinguished, or terminated by the org	anzatio	in during the tax
4	Number of states where property subj	ect to conservation ea	sement is located		
5	Does the organization have a written p	olicy regarding the pe	riodic monitoring, inspection, handling of		
	violations, and enforcement of the con				
6	Staff and volunteer hours devoted to r	nonitoring, inspecting	handling of violations, and enforcing conserv	ation eas	sements during the year
7	Amount of expenses incurred in monit	oring, inspecting, han	dling of violations, and enforcing conservation	easeme	nts during the year
-	►\$				
8			ve satisfy the requirements of section 170(h)(4		Yes No
9			ion easements in its revenue and expense sta		
Ŭ	· · · · ·	•	note to the organization's financial statements		
	organization's accounting for conserva	ation easements.			
Par		-	f Art, Historical Treasures, or Othe	r Simil	ar Assets.
	Complete if the organization an				
1a	•		58, not to report in its revenue statement and		
			blic exhibition, education, or research in furthe	erance of	public
h			ncial statements that describes these items. 58, to report in its revenue statement and bala	nce shee	et works of
D D			c exhibition, education, or research in furthera		
	provide the following amounts relating		,,,,,,,		- ,
				►	\$
					\$
2			asures, or other similar assets for financial ga	n, provic	le
	the following amounts required to be n			•	<b>^</b>
a h					\$
	Assets included in Form 990, Part X		s for Form 990		\$ Schedule D (Form 990) 2020
		, see the matrix uction			Sonedule D (FUIII 330) 2020
			2.2		

	THE NAT	IONAL ENER	GY AI	ND UTI	LITY						
Sche	dule D (Form 990) 2020 AFFORDA	BILITY COA	LITI	ON			5	2-15	59709	) Р	age <b>2</b>
Par	t III Organizations Maintaining C	Collections of A	rt, Hist	orical Tr	easures, or C	Other	Similar	<sup>r</sup> Asse	ts(contin	ued)	
3	Using the organization's acquisition, access	ion, and other record	ds, check	any of the	following that ma	ake sigr	nificant u	se of its			
	collection items (check all that apply):										
а	Public exhibition	c	i 🛄 i	oan or exc	hange program						
b	Scholarly research	e	, LI (	Other							
с	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explai	in how th	ey further t	he organization's	s exemp	ot purpos	e in Par	t XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, his	storical trea	sures, or other si	imilar as	ssets		_	_	_
	to be sold to raise funds rather than to be m								Yes		No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered "Yes	s" on Fo	orm 990,	Part IV,	line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.									
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for o	contribution	ns or other assets	s not ind	cluded	_	_	_	_
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	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 amount on F	orm 990, Part X, line	e 21, for e	scrow or cu	ustodial account	liability	?	L	Yes		No
_	If "Yes," explain the arrangement in Part XIII						<u></u>				
Par	<b>t V</b> Endowment Funds. Complete	if the organization ar	nswered	"Yes" on Fo							
		(a) Current year	<b>(b)</b> Pi	rior year	(c) Two years ba	ick (d)	Three yea	ars back	(e) Four	years	back
	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rrent year end baland	ce (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Term endowment	<u>%</u>									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	t are held a	nd administered	for the	organiza	tion	F		
	by:									Yes	No
	(i) Unrelated organizations								. 3a(i)		
	(ii) Related organizations								. 3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization								. 3b		
4	Describe in Part XIII the intended uses of the		owment f	unds.							
Par	t VI Land, Buildings, and Equipn										
	Complete if the organization answere	ed "Yes" on Form 990	0, Part IV	, line 11a. S	See Form 990, Pa	art X, lin	e 10.				
	Description of property	(a) Cost or c					umulated		(d) Booł	c valu	ie
		basis (investr	ment)	basis	(other)	depre	ciation				
	Land										
	Buildings										
С	Leasehold improvements										
	Equipment										
	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line 1	10c.)						0.
							So	chedule	D (Form	990	) 2020

#### THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION

Schedule D (Form 990) 2020 AFFORDABILITY	COALITION		52–1559709 <sub>Page</sub> 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" on F	Form 990, Part IV, line <sup>-</sup>	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) Financial derivatives			
(2) Closely held equity interests			
(2) Observited equity interests			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" on F	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-vear market value
(1)	( )		,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) 🕨			
Part IX Other Assets.			
Complete if the organization answered "Yes" on F	Form 990, Part IV, line <sup>.</sup>	11d. See Form 990, Part X, line 15.	
	cription		(b) Book value
(1)			
(2)			
(3)			
<u>(4)</u>			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15	.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" on F	Form 990, Part IV, line <sup>-</sup>	11e or 11f. See Form 990, Part X, line	25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25	;)		
<b>2.</b> Liability for uncertain tax positions. In Part XIII, provide the			I hat reports the
Liability for uncertain tax positions. In Fait All, provide the		, the organization s intalloid statements	1.5 1101 1500115 1115

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

Schedule D (Form 990) 2020

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Schedule D (Form 990) 2020       AFFORDABILITY COALITION       52-1559709       Page 4         Part XI       Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.         Complete if the organization answered Yes' on Form 990, Part IV, line 12a.       1       586,535.         1       Total revenue, gains, and other support per audited financial statements       1       586,535.         2       Amounts included on line 1 but not on Form 990, Part VIII, line 12:       2a       2a         1       Total revenue, gains, and other support per audited financial statements       2a       2a         2       Net unrealized gains (losses) on investments       2a       2a       2a         0       Other (Describe in Part XIII.)       2d       2e       0.         3       Subtract line 2e from line 1       3       586, 535.         4       Amounts included on Form 990, Part VIII, line 7b       4a       4b       4c       0.         5       Total revenue. Add lines 3 and 4e. ( <i>This must equal Form 990, Part I</i> , line 12.)       5       586, 535.       586, 535.         Part XIII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.       Complete if the organization answered "yes" on Form 990, Part I, line 12.)       5       586, 535.         Part XIII       Reconciliation		THE NATIONAL ENERGY AND U	FILITY		
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         1       Total revenue, gains, and other support per audited financial statements         2       Amounts included on line 1 but not on Form 990, Part VIII, line 12:         a Net unrealized gains (losses) on investments       2a         b       Donated services and use of facilities         c       Recoveries of prior year grants         d       Other (Describe in Part XIII.)         e       Add lines 2a through 2d         3       Subtract line 2e from line 1         a       as thord on Form 990, Part VIII, line 12, but not on line 1:         a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b       Other (Describe in Part XIII.)         c       Add lines 4a and 4b         d       Add lines 4a and 4b         c       Add lines 3a and 4c. (This must equal Form 990, Part IV, line 12a.         Total revenue. Add lines 1 but not on Form 990, Part IV, line 12a.       1         Total expenses and losses per audited financial statements       1         2       Amounts included on line 1 but not on Form 990, Part IV, line 12a.         1       Tota	Sche	dule D (Form 990) 2020 AFFORDABILITY COALITION	52-15	59709 Page 4	
1       Total revenue, gains, and other support per audited financial statements       1       586, 535.         2       Amounts included on line 1 but not on Form 990, Part VIII, line 12:       2a       2a         a       Net unrealized gains (losses) on investments       2a       2b         b       Donated services and use of facilities       2c       2d         c       Recoveries of prior year grants       2c       2d         d       Other (Describe in Part XIII.)       2d       2d         e       Add lines 2a through 2d       3       586, 535.         4       Amounts included on Form 990, Part VIII, line 12, but not on line 1:       3       586, 535.         4       Amounts included on Form 990, Part VIII, line 7b       4a       4c       0.         s       Other (Describe in Part XIII.)       4a       4c       0.         c       Add lines 4a and 4b       4c       0.       5       586, 535.         Part XIII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.       Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1       549, 494.         1       Total expenses and losses per audited financial statements       2a       2a       2a       0.         2       Amou	Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Reve	enue per Return.	
2       Amounts included on line 1 but not on Form 990, Part VIII, line 12:       2a         a       Net unrealized gains (losses) on investments       2a         b       Donated services and use of facilities       2b         c       C       2c         d       Other (Describe in Part XIII.)       2d         e       Add lines 2a through 2d       2e       0.         3       Subtract line 2e from line 1       3       586 , 535 .         4       Amounts included on Form 990, Part VIII, line 7b       4a       4b         b       Other (Describe in Part XIII.)       4c       0.         c       Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12</i> )       5       586 , 535 .         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.       Complete if the organization answerd "Yes" on Form 990, Part IV, line 12a.       1       549 , 494 .         1       Total expenses and use of facilities       2b       2c       0       .         2       D       D       2a       2a       2b       .       .         2       Amounts included on line 1 but not on Form 990, Part IV, line 25:       a       Donated services and use of facilities       2a       .       .       .		Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.		
a Net unrealized gains (losses) on investments       2a         b Donated services and use of facilities       2b         c Recoveries of prior year grants       2c         d Other (Describe in Part XIII.)       2d         e Add lines 2a through 2d       2e         3 Subtract line 2e from line 1       3 586, 535.         4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:       a         a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4b         c Add lines 3 and 4c. ( <i>This must equal Form 990, Part I</i> , <i>line 12</i> .)       5 586, 535.         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1 549, 494.         1 Total expenses and losses per audited financial statements       1 549, 494.         2 Amounts included on line 1 but not on Form 990, Part IV, line 12a.       1 549, 494.         3 Onher losses       2c       2a         d Other (Describe in Part XIII.)       2d       2a         2 Amounts included on line 1 but not on Form 990, Part IV, line 25.       2a       2a         2 Other losses       2b       2a       2a         3 Other losses       2a       2a	1	Total revenue, gains, and other support per audited financial statements		1	586,535.
b Donated services and use of facilities       2b         c Recoveries of prior year grants       2c         d Other (Describe in Part XIII.)       2d         e Add lines 2a through 2d       2e         3 Subtract line 2e from line 1       3 586, 535.         4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:       4a         a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4b         c Add lines 4a and 4b       4c         c Complete if the organization answered "Yes" on Form 990, Part IV, line 12.)       5         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1         1 Total expenses and losses per audited financial statements       1         2a       2a       2a         b Prior year adjustments       1       549, 494.         2 Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a         a Donated services and use of facilities       2a         b Prior year adjustments       2         c Other losses       2a         d Other (Describe in Part XIII.)       2a         a Mounts included on Form 990, Part IX, line 25, but	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
b Donated services and use of facilities       2b         c Recoveries of prior year grants       2c         d Other (Describe in Part XIII.)       2d         e Add lines 2a through 2d       2e         3 Subtract line 2e from line 1       3 586, 535.         4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:       4a         a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4b         c Add lines 4a and 4b       4c         c Complete if the organization answered "Yes" on Form 990, Part IV, line 12.)       5         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1         1 Total expenses and losses per audited financial statements       1         2a       2a       2a         b Prior year adjustments       1       549, 494.         2 Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a         a Donated services and use of facilities       2a         b Prior year adjustments       2         c Other losses       2a         d Other (Describe in Part XIII.)       2a         a Mounts included on Form 990, Part IX, line 25, but	а	Net unrealized gains (losses) on investments	2a		
c       Recoveries of prior year grants       2c         d       Other (Describe in Part XIII.)       2d         e       Add lines 2a through 2d       2e         3       Subtract line 2e from line 1       3         4       Amounts included on Form 990, Part VIII, line 12, but not on line 1:       3         a       Investment expenses not included on Form 990, Part VIII, line 7b       4a         b       Other (Describe in Part XIII.)       4b         c       Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)       5         Fort XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1       549 , 494 .         1       Total expenses and losses per audited financial statements       1       549 , 494 .         2       Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a       2a       2a         2       Donated services and use of facilities       2a       2a       2a       2a         3       549 , 494 .       3       549 , 494 .       3       549 , 494 .         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549 , 494 .       3       549 , 494 . <th>b</th> <th></th> <th></th> <th></th> <th></th>	b				
d Other (Describe in Part XIII.)       2d         e Add lines 2a through 2d       2e         3 Subtract line 2e from line 1       3         4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:       3         a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4b         c Add lines 4a and 4b       4c         0.       5         Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> )       5         Fart XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1         1 Total expenses and losses per audited financial statements       1         2 Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a         a Donated services and use of facilities       2a         b Prior year adjustments       2a         c Other losses       2c         d Other (Describe in Part XIII.)       2d         e Add lines 2a through 2d       2e         3 S49, 494.       3         4 Amounts included on Form 990, Part IX, line 25, but not on line 1:       3         a Investment expenses not included on Form 990, Part VIII, line 7b       4a <th>с</th> <th></th> <th></th> <th></th> <th></th>	с				
e Add lines 2a through 2d       2e       0.         3 Subtract line 2e from line 1       3       586, 535.         4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:       a Investment expenses not included on Form 990, Part VIII, line 7b       4a         a Investment expenses not included on Form 990, Part VIII, line 7b       4a       4c       0.         5 Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> )       5       586, 535.         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.       5       586, 535.         Complete if the organization answered "Yes" on Form 990, Part I, line 12.       5       586, 535.         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.       1       549, 494.         1 Total expenses and losses per audited financial statements       1       549, 494.       1         2 Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a       2b       2c         a Other (Describe in Part XIII.)       2d       2e       0.         3 Subtract line 2e from line 1       3       549, 494.       3         A mounts included on Form 990, Part IX, line 25, but not on line 1:       3       549, 494.       3         3 Subtract line 2e from line 1       3	d				
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:       4a         a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4c         c Add lines 4a and 4b       4c         5 Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> )       5         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         1 Total expenses and losses per audited financial statements         2 Amounts included on line 1 but not on Form 990, Part IX, line 25:         a Donated services and use of facilities         2b         Prior year adjustments         c Other losses         d Other (Describe in Part XIII.)         e Add lines 2a through 2d         3 Subtract line 2e from line 1         4 Amounts included on Form 990, Part IX, line 25, but not on line 1:         a Investment expenses not included on Form 990, Part IVIII, line 7b         4 Add lines 4a and 4b         6 Other (Describe in Part XIII.)         a Investment expenses not included on Form 990, Part IVII, line 7b         4 Add lines 4a and 4b         b Other (Describe in Part XIII.)         c Add lines 4a and 4b         5 Total ex	е			2e	0.
a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4b         c Add lines 4a and 4b       4c         5 Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> )       5 586, 535.         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1 549, 494.         1 Total expenses and losses per audited financial statements       1 549, 494.         2 Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a         a Donated services and use of facilities       2a         b Prior year adjustments       2b         c Other losses       2c         d Other (Describe in Part XIII.)       2d         e Add lines 2a through 2d       2e         3 Subtract line 2e from line 1       3 549, 494.         4 Amounts included on Form 990, Part IX, line 25, but not on line 1:       3 549, 494.         a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4b         c Add lines 4a and 4b       4c         f Amounts included on Form 990, Part IX, line 25, but not on line 1:       a Investment expenses not included on Form 990, Part VIII, line 7b	3	Subtract line 2e from line 1			586,535.
b       Other (Describe in Part XIII.)       4b       4c       0.         c       Add lines 4a and 4b       4c       0.         5       Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)       5       586, 535.         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.       5       586, 535.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1       549, 494.         1       Total expenses and losses per audited financial statements       1       549, 494.         2       Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a       2a       2a         a       Donated services and use of facilities       2a       2b       2c       2c         a       Other (Describe in Part XIII.)       2d       2e       0.       3       549, 494.         e       Add lines 2a through 2d       2e       0.       3       549, 494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549, 494.       4a         a       Investment expenses not included on Form 990, Part IX, line 75, but not on line 1:       4a       4b       6       6         b       Other (Describe in Part XIII.)	4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
c       Add lines 4a and 4b       4c       0.         5       Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)       5       586, 535.         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1       549, 494.         1       Total expenses and losses per audited financial statements       1       549, 494.         2       Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a       2a         a       Donated services and use of facilities       2a       2b       2c         b       Prior year adjustments       2a       2a       2a       2a         a       Other (Describe in Part XIII.)       2d       2e       0.         a       Subtract line 2e from line 1       3       549, 494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549, 494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549, 494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549, 494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       4a	а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
5       Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> )       5       5 86 , 535 .         Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1       549 , 494 .         1       Total expenses and losses per audited financial statements       1       549 , 494 .         2       Amounts included on line 1 but not on Form 990, Part IX, line 25:       2       2         a       Donated services and use of facilities       2a       2b       2         b       Prior year adjustments       2d       2e       0.         c       Other (Describe in Part XIII.)       2d       2e       0.         e       Add lines 2a through 2d       2e       0.       3       549 , 494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549 , 494.       4         a       Investment expenses not included on Form 990, Part VIII, line 7b       4a       4b       4c       0.         b       Other (Describe in Part XIII.)       4b       4c       0.       5       549 , 494 .         c       Add lines 4a and 4b       4c       0.       5       549 , 494 .	b	Other (Describe in Part XIII.)	4b		_
Part XII       Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.       1       549,494.         1       Total expenses and losses per audited financial statements       1       549,494.         2       Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a       1       549,494.         2       Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a       2a       2a         b       Prior year adjustments       2b       2c       2d       2d       2e       0.         3       Subtract line 2a through 2d       2a       2a       2a       2a       0.       3       549,494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       a       3       549,494.       4a       4c       0.       0.       5       549,494.       4c       0.       0.       5       549,49	с				
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.         1       Total expenses and losses per audited financial statements         2       Amounts included on line 1 but not on Form 990, Part IX, line 25:         a       Donated services and use of facilities         b       Prior year adjustments         c       Other losses         d       Other (Describe in Part XIII.)         e       Add lines 2a through 2d         3       S499, 494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:         a       Investment expenses not included on Form 990, Part VIII, line 7b         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:         a       Investment expenses not included on Form 990, Part VIII, line 7b         b       Other (Describe in Part XIII.)         c       Add lines 4a and 4b         f       4c         0       5         5       549, 494.	5				
1       Total expenses and losses per audited financial statements       1       549,494.         2       Amounts included on line 1 but not on Form 990, Part IX, line 25:       2a       2a         a       Donated services and use of facilities       2a       2b       2b         b       Prior year adjustments       2b       2c       2c         c       Other losses       2c       2d       2e       0.         3       Subtract line 2a through 2d       2e       0.       3       549, 494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549, 494.       3         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549, 494.       4e         b       Other (Describe in Part XIII.)       4a       4b       4c       0.         5       Total expenses. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 18.</i> )       5       549, 494.	Pa	rt XII Reconciliation of Expenses per Audited Financial Stater	nents With Exp	enses per Return.	
2       Amounts included on line 1 but not on Form 990, Part IX, line 25:         a       Donated services and use of facilities         b       Prior year adjustments         c       Other losses         d       Other (Describe in Part XIII.)         e       Add lines 2a through 2d         3       Subtract line 2e from line 1         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:         a       Investment expenses not included on Form 990, Part VIII, line 7b         4a       4b         b       Other (Describe in Part XIII.)         c       Add lines 4a and 4b         f       Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)         5       549 , 494 .		Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.		
a Donated services and use of facilities       2a         b Prior year adjustments       2b         c Other losses       2c         d Other (Describe in Part XIII.)       2d         e Add lines 2a through 2d       2e         3 Subtract line 2e from line 1       3         4 Amounts included on Form 990, Part IX, line 25, but not on line 1:       3         a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4b         c Add lines 4a and 4b       4c         5 Total expenses. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 18.</i> )       5         Fart XIII       Supplemental Information.	1	Total expenses and losses per audited financial statements		1	549,494.
b       Prior year adjustments       2b       2c         c       Other losses       2c       2c         d       Other (Describe in Part XIII.)       2d       2e       0.         a       Subtract line 2e from line 1       3       549,494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549,494.         a       Investment expenses not included on Form 990, Part VIII, line 7b       4a       4b         b       Other (Describe in Part XIII.)       4b       4c       0.         c       Add lines 4a and 4b       4c       0.       5       549,494.         Part XIII       Supplemental Information.       5       549,494.       5					
c       Other losses       2c       2c         d       Other (Describe in Part XIII.)       2d       2e       0.         a       Subtract line 2e from line 1       3       549,494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549,494.         a       Investment expenses not included on Form 990, Part VIII, line 7b       4a       4b         b       Other (Describe in Part XIII.)       4b       4c       0.         c       Add lines 4a and 4b       4c       0.       5       549,494.         Part XIII       Supplemental Information.       5       549,494.	а	Donated services and use of facilities	2a		
d Other (Describe in Part XIII.)       2d       2e       0.         e Add lines 2a through 2d       2e       0.         3 Subtract line 2e from line 1       3       549,494.         4 Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549,494.         a Investment expenses not included on Form 990, Part VIII, line 7b       4a       4a         b Other (Describe in Part XIII.)       4b       4c       0.         c Add lines 4a and 4b       4c       0.       5       549,494.         Part XIII Supplemental Information.       5       549,494.       5	b	Prior year adjustments	2b		
e Add lines 2a through 2d       2e       0.         3 Subtract line 2e from line 1       3       549,494.         4 Amounts included on Form 990, Part IX, line 25, but not on line 1:       3       549,494.         4 Amounts included on Form 990, Part IX, line 25, but not on line 1:       4a       4a         b Other (Describe in Part XIII.)       4b       4c       0.         c Add lines 4a and 4b       4c       0.         5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)       5       549,494.         Part XIII       Supplemental Information.       5       549,494.	С	Other losses	2c		
3       Subtract line 2e from line 1       3       549,494.         4       Amounts included on Form 990, Part IX, line 25, but not on line 1:       a       a         a       Investment expenses not included on Form 990, Part VIII, line 7b       4a       a         b       Other (Describe in Part XIII.)       4b       4c       0.         c       Add lines 4a and 4b       4c       0.         5       Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)       5       549,494.         Part XIII       Supplemental Information.       5       549,494.	d	Other (Describe in Part XIII.)	2d		
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:         a Investment expenses not included on Form 990, Part VIII, line 7b         b Other (Describe in Part XIII.)         c Add lines 4a and 4b         5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)         5 5 49, 494.	е				•••
a Investment expenses not included on Form 990, Part VIII, line 7b       4a         b Other (Describe in Part XIII.)       4b         c Add lines 4a and 4b       4c         5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)       5         Part XIII       Supplemental Information.	3	Subtract line 2e from line 1			549,494.
b Other (Describe in Part XIII.)       4b         c Add lines 4a and 4b       4c         5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)       5         Part XIII       Supplemental Information.	4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
c Add lines 4a and 4b4c0.5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)5549,494.Part XIII Supplemental Information.	а	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4</b> a		
5       Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)       5       549,494.         Part XIII       Supplemental Information.       5       549,494.	b	Other (Describe in Part XIII.)	4b		
Part XIII Supplemental Information.	С				•••
	_				549,494.
	Pa				

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.

032054 12-01-20

Schedule D (Form 990) 2020

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service		Go	Grants and Oth vernments, an ete if the organizatio	nd Individua	<b>ls in the Ŭni</b> ' on Form 990, Pa m 990.	ted States rt IV, line 21 or 22.		OMB No. 1545-0047 <b>2020</b> Open to Public Inspection
Name of the organizat	ion THE NATIO	NAL ENERG	Y AND UTILI					Employer identification number
	AFFORDABI	LITY COAL	ITION					52-1559709
Part I General Ir	nformation on Grants a	nd Assistance						
	zation maintain records							
criteria used to a	award the grants or assis	stance?						X Yes No
	IV the organization's pro							N/ line O1 for one
	d Other Assistance to hat received more than \$					anization answered	res" on Form 990, Par	tiv, line 21, for any
1 (a) Name and ad	ddress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
APPRISE 32 NASSAU STREET PRINCETON, NJ 085		45-0492689	501(C)(3)	7,780.	0.			RESEARCH THE IMPACT OF COVID-19 ON UTILITY BILLS
2 Enter total numb	per of section 501(c)(3) a	nd government or	ganizations listed in th	ne line 1 table			·	▶ <u>1.</u>
3 Enter total numb	per of other organization	s listed in the line	1 table					
LHA For Paperwork	Reduction Act Notice	, see the Instruct	ions for Form 990.					Schedule I (Form 990) 2020

#### THE NATIONAL ENERGY AND UTILITY

Schedule I (Form 990) 2020

#### 20 AFFORDABILITY COALITION

52-1559709

Page 2

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	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

NEUAC MONITORED THE PROGRESS ON THE PROJECT VIA A SERIES OF VIRTUAL

MEETINGS OVER FOUR MONTHS. A FINAL REPORT WAS PRODUCED, AS WAS A FINAL

POWERPOINT PRESENTATION HIGHLIGHTING THE FINDINGS, BOTH SUBMITTED WITHIN AN

APPROPRIATE TIMEFRAME TO NEUAC.

SC	CHEDULE J   Compensation Information	ation	OMB No.	1545-00	)47	
	Form 990) For certain Officers, Directors, Trustees, Key Empl			20		
(. 0	Compensated Employees		20	ΖυΖυ		
	Complete if the organization answered "Yes" on Forr	n 990, Part IV, line 23.	Open t	o Publ	lic	
	partment of the Treasury ernal Revenue Service ► Go to www.irs.gov/Form990 for instructions and t	he latest information.		ection		
	ame of the organization THE NATIONAL ENERGY AND UTILIT		yer identificat	ion nu	mber	
	AFFORDABILITY COALITION		2-155970			
Pa	Part I Questions Regarding Compensation					
				Yes	No	
1a	a Check the appropriate box(es) if the organization provided any of the following to or for	a person listed on Form 990.				
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regardi	•				
		e or residence for personal use				
		iness use of personal residence				
		ub dues or initiation fees				
		(such as maid, chauffeur, chef)				
		(,,,,				
b	<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy re	egarding payment or				
	reimbursement or provision of all of the expenses described above? If "No," complete F		1b			
2						
_	trustees, and officers, including the CEO/Executive Director, regarding the items check	•	2			
3	Indicate which, if any, of the following the organization used to establish the compensa	tion of the organization's				
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods use	•				
	establish compensation of the CEO/Executive Director, but explain in Part III.					
	Image: Stability of the Coordination of the Coordinatio of the Coordination of the	ent contract				
	Independent compensation consultant					
		oard or compensation committe	<u>م</u> د			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with res	pect to the filing				
-	organization or a related organization:					
а			4a		Х	
b	<b>b</b> Participate in or receive payment from a supplemental nonqualified retirement plan?				X	
c	c Participate in or receive payment from an equity-based compensation arrangement?				X	
•	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each					
	······································					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines	5-9.				
5						
	contingent on the revenues of:	- •				
а	a The organization?		5a		X	
	b Any related organization?				X	
	If "Yes" on line 5a or 5b, describe in Part III.					
6		accrue any compensation				
	contingent on the net earnings of:					
а	a The organization?		6a		X	
	b Any related organization?				X	
	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	e any nonfixed payments				
	not described on lines 5 and 6? If "Yes," describe in Part III		7		X	
8						
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," des				X	
9						
	Regulations section 53.4958-6(c)?					
LHA	A For Paperwork Reduction Act Notice, see the Instructions for Form 990.		hedule J (For	m 990	) 2020	

032111 12-07-20

#### THE NATIONAL ENERGY AND UTILITY

Schedule J (Form 990) 2020

#### AFFORDABILITY COALITION

52-1559709

Page 2

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KATRINA METZLER	(i)	132,746.	0.	0.		28,022.	160,768.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2020

#### Part III Supplemental Information

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

Schedule J (Form 990) 2020

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 52 - 1559709

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

AFFORDABILITY COALITION

THE NATIONAL ENERGY AND UTILITY

ORGANIZATIONS AND INDIVIDUALS DEDICATED TO HEIGHTENING AWARENESS OF THE

UTILITY NEEDS OF LOW INCOME UTILITY CONSUMERS, FOSTERING PUBLIC-PRIVATE

PARTNERSHIPS AND ENGAGING IN OTHER ACTIVITIES TO HELP ADDRESS THESE

NEEDS.

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

IN OTHER ACTIVITIES TO HELP ADDRESS THESE NEEDS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

ADDITION TO MEETING WITH POLICYMAKERS ON THE HILL.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERSHIP IN THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION SHALL BE OPEN TO ORGANIZATIONS WITH LOW-INCOME ENERGY/UTILITY PROGRAMS AND OTHER INDIVIDUALS, GROUPS, ORGANIZATIONS AND/OR CORPORATIONS WHICH SHARE THE PURPOSES AND OBJECTIVES OF THE ORGANIZATION.

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

THE ORGANIZATION'S MEMBERSHIP HAS THE RIGHT TO ELECT THE MEMBERS OF THE GOVERNING BODY (UP TO 35 VOTING MEMBERS) AND THE MEMBERS OF THE GOVERNING BODY ELECT THE ORGANIZATION'S OFFICERS (PRESIDENT, FIRST VICE PRESIDENT, ETC.).

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

 THE
 PREPARED
 FORM
 990
 IS
 REVIEWED
 AND
 APPROVED
 BY
 THE
 EXECUTIVE
 COMMITTEE

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) 2020
 032211
 11-20-20
 Schedule O (Form 990 or 990-EZ)
 Schedule O (Form 990 or 990-EZ) 2020
 Schedule O (Form 990 or 990-EZ) 2020

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Schedule O (Form 990 or 990-EZ) 2020	Page <b>2</b>
Name of the organization THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION	Employer identification number 52-1559709
	52 1555705
AND REVIEWED AND APPROVED BY THE GOVERNING BODY BEFORE TH	E RETURN IS FILED
WITH THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ANNUALLY ALL DIRECTORS AND OFFICERS COMPLETE AND SIGN A S	TATEMENT THAT
PROVIDES INFORMATION REGARDING THEIR INTERESTS AND THOSE	OF THEIR FAMILY
MEMBERS THAT COULD GIVE RISE TO CONFLICTS. THE MEMBERS O	F THE EXECUTIVE
COMMITTEE MAKE DETERMINATIONS OF WHETHER A CONFLICT EXIST	S AND REVIEW
ACTUAL CONFLICTS. ANY PERSON WITH A CONFLICT IS PROHIBIT	ED FROM
PARTICIPATING IN THE GOVERNING BODY'S DELIBERATIONS AND D	ECISIONS IN THE

TRANSACTION.

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

THE EXECUTIVE COMMITTEE DETERMINES THE EXECUTIVE DIRECTOR'S COMPENSATION

USING DATA ON COMPENSATION PAID BY COMPARABLE ORGANIZATIONS FOR SIMILAR SERVICES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MADE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:	
IT AND SYSTEMS CONSULTANT:	
PROGRAM SERVICE EXPENSES	34,800.
MANAGEMENT AND GENERAL EXPENSES	11,600.
FUNDRAISING EXPENSES	11,600.
TOTAL EXPENSES	58,000.

032212 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization THE NATIONAL ENERGY AND UTILITY AFFORDABILITY COALITION	Pa Employer identification num 52-1559709
CONFERENCE & EVENT PLANNING CONSULTANT:	52-1559709
PROGRAM SERVICE EXPENSES	74,25
MANAGEMENT AND GENERAL EXPENSES	, 1,23
FUNDRAISING EXPENSES	
TOTAL EXPENSES	74,25
OTHER PROFESSIONAL FEES:	
PROGRAM SERVICE EXPENSES	
MANAGEMENT AND GENERAL EXPENSES	4,76
FUNDRAISING EXPENSES	11,11
TOTAL EXPENSES	15,88
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	148,13