COMMITTEE ON NATURAL RESOURCES 113th Congress Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Oversight hearing titled "American Energy Jobs: Opportunities for States and Localities." June 18, 2014

For Individuals:

1. Name:

2. Address:

- 3. Email Address:
- 4. Phone Number:

* * * * *

For Witnesses Representing Organizations:

- 1. Name: Kateri Callahan
- 2. Name of Organization(s) You are Representing at the Hearing: Alliance to Save Energy
- 3. Business Address: 1850 M Street NW, Suite 1050, Washington DC 20036
- 4. Business Email Address: Information Redacted for Privacy
- 5. Business Phone Number: Information Redacted for Privacy

For all Witnesses

Name/Organization: <u>Kateri Callahan / Alliance to Save Energy</u> Title/Date of Hearing: <u>Oversight hearing titled</u> *"American Energy Jobs: Opportunities for States and* <u>Localities" / June 18, 2014</u>

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

B.A. Political Science, University of Louisville

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Advisory Board, the Institute for Electric Innovation Advisory Board, Duke University EDGE Center for Energy, Development, and Global Environment Board Member, UC Davis Policy Institute for Energy, Environment, and the Economy Board Member, Business Council for Sustainable Energy Former Chair of the Keystone Center Energy Board C3E Ambassador, Clean Energy Education & Empowerment (C3E) Initiative Advisory Council, U.S. Chamber of Commerce 21st Century Energy Institute

President of the Alliance to Save Energy (2004-Present) President, Electric Drive Transportation Association (1993-2004)

Full bio: http://www.ase.org/biography/kateri-callahan

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior or United States Department of Agriculture that you have received in the current year and previous four years, including the source and the amount of each grant or contract. None.

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed. None.

f. A list of all federal lawsuits filed against you by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed. None.

g. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Witnesses Representing Organizations

Name/Organization: <u>Kateri Callahan / Alliance to Save Energy</u> Title/Date of Hearing: <u>Oversight hearing titled</u> *"American Energy Jobs: Opportunities for States and* <u>Localities" / June 18, 2014</u>

h. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

President, Alliance to Save Energy

i. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior or United States Department of Agriculture that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

None.

j. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

None.

k. A list of all federal lawsuits filed against the organization(s) you represent at the hearing by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

None.

1. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Attached.

	0	0	-
Form	y	Ч	
Form		-	

** 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 black lung

benefit trust or private foundation)



> The organization may have to use a copy of this return to satisfy state reporting requirements.



A	For th	e 2010 calendar year, or tax year beginning a	nd ending			
B	Check if applicab	e: C Name of organization		D Employer identifi	cation number	
	Addre	THE ALLIANCE TO SAVE ENERGY				
	Name	Doing Business As		52-108	2991	
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	22 COLONALITY	
	Termi		600		857-0666	
		ded Other and a state and a state of a state of the state		G Gross receipts \$	12,784,520.	
				H(a) Is this a group re		
	pendi	F Name and address of principal officer:KATERI CALLAHAN		for affiliates?	Yes X No	
		SAME AS C ABOVE		H(b) Are all affiliates inc		
1.5	Tay-ay	empt status: \mathbf{X} 501(c)(3) 501(c) () (insert no.) 4947(a)	1) or 527	- COURTS	list. (see instructions)	
-		te: WWW.ASE.ORG	1)01 321	H(c) Group exemptio		
-	and the second se	organization: X Corporation Trust Association Other	I Voor		State of legal domicile: DC	
	art I	Summary			State of legal domicile. DC	
	1	Briefly describe the organization's mission or most significant activities: A CO.	ALTTION OF	GOVERNMENT		
Activities & Governance	.	BUSINESS, AND CONSUMER LEADERS DEDICATED TO INCREASE THE E		GOVERNMENT,		
nar	2	Check this box		than 25% of its not a	acto	
ver	3					
ട്	4	Number of voting members of the governing body (Part VI, line 1a)			47	
8 S	5	Number of independent voting members of the governing body (Part VI, line 1)			46	
itie	6	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		262		
tivi	0	Total number of volunteers (estimate if necessary)			45	
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.	
	D	Net unrelated business taxable income from Form 990-T, line 34			0.	
	8	Contributions and exacts (Dark)(III line th)		Prior Year	Current Year	
Revenue	9	Contributions and grants (Part VIII, line 1h)		12,111,353.	12,664,590.	
ver	100000	Program service revenue (Part VIII, line 2g)		0.	0.	
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,270.	4,665.	
	C	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		17,579.	-62,337.	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12		12,130,202.	12,606,918.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.	
	1 4433355 1	Benefits paid to or for members (Part IX, column (A), line 4)	1999 B	0.	0.	
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1		6,183,017.	7,275,110.	
Den		Professional fundraising fees (Part IX, column (A), line 11e)	000000	υ.	0.	
EX		· · · · · · · · · · · · · · · · · · ·	6,450.			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		5,666,264.	5,077,470.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	······	11,849,281.	12,352,580.	
- SS	19	Revenue less expenses. Subtract line 18 from line 12		280,921.	254,338.	
Net Assets or Fund Balances	-			ginning of Current Year	End of Year	
Bali	20	Total assets (Part X, line 16)		5,052,647.	4,761,487.	
let /	21	Total liabilities (Part X, line 26)	·····	3,296,533.	2,781,450.	
		Net assets or fund balances. Subtract line 21 from line 20		1,756,114.	1,980,037.	
	irt II	Signature Block		ante and to the best of a	in the ended as and half of the	
		tties of perjury, I declare that I have examined this return, including accompanying sched			y knowledge and belief, it is	
true,	correc	t, and complete. Deelaration of preparer (other than officer) is based on all information of	which preparer	nas any knowledge.		
		Sinchure of Atliner		Data	,	

Sign	olginature of officer	
Here	DANIEL W. HOOKS, DIRECTOR OF FINANCE Type or print name and title	1 10 7204
	Print/Type preparer's name Preparer's signature	Date Check DTIN
Paid	JAMES P. SWEENEY, CPA	FA 1, 9 r self-employed
Preparer	Firm's name RSM MCGLADREY, INC.	Firm's EIN
Use Only	Firm's address > 8000 TOWERS CRESCENT DR. STE 500	
	VIENNA, VA 22182-6205	Phone no. 703-336-6400
May the I	RS discuss this return with the preparer shown above? (see instructions)	X Yes No
032001 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instructio	ons. Form 990 (2010)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

*******	n 990 (2010) THE ALLIANCE TO SAVE ENERGY 52-1082	991 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	x
1	Briefly describe the organization's mission:	
	THE ALLIANCE TO SAVE ENERGY PROMOTES ENERGY EFFICIENCY WORLDWIDE TO	
	ACHIEVE A HEALTHIER ECONOMY, A CLEANER ENVIRONMENT, AND GREATER ENERGY	
	SECURITY.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a		1
	DEMONSTRATION PROGRAMS - DEVELOP AND IMPLEMENT PROGRAMS OF A TECHNICAL	
	ASSISTANCE OR FACILITATION NATURE TO BRING ABOUT COST EFFICIENT ENERGY	
	CONSERVATION.	
 4b	(Code:) (Expenses \$611,054, including grants of \$) (Revenue \$	1
	POLICY PROGRAMS - DEVELOP ALLIANCE POLICY POSITIONS IN THE ENERGY	,
	CONSERVATION AREA. ALSO, DESIGN AND IMPLEMENT RELATED RESEARCH	
	PROJECTS.	
4c	(Code:) (Expenses \$1,027,296. including grants of \$) (Revenue \$))
	COMMUNICATIONS PROGRAM - PRODUCE AND DISSEMINATE PUBLICATIONS	
	CONTAINING FINDINGS ON POLICY AND DEMONSTRATION PROGRAMS.	
4d	Other program services. (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
	Total program service expenses ► 12,272,950,	······································

Form 990 (2010) THE ALLIANCE TO SAVE ENERGY
Part IV Checklist of Required Schedules

52-1082991

Page 3

6.8000	enconnector negatives concauted			1
4	In the exception dependent is position $FO(1/2)(2) \approx 40.47(2)(4)$ (at her there a private formulation)?		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	4	N	
•	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			1
	during the tax year? If "Yes," complete Schedule C, Part II	4	х	İ
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			1
•	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			
Ŭ	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	<u> </u>		<u> </u>
5	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	<u> </u>		
	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, VII, VIII, IX, or X			Â
	as applicable.			
-	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a		11a	x	
*	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110	~~~	
Ű	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI	11b		x
~	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		<u> </u>
U.	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ч	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	110		<u>^</u>
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
~	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	x	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		<u> </u>
L	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
129	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111	A	
120	Schedule D, Parts XI, XII, and XIII	12a		x
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	120	·····	
U,	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1-70		
	and program service activities outside the United States? 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 assistance to any organization			1
	or entity located outside the United States? 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 assistance to individuals	<u>_</u>		†
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			- <u>n</u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<u>^^</u>
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		<u> </u>
14	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19 20a		x
20a	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	e va		<u> </u>
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		
				1

Form 990 (2010)

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Part IV Checklist	of Required Schedules (continued)

Form 990 (2010)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	21		1 7
~~	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			·
Ū	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
		2.40		
208	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		x
	disqualified person during the year? If "Yes," complete Schedule L, Part I	200		<u> </u>
Ð	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	0.51		
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>x</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
¢	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	ļ
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Х	
а	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			
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, líne 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	х	
		Form	990 (2010)

5

Yes No

THE ALLIANCE TO SAVE ENERGY

Form	990 (2010) THE ALLIANCE TO SAVE ENERGY		52-1082991		P	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance					
	Check If Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter ·0· if not applicable	1a	28			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	16	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportat	le gaming			
	(gambling) winnings to prize winners?		, , , , , , , , , , , , , , , , , , , ,	1c	X	
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	262			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	rns?		2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	s)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		••••••	3a		x
þ	······			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial	accoun	t)?	4a	X	
b	If "Yes," enter the name of the foreign country: SOUTH AFRICA , INDIA		A			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accoun	ts.			
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 transa			5b		X
¢	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					
	any contributions that were not tax deductible?			6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribu-	tions or	gifts			
	were not tax deductible?		••••••	<u>6b</u>		
7	Organizations that may receive deductible contributions under section 170(c).					18.000
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se			7a	x	~~~~~~
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			_		
	to file Form 8282?	+ 1		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	~			42000
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D				983983 1987	1
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any um	e uumug me year?	8		
9	Sponsoring organizations maintaining donor advised funds.			1	883833	10,000
a	Did the organization make any taxable distributions under section 4966?			9a		·
b	Did the organization make a distribution to a donor, donor advisor, or related person?		•••••	9b		
10	Section 501(c)(7) organizations. Enter:	10a				
a L	Initiation fees and capital contributions included on Part VIII, line 12					
b 11						
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	11a				1
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	- Tu				
	amounts due or received from them.)	116				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a	000000000	- apprecision
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			1		
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.					
ь	Enter the amount of reserves the organization is required to maintain by the states in which the					1
~	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c	· _ ·			1
				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu			14b		

Form 990 (2010

Forn	n 990 (2010) THE ALLIANCE TO SAVE ENERGY 52-10	082991	F	^{>} age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, a	nd for a "No"	respoi	nse
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI			x
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year1a	47		
b	Enter the number of voting members included in line 1a, above, who are independent 1b	46		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?			x
3	Did the organization delegate control over management duties customarily performed by or under the direct supervisio	n –		
	of officers, directors or trustees, or key employees to a management company or other person?			x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			x
6	Does the organization have members or stockholders?			x
7a				
	governing body?			x
b				x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	x	
b			x	1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		x
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates	F		
	and branches to ensure their operations are consistent with those of the organization?			
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	x	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		x	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		x
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			-
	in Schedule O how this is done	12c		x
13	Does the organization have a written whistleblower policy?		x	
14	Does the organization have a written document retention and destruction policy?		х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	<u>15b</u>	x	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	<u>16a</u>		x
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participat	ion		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL,	KS		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a	wailable for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest p	oolicy, and fin	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the o	organization:	▶	
	JOHN MAMONE - (202) 530-4357			
	1850 M. STREET, SUITE 600, WASHINGTON, DC 20036			

Form 990 (52~1082991	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest C	ompensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response to any question in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	1919/10//1 mit familie a second a second familie a second familie a second familie a second familie a second f	
1a Comple	te this table for all persons required to be listed. Report compensation for the calendar year ending with or within	the organization's tax year.	

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

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average		Position		Reportable	Reportable	Estimated			
	hours per	(0	(check all that apply)		compensation	compensation	amount of			
	week	ctor						from	from related	other
	(describe hours for	L OITO				pa		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	steeo	Tilstee			ensa		(W-2/1099-MISC)	(₩-2/1088-14130)	organization
	organizations	altra	onai t		loye	comp				and related
	in Schedule	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	O)	<u> </u>	<u> </u>	8	×	Ξъ	L C C			
PETER DARBEE										
CHAIRMAN	2,00	x		x				0.	0.	0.
HONORABLE MARK PRYOR									_	
VICE CHARIMAN	2,00	x		x	ļ			0.	0.	0.
ROBERT L. PRATT										
TREASURER	2,00	X		x	ļ			0.	0.	0.
FRANK MURRAY										
SECRETARY	2,00	X	ļ	X	ļ		ļ	0.	0.	0,
FRANCES BEINECKE										
DIRECTOR	1.00	x					ļ	0,	0.	0.
HONORABLE JEFF BINGAMAN										
DIRECTOR	1.00	x	ļ		ļ		ļ	0.	0.	0.
STEPHEN BROBECK										
DIRECTOR	1.00	X	ļ					0.	0.	0.
MICHAEL BURGESS										
DIRECTOR	1.00	x			<u> </u>		<u> </u>	0.	0.	0.
JORGE CARRASCO						ĺ				
DIRECTOR	1,00	x		ļ	ļ			0.	0.	0.
HONORABLE SUSAN COLLINS										
DIRECTOR	1.00	x						0.	0.	0.
ROBERT DIXON										
DIRECTOR	1.00	x						0.	0.	<u>0.</u>
HONORABLE BYRON DORGAN										
DIRECTOR	1,00	x			L			0.	0.	0.
THOMAS DREESSEN										
DIRECTOR	1.00	x		[0.	0.	0.
ROGER DUNCAN										
DIRECTOR	1.00	x]				0.	0.	0.
ANTHONY EGGERT										
DIRECTOR	1.00	x						0.	0.	0.
JOHN FIELDER										
DIRECTOR	1,00	x					L	0.	0.	0.
ROBERT FOSTER										
DIRECTOR	1,00	x					<u> </u>	0.	0.	0.
										Earm 000 (2010)

Form 990 (2010)

Form 990 (2010) THE ALLIANCE								52-108		Page 8
Part VII Section A. Officers, Directors, Tru	istees, Key Ei	mple	oyee	s, a	nd l	ligh	esi	t Compensated Employees (continued)		19/1
(A)	(B)			(0				(D) (E)		(F)
Name and title	Average			Pos	itior	n –		Reportable Reportable	э	Estimated
	hours per) (c	hecl	(all t	that	app	oly)	compensation compensati	on	amount of
	week	5	1			Ţ	1	from from relate	d	other
	(describe	director	1		ŀ			the organization		compensation
	hours for	6	8		[Sate		organization (W-2/1099-MI	SC)	from the
	related organizations	uste			8	uber		(W-2/1099-MISC)		organization
	in Schedule	duaí 1	tions	L	npto)	Ne CO	5			and related
	O)	Individual trustee	Institutional trustee	Officer	Key employæ	Highest compensated employee	Former			organizations
JOHN FOX										
DIRECTOR	1.00	x						0.	0.	0.
TOM GRUMBLY						-		······································		
DIRECTOR	1.00	x						0.	0.	0.
HONORABLE RALPH HALL		1	1							
DIRECTOR	1.00	x						0.	Ο.	٥.
GEOFFREY HUNT		1					1			
DIRECTOR	1.00	x						0.	Ο.	0.
HONORABLE STEVE ISRAEL							1			
DIRECTOR	1.00	x						0.	٥.	0.
TOM KING	·	1					1			
DIRECTOR	1.00	x						0.	٥.	0.
THOMAS KUHN							Γ			
DIRECTOR	1.00	x						0.	0.	0.
DEAN LANGFORD										
DIRECTOR	1.00	x						0.	٥.	0.
MICHAEL LAWRENCE										
DIRECTOR	1.00	x				ŀ		0.	٥.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VI	I, Section A					►		1,357,140.	0.	323,732.
d Total (add lines 1b and 1c)		· · · · · · ·						1,357,140.	٥.	323,732.
2 Total number of individuals (including but n	ot limited to th	iose	liste	ed at	oove	e) wł	101	received more than \$100,000 in reportat	ole	
compensation from the organization 🕨								· · · · · · · · · · · · · · · · · · ·		19
										Yes No
3 Did the organization list any former officer,	director or tru	stee	, key	/ em	ploy	yee,	or	highest compensated employee 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	m of reportab	le co	mp	ensa	tion	and	d ot	ther compensation from the organization	I	
and related organizations greater than \$150										4 X
5 Did any person listed on line 1a receive or a	ccrue compei	nsat	ion f	rom	any	unr	ela	ted organization or individual for service	3	
rendered to the organization? If "Yes," com	plete Schedul	e J f	or si	ich j	oers	ion .			<u></u>	5 X
Section B. Independent Contractors										
 Complete this table for your five highest con the executation 	npensated inc	debe	ende	nt c	ontr	acto	ors	that received more than \$100,000 of cor	npens	ation from
the organization.								(0)	T	/AL
(A) Name and business	address							(B) Description of services	6	(C) Compensation
FORUM ONE COMMUNICATIONS, 2200 MOUNT										
VERNON AVENUE, ALEXANDRIA, VA 22301								WEB CONSULTING		287,134.
INTERGY CORPORATION										
11875 DUBLIN BLVD, #A201, DUBLIN, CA 94568							CONSULTING	-	238,870.	
WILLIAM D. FAY										<u> </u>
6738 MELROSE DRIVE, MCLEAN, VA 22101								CONSULTING		233,400.
STRATEGIC ENERGY INNOVATIONS, 175 NOR	тн									
REDWOOD DR, #150, SAN RAFAEL, CA 9490								CONSULTING		152,681.
									2000000	
2 Total number of independent contractors (in \$100,000 in comparation from the organized	-	ot lir	nited	d to			stec	d above) who received more than		
\$100,000 in compensation from the organiz	auon 💌					4			1200000	

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directo		mpio	syee			ligh	est			
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	1		Posi < all t			1. 4	Reportable compensation	Reportable compensation	Estimated amount of
	hours per week	Individual trustee or director	Institutional frustee		Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensatio from the organization and related organization
		Indivic	Institu	Officer	Keyen	Highes	Former			
JULIA LEVIN										
DIRECTOR	1.00	X						0.	0.	
HONORABLE DICK LUGAR										
DIRECTOR	1,00	x						0.	0.	
HONORABLE EDWARD MARKEY		ŀ								
DIRECTOR	1.00	x	ļ					0.	0.	
DOUG MAY										
DIRECTOR	1.00	x	ļ				ļ	0.	0.	
FERRY MCCALLISTER										
DIRECTOR	1.00	x		ļ	ļ	ļ		0.	0.	
IONORABLE LISA MURKOWSKI										
DIRECTOR	1,00	X				ļ		0.	0.	
VILLIAM NITZE					[
DIRECTOR	1.00	X	ļ			ļ		0.	0.	
EARLE O'DONNELL										
DIRECTOR	1.00	x						0.	0.	
KEVIN RIES										
DIRECTOR	1.00	x						0.	0.	
JAMES ROGERS										
DIRECTOR	1.00	x	ļ					0.	0.	
JOHN ROWE										
DIRECTOR	1.00	x						0.	0.	
ROBERT SHADDOCK										
DIRECTOR	1.00	x						0.	0.	
IONORABLE JEANNE SHAHEEN			Ì							
DIRECTOR	1.00	x						0.	0.	
PETER SMITH										
DIRECTOR	1.00	x						0.	0.	
DAVE SZCZUPAK		ļ								
DIRECTOR	1.00	x						0.	0.	······
IONORABLE PAUL TONKO										
DIRECTOR	1.00	x						0.	0.	
ONORABLE MARK UDALL										
IRECTOR	1.00	x						0.	0.	
ONORABLE ZACH WAMP										
IRECTOR	1.00	x						0.	0.	
ONORABLE MARK WARNER										
IRECTOR	1.00	x						0.	0.	
YNDA ZIEGLER										
IRECTOR	1.00	x					<u></u> .	0.	0.	

Form 990 (2010) THE ALLIAN Part VII Section A. Officers, Directors,	ICE TO SAVE EN				ndl	linh		Componented Employ	52-108299	1
(A)	(B)	nipi	syee		<u>na r</u> 2)	ាឡោ	est	(D)	(E)	(F)
Name and title	Average hours	(c	heck	Pos	ition		oly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
CHARLES H. PERCY										
FOUNDING CHAIR	1,00	X		ļ	ļ	ļ		0.	0.	0
KATERI CALLAHAN			1		1					
PRESIDENT	37.50			x	-			247,915.	0.	53,285
BRIAN T. CASTELLI										
EVP	37,50			x		Ì		178,388.	0.	42,686
GAIL HENDRICKSON						1				
EVP	37.50			x		1		178,287.	0.	33,556
JOHN P. MAMONE		1				1		/	· · · · · · · · · · · · · · · · · · ·	f
CFO	37.50			x				98,239.	0.	13,412
JEFFREY HARRIS			1		1		†	f		d
SR. VICE-PRESIDENT, PROGRAMS	37.50					x		150,554.	0.	45,408
LOWELL UNGAR		1					1			
DIRECTOR POLICY	37.50					x		131,378.	0.	40,263
MERRILEE HARRIGAN		1			1		1			
VICE-PRESIDENT, EDUCATION	37.50					х		127,917.	0.	35,475
BRADFORD PENNEY		1				1				
DIRECTOR OF GOVT RELATIONS	37.50					x	Ì	135,512.	0.	18,333
LAURA VAN WIE MCGRORY										<i>L.</i>
VICE-PRESIDENT, INTERNATIONAL	37,50					x		108,950.		41,314
otal to Part VII, Section A, line 1c								1,357,140.		323,732

			IANCE TO SAV	E ENERGY			52-1082991	Page 9
Pe	<u>urt VI</u>	II Statement of Reven	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a b c d e f g	 Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributi All other contributions, gifts, grant similar amounts not included abov Noncash contributions included in lines 	1b 1c 1d ions) 1e is, and 1f					
Program Service C Revenue a	2a b c d f		nue	Business Code	12,664,590.			
	3 4 5	Investment income (including other similar amounts) Income from investment of tax Royalties	dividends, intere	est, and proceeds	4,665.			4,665.
	b c	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss)						
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	(i) Securities	(ii) Other				
Other Revenue	8 a	Net gain or (loss) Gross income from fundraising including \$433 contributions reported on line Part IV, line 18 Less: direct expenses	g events (not , <u>817 ,</u> of 1c). See a	108,454.				
ō	c 9a b	Net income or (loss) from fund Gross income from gaming ac Part IV, line 19 Less: direct expenses	raising events tivitíes. See a b	····· •	-69,148.			-69,148.
	10 a b	 a Gross sales of inventory, less returns and allowancesa b Less: cost of goods soldb c Net income or (loss) from sales of inventory 						
	11 a b c d			Business Code 900099	6,811.			6,811.
	e 12	Total. Add lines 11a-11d Total revenue. See instructions.	****		6,811. 12,606,918.	0.	0.	-57,672.

Form 990 (2010)

THE ALLIANCE TO SAVE ENERGY

Form 990 (2010) THE ALLIANCE TO SAVE Part IX Statement of Functional Expenses

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	All other organizations must cor not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
_	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees	848,407.	599,133.	249,274.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,517,723.	3,196,930.	1,158,973.	161,820
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)	129,289.	90,393.		6,820
9	Other employee benefits	1,294,647.	905,159.		48,539
10	Payroll taxes	485,044.	339,121.	128,815.	17,108
1	Fees for services (non-employees):				
a	Management				
b	Legal	33,414.	33,221.	193.	
¢	Accounting	56,095.	55,772.	323.	
d	Lobbying	107,805.	107,805.		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	2,359,624.	2,345,395.	3,566.	10,663
2	Advertising and promotion	9,781.	9,725.	56.	
13	Office expenses	663,039.	375,821.	283,268.	3,950
14	Information technology	10,192.	5,585.	4,544.	63.
15	Royalties				
6	Occupancy	1,045,796.	61,909.	983,887.	
17	Travel	634,114.	510,070.	92,410.	31,634,
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		CO1 107	00.000	
9	Conferences, conventions, and meetings	782,839.	681,167.	98,032.	3,640.
20	Interest				
1	Payments to affiliates	1 0.0		177 0/2	
22	Depreciation, depletion, and amortization	155,843.		155,843.	
3	Insurance Other expenses. Itemize expenses not covered				
24	ouner expenses, itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
а	PERIODICALS, DUES, AND	101,712.	44,014.	55,617.	2,081.
b	PRINTING AND PUBLICATIO	63,834.	54,879.	8,919.	36.
с	OTHER EXPENSES	42,639.	1,258.	41,285.	96.
d	ALLOCATED EXPENSES	~989,257.	2,855,593.	-3,844,850.	
e					
f	All other expenses				
	Total functional expenses. Add lines 1 through 24f	12,352,580.	12,272,950.	-206,820,	286,450
6	Joint costs. Check here 🕨 🛄 if following SOP				
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

solicitation

THE	ALLIANCE	TO	SAVE	ENERGY	

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112222		Datance oneer			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			180,076.	1	239,992,
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	3,312,853.
	4	Accounts receivable, net			······	4	
	5	Receivables from current and former officers, di					
		employees, and highest compensated employee of Schedule L	es. Cor	nplete Part II		5	
	6	Receivables from other disqualified persons (as					
			(58(f)(1)), persons described in section 4958(c)(3)(B), and contributing				
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instru				6	
Assets	7	Notes and loans receivable, net				7	
ISS	8	Inventories for sale or use				8	
~	9	Prepaid expenses and deferred charges				1	161,619.
	10a	Land, buildings, and equipment: cost or other		••••••••••••••••			
		basis. Complete Part VI of Schedule D	10a	1,744,222			
	b	Less: accumulated depreciation		1,163,397		10c	580,825.
	11	Investments - publicly traded securities				1	454,738.
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14		ntangible assets				
	15	Other assets. See Part IV, line 11				14 15	11,460.
	16	Total assets. Add lines 1 through 15 (must equa					4,761,487.
	17	Accounts payable and accrued expenses			1,091,850.	1	1,093,856.
	18	Grants payable			f	18	
	19	Deferred revenue				19	1,039,230.
	20	Tax-exempt bond liabilities				20	
ŝ	21	Escrow or custodial account liability. Complete f				21	
itie	22	Payables to current and former officers, director					
Liabilities		highest compensated employees, and disqualified of Schedule L	ed pers	sons. Complete Part II		22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated			······································	24	
	25	Other liabilities. Complete Part X of Schedule D					648,364.
	26	Total liabilities. Add lines 17 through 25			3,296,533.		2,781,450.
	1	Organizations that follow SFAS 117, check he					
Net Assets or Fund Balances		lines 27 through 29, and lines 33 and 34.		-			
an	27	Unrestricted net assets			1,756,114.	27	1,980,037.
Ba	28	Temporarily restricted net assets				28	
pu	29	Permanently restricted net assets		29			
ц Ц		Organizations that do not follow SFAS 117, ch					
õ		complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	1	Paid in or capital surplus, or land, building, or eq				31	······
Vet	1	Retained earnings, endowment, accumulated inc				32	
		Total net assets or fund balances			1,756,114.	33	1,980,037.
	34	Total liabilities and net assets/fund balances	5,052,647.	34	4,761,487.		

Form 990 (2010)

Form 990 (2010)
Part X Balance Sheet

Form	990 (2010) THE ALLIANCE TO SAVE ENERGY	52-1082991		Pa	ge 12
Pa	TXI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u></u>	<u></u>		x
1	Total revenue (must equal Part VIII, column (A), line 12)	1	12	,606,	,918,
2	Total expenses (must equal Part IX, column (A), line 25)	2	12	,352,	,580.
3	Revenue less expenses. Subtract line 2 from line 1	3		254	,338.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	,756,	,114.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		- 30	,415.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1	,980	037.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				x
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
b	Were the organization's financial statements audited by an independent accountant?		2b	x	<u> </u>
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?	· · · · · · · · · · · · · · · · · · ·	3a	x	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				1
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	x	L,,

Form 990 (2010)

SCHED	ULE	Α
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(Form	990	or	990-EZ)
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Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. See separate instructions.

c	MB No	. 1545	-0047	
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	иреп Посе	octiv	lonc	
	anah	COLIR		

Name of t	ne of the organization Employer		tificatio	n nur	mber
	THE ALLIANCE TO SAVE ENERGY	52-10	82991		
Part I	Reason for Public Charity Status (All organizations must complete this part.) See instruction	s.			
The organ	zation is not a private foundation because it is: (For lines 1 through 11, check only one box.)				
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).				
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)				
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).				
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the h	ospital's	s nam	ю,
	city, and state:				
5	An organization operated for the benefit of a college or university owned or operated by a governmental	unit described in			
	section 170(b)(1)(A)(iv). (Complete Part II.)				
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).				
7 X	An organization that normally receives a substantial part of its support from a governmental unit or from t	he general publi	ic descri	ibed iı	n
	section 170(b)(1)(A)(vi). (Complete Part II.)				
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)				
9	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, members				
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of				
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the or	rganization after	June 30), 197	5.
,	See section 509(a)(2). (Complete Part III.)				
10	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).				
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to c				or
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 50)9(a)(3). Check t	he box i	that	
	describes the type of supporting organization and complete lines 11e through 11h.	·			
	a Type I b Type II c Type III - Functionally integrated		oe III ∙ O		
e	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more of				n
	foundation managers and other than one or more publicly supported organizations described in section is	509(a)(1) or sect	ion pnaí	a)(2).	
f	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III				
	supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following p	······			. 1
g			Γ	Yes	No
	(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) an the governing body of the supported organization?		11g(i)	100	
	(ii) A family member of a person described in (i) above?	Г	11g(ii)		
	(iii) A 35% controlled entity of a person described in (i) above?	1	11g(iii)		
h	Provide the following information about the supported organization(s).	····· L	· · 9(**/		J
	Trevide the relevang information about the supported organization(s).				

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	in col. (i) lis	organization sted in your document?	organizat	a notify the ion in col. r support?	n col. (i) organized in the support		(vil) Amount of support
		(see instructions))	Yes	No	Yes No		Yes No		
Total									

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

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 THE ALLIANCE TO SAVE ENERGY

52-1082991 Page 2 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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	10,419,220.	8,988,013.	9,563,959.	12,111,353.	12,664,590.	53,747,135.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	10,419,220.	8,988,013.	9,563,959.	12,111,353.	12,664,590.	53,747,135.
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)						8,699,392.
6	Public support. Subtract line 5 from line 4.						45,047,743.
Sec	ction B. Total Support		1	· · · · · · · · · · · · · · · · · · ·		······	
	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	10,419,220.	8,988,013.	9,563,959.	12,111,353.	12,664,590.	53,747,135.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	ļ.,					
	and income from similar sources	31,232.	19,050.	19,529.	1,270.	4,665.	75,746.
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 IV.)	18,766.	38,674.	9,808.	8,821.	6,779.	82,848.
11	Total support. Add lines 7 through 10						53,905,729.
12	Gross receipts from related activities,	, etc. (see instructio	ons)			12	434,695.
13	First five years. If the Form 990 is for	r the organization's	s first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
	organization, check this box and stor						>
	tion C. Computation of Publ					F T	
	Public support percentage for 2010 (-			14	83,57 %
	Public support percentage from 2009					15	83.97 %
16a	33 1/3% support test - 2010. If the o	+					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	stop here. The organization qualifies						
	33 1/3% support test - 2009.If the o						
	and stop here. The organization qual						
	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					-	
	meets the "facts-and-circumstances"				-		
	10% -facts-and-circumstances tes						0% or
	more, and if the organization meets the						L []
	organization meets the "facts-and-circ						· · · · · · · · · · · · · · · · · · ·
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	ind see instructions	<u> </u>

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20)10 (f) Total
	Gifts, grants, contributions, and		<u>x-z === -</u>	<u> </u>		1	
-	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
2	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
-	organization's tax-exempt purpose						*************
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513	·······					
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	-		1			
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received			-			······
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
~	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	Lesson	1				
	ndar year (or fiscal year beginning in)	(a) 2006	(6) 2007	(a) 2009	(d) 2009	(e) 20	
	Amounts from line 6	(a) 2000	(b) 2007	(c) 2008	(0) 2009)10 (f) Total
	Gross income from interest,						
TVa	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						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization'	s first, second, thi	d, fourth, or fifth	tax vear as a sect	ion 501(c)(3)	organization.
	check this box and stop here	•					,
	tion C. Computation of Publ						
	Public support percentage for 2010 (······································	column (fl)		15	%
	Public support percentage from 2009						%
	tion D. Computation of Invest						
	Investment income percentage for 20					17	%
	Investment income percentage from						~%
	33 1/3% support tests - 2010. If the						
	more than 33 1/3%, check this box a						,
	33 1/3% support tests - 2009. If the						
	line 18 is not more than 33 1/3%, che	-					· · · · · · · · · · · · · · · · · · ·
						-	
<u></u>	Private foundation. If the organizatio	T UIU TIOL CHECK a	DOX OF SIDE 14, 19	a, OF 190, CHECK T	THIS DOX AND SEE I	ISTRUCTIONS	<u> </u>

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2010

Employer identification number

Course de	
Depann	nent of the Treasury
Internal	Revenue Service

Schedule B

(Form 990, 990-EZ, or 990-PF)

Name of the organization

Organization type (check one):

THE ALLIANCE TO SAVE ENERGY

52	-1	08	29	91	

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., purpose, charitable, etc., contributions of \$5,000 or more during the year.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 line 2 of its Form 990-PF, to certify that it does not 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) (2010)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Part I

THE ALLIANCE TO SAVE ENERGY

Contributors (see instructions)

(a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution X Person 1 Payroll Noncash 748,583. (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 2 X Person Payroll Noncash 758,943. \$ (Complete Part II if there is a noncash contribution.) (c) (a) (b) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person X 3 Payroll Noncash 2,366,315. (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 4 Person X Payroll Noncash 1,928,941. \$ (Complete Part II if there is a noncash contribution.) (c) (d) (a) (b) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 5 Person X Payroll Noncash 576,524. (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution X 6 Person Payroll Noncash \$ 316,446. (Complete Part II if there is a noncash contribution.)

1 of Part I Page 1 of

Employer identification number

52-1082991

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Name of organization

THE ALLIANCE TO SAVE ENERGY

Page of Part II of Employer identification number

52-1082991

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

	m 990, 990-EZ, or 990-PF) (2010)		Page of of Part III
Name of orga	anization		Employer identification number
Part III	INCE TO SAVE ENERGY Exclusively religious, charitable, etc., in more than \$1,000 for the year. Complet Part III, enter the total of <i>exclusively</i> religi \$1,000 or less for the year. (Enter this inf	e columns (a) through (e) and the ous, charitable, etc., contributions	
(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, a	nd 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, a	nd 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, a		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
·····			
	Ťwana 6)	(e) Transfer of gift	
	Transferee's name, address, a	10 LIP + 4	Relationship of transferor to transferee
-			······

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

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

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

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

Section 527 organizations: Complete Part I-A only.

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

Section	on 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of o	organization				Employer identification num
		CE TO SAVE ENERGY			52-1082991
Part I-A	Complete if the or	panization is exempt und	er section 501(c)	or is a section 5	27 organization.
2 Politi	cal expenditures	zation's direct and indirect politic			
Part I-f	Complete if the org	janization is exempt und	er section 501(c)	(3).	
1 Enter	the amount of any excise tax	incurred by the organization upo	ler section 4955		▶ \$
2 Enter	the amount of any excise tax	incurred by organization manage	ers under section 4958	5	▶\$
3 If the	organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes
4a Was	a correction made?				Yes
	es," describe in Part IV.				
Landar and the second s	2.3	panization is exempt und	·····		
1 Enter	the amount directly expende	d by the filing organization for se	ction 527 exempt func	tion activities	▶\$
	U U	ization's funds contributed to ot	Ŷ		
exem	pt function activities				▶\$
	······································	. Add lines 1 and 2. Enter here a		-,	
		1120-POL for this year?			
made contri	payments. For each organiza ibutions received that were pr	nployer identification number (El tion listed, enter the amount pair omptly and directly delivered to additional space is needed, prov	d from the filing organi a separate political org	zation's funds. Also er janization, such as a s	nter the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fi filing organization funds. If none, ente	n's contributions received

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

Schedule C (Form 990 or 990-EZ) 2010

OMB No. 1545-0047

Open to Public

Inspection

365

Schedule C (Form 990 or 990-EZ) 2010			r = E(14(a)/2) and fill	52-108	2991 Page 2
Part II-A Complete if the org		npt under sectio	n 501(c)(3) and th	ea Form 5768	
(election under sec				, <u>, , , , , , , , , , , , , , , , , , </u>	
	tion belongs to an affi	* .			
B Check 🕨 🔄 if the filing organiza	tion checked box A ar	nd "limited control" pro	wisions apply.		
	ts on Lobbying Expe litures" means amou	nditures ints paid or incurred.))	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influ	uence public opinion (grass roots lobbying)		5,806.	
b Total lobbying expenditures to influ	ence a legislative boo	y (direct lobbying)		101,999.	
c Total lobbying expenditures (add li	nes 1a and 1b)			107,805.	
d Other exempt purpose expenditure	es			12,244,775.	
e Total exempt purpose expenditure				12,352,580.	
f Lobbying nontaxable amount. Ente	er the amount from the	e following table in bot	h columns.	767,629.	
If the amount on line 1e, column (a) o	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	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000				
Over \$1,500,000 but not over \$17,	000,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			
g Grassroots nontaxable amount (en	ter 25% of line 1f)			191,907.	
h Subtract line 1g from line 1a. If zero		0,			
i Subtract line 1f from line 1c. If zero	or less, enter -0-			0.	
j If there is an amount other than zer	ro on either line 1h or l	line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
	4-Year Ave	raging Period Under	Section 501(h)		
			n do not have to com		
co	lumns below. See the	e instructions for line	s 2a through 2f on pa	ige 4.)	
	Lobbying Exper	ditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	623,318.	640,197.	742,464.	767,629.	2,773,608.
b Lobbying ceiling amount					
(150% of line 2a, column(e))					4,160,412.
c Total lobbying expenditures	45,109.	123,725.	35,668.	107,805.	312,307.
d Grassroots nontaxable amount	155,830.	160,049.	185,616.	191,907.	693,402.
e Grassroots ceiling amount		,			······································
(150% of line 2d, column (e))					1,040,103.
f Grassroots lobbying expenditures		13,741.	571.	5,806.	20,118.
				Schedule C (Form S	990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 THE ALLIANCE TO SAVE ENERGY 52-1082991 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)).

		(č	a)	(b	}
		Yes	No	Amo	unt
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?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se		
			·	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."	t III-A, li	ne 3 is a		
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year		1		
	Carryover from last year				
	Total		· · · · · · · · · · · · · · · · · · ·		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?				
	Taxable amount of lobbying and political expenditures (see instructions)		5	L	
Par					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; an	d Part II-B,	line 1i. Also	o, complete	this part
for ar	y additional information.				

SCHEDULE D

(Form 990)

Supplemental Financial Statements Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.



Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Pa	nt I Organizations Maintaining Donor Advised Funds	or Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		
	(a) l	Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that		funds
	are the organization's property, subject to the organization's exclusive le		
6	Did the organization inform all grantees, donors, and donor advisors in w	riting that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor or donor adv		-
	impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Pa	t II Conservation Easements. Complete if the organization a	nswered "Yes" to Form 990, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check a	ll that apply).	
	Preservation of land for public use (e.g., recreation or education)	Preservation of an histori	cally important land area
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conserv	ation contribution in the form of a	a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic structure inclu		
d	Number of conservation easements included in (c) acquired after 8/17/0	6, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, extin	nguished, or terminated by the or	ganization during the tax
	year 🖻		
4	Number of states where property subject to conservation easement is lo	cated ►	
5	Does the organization have a written policy regarding the periodic monitor	oring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforci		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co		
8	Does each conservation easement reported on line 2(d) above satisfy the		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation easemer	nts in its revenue and expense sta	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financ	ial statements that describes the	organization's accounting for
8 - 1840)	conservation easements.		<u></u>
arai	111 Organizations Maintaining Collections of Art, His	-	er Similar Assets.
·····	Complete if the organization answered "Yes" to Form 990, Part IV		
та	If the organization elected, as permitted under SFAS 116 (ASC 958), not		
	historical treasures, or other similar assets held for public exhibition, edu		of public service, provide, in Part XIV,
١.	the text of the footnote to its financial statements that describes these it		
D	If the organization elected, as permitted under SFAS 116 (ASC 958), to r		
	treasures, or other similar assets held for public exhibition, education, or	research in furtherance of public	service, provide the following amounts
	relating to these items:		•
	(i) Revenues included in Form 990, Part VIII, line 1		······ • •
0	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or o		an, provide
~	the following amounts required to be reported under SFAS 116 (ASC 95)		► ¢
	Revenues included in Form 990, Part VIII, line 1		
\$.0			F V

Schedule D (Form 990) 2010

1000000000		CE TO SAVE ENER					******	-10829		Page 2
Pa	rt III Organizations Maintaining (Collections of A	rt, Hist	orical Tr	easures,	or Other	Similar	Asset	s (contil	nued)
3	Using the organization's acquisition, access	ion, and other record	ds, checł	cany of the	following the	at are a sig	nificant use	e of its o	collection	items
	(check all that apply):									
a	Public exhibition	c	ا [] ا	Loan or exc	hange progr	ams				
þ	Scholarly research	G	› 🗌 (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 organizat	ion's exem	pt purpose	in Part	XIV.	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be m] Yes	No No
Pa	TIV Escrow and Custodial Arran								ne 9, or	
	reported an amount on Form 990, Pa			-						
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for	contributior	ns or other a	ssets not ir	ncluded			
	on Form 990, Part X?		-					[Yes	No
b	If "Yes," explain the arrangement in Part XIV									
	· · · · · · · · · · · · · · · · · · ·								Amount	
с	Beginning balance						1c			
	Additions during the year						[
	Distributions during the year						1 1			
f	Ending balance									
	Did the organization include an amount on F							·····	Yes	No
	If "Yes," explain the arrangement in Part XIV			••••••					1 100	L
	tV Endowment Funds. Complete i		iswered	"Yes" to Fo	rm 990. Par	IV. line 10				
		(a) Current year	T	rior year	(c) Two yea		I) Three year	re back	(a) Four	veare hack
1a	Beginning of year balance		(0) 1	nor year	(0) 110 900		y 11100 you	SUUCK		years Dack
b	Contributions									
	Net investment earnings, gains, and losses	······								
								÷		
	Grants or scholarships									
e	Other expenditures for facilities									
4	and programs									
	Administrative expenses									
	End of year balance		1							
2	Provide the estimated percentage of the year	ir end balance held a								
a ,	Board designated or quasi-endowment	~	%							
	Permanent endowment									
		%								
за	Are there endowment funds not in the posse	ession of the organiz	ation tha	t are held a	nd administe	ered for the	e organizati	on	Г	
	by:									Yes No
	(i) unrelated organizations								<u>3a(i)</u>	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations				••••••••••••••••		· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • •	3b	
4	Describe in Part XIV the intended uses of the									
Par			ŕ	····		r				
	Description of investment	(a) Cost or o		••	or other		umulated		(d) Book	value
		basis (investr	ment)	basis	(other)	depr	eciation			
	Land									
	Buildings									
C	Leasehold improvements				,023,009.		510,45	2.		512,557.
d	Equipment			·····		L				
<u>e</u>	Other				721,213.	<u> </u>	652,94	5.	****	68,268.
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X, colur	nn (B), line 1	0(c).)			►		580,825.
							Sel	ماليلمط	D /Earm	0001 2010

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010 THE ALLIANCE TO S		52-1082991 Page 3
Part VII Investments - Other Securities. Sec	e Form 990, Part X, line 1	2.
 (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		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(1)	*****	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) 🕨 🗌		
Part VIII Investments - Program Related. Se	e Form 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(1) (2)		
(2)		
(2) (3)		
(2) (3) (4)		
(2) (3) (4) (5)		
(2) (3) (4) (5) (6)		
(2) (3) (4) (5) (6) (7)		
(2) (3) (4) (5) (6) (7) (8)		

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total, (Column (b) must equal Form 990, Part X, col (B) line 15.)	►

IU, Part X, col (B) II. Part X Other Liabilities. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Amount	
(1)	Federal income taxes		
(2)	DEFERRED RENT	648,364.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total.	(Column (b) must equal Form 990, Part X, col (B) line 25.) 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's 48 (ASC 740).	► 648,364.	<u> </u>
2. FIN	48 (ASC 740) Footnote, in Part XIV, provide the fext of the footnote to the organization's 48 (ASC 740).	financial statements that reports the organization's	liability for uncertain tax positions under
032053)		Schedule D (Form 990) 2010

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Sche	dule D (Form 990) 2010 THE ALLIANCE TO SAVE ENERGY			52-10829	91 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 99	0 to Audited	Financial S	tatements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	12,606,918.
2	Total expenses (Form 990, Part IX, column (A), line 25)				12,352,580.
3	Excess or (deficit) for the year. Subtract line 2 from line 1				254,338.
4	Net unrealized gains (losses) on investments				748.
5	Donated services and use of facilities				
6	Investment expenses				
7	Prior period adjustments		1		-31,163.
8	Other (Describe in Part XIV.)				······································
9	Total adjustments (net). Add lines 4 through 8				~30,415.
10	Excess or (deficit) for the year per audited financial statements. Combine lines				223,923.
1222022222	t XII Reconciliation of Revenue per Audited Financial State			er Return	
1	Total revenue, gains, and other support per audited financial statements			······································	16,406,729.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				20,200,700.
a	Net unrealized gains on investments	2a		748.	
b	Donated services and use of facilities		183,	100000000	
			103,		
с d	Recoveries of prior year grants		3,615,	705	
đ	Other (Describe in Part XIV.)				2 700 011
e	Add lines 2a through 2d				3,799,811.
3	Subtract line 2e from line 1			3	12,606,918.
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				
b	Other (Describe in Part XIV.)				
	Add lines 4a and 4b				0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				12,606,918.
	t XIII Reconciliation of Expenses per Audited Financial Sta				
1	Total expenses and losses per audited financial statements			1	16,224,710.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
a	Donated services and use of facilities		183,	268.	
b	Prior year adjustments	4 1			
c	Other losses				
d	Other (Describe in Part XIV.)		3,688,		
e	Add lines 2a through 2d				3,872,130.
3	Subtract line 2e from line 1			3	12,352,580.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	46			
с	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	12,352,580.
Par	t XIV Supplemental Information				
Com	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; F	Part III, lines 1a ar	d 4; Part IV, lir	es 1b and 2b; I	Part V, line 4; Part
	2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also				
	X, LINE 2: ON JANUARY 1, 2009, THE ORGANIZATION ADOPTED TH		,		
ACCO	UNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAX	ES (FASB			
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	······		
ASC	TOPIC 740-10), WHICH ADDRESSES THE DETERMINATION OF WHETHER	የ ጥልአ			
				• • • • • • • • • • • • • • • • • • • •	
RENE	FITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOU	ILD BE			
RECO	RD IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE C	RGANTZATION			
	A AN AN TIMBOTH DIMIDINED, CADA INTO COLUMNOS, INS C				
MAV	RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ON	31.V TF TT TC			
	The second	<u></u>			

	TARELY THAN NOT THAT THE TAY DOCITION WILL BE SUCTAINED ON	ĩ			
	LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON	1			
MORE	LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON				

Schedule D (Form 990) 2010 THE ALLIANCE TO SAVE ENERGY Part XIV Supplemental Information (continued)	52-1082991	Page 5
POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM		
SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A	<u></u>	
GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT.		
THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES	·····	
DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES,		
AND ACCOUNTING IN INTERIM PERIODS.		
MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT		
THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE		
ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH THE		
PROVISIONS OF THIS GUIDANCE. THE ORGANIZATION FILES INCOME TAX RETURNS IN		
THE U.S. FEDERAL JURISDICTION. GENERALLY, THE ORGANIZATION IS NO LONGER		
SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OF LOCAL TAX		
AUTHORITIES FOR YEARS BEFORE 2006.		
PART XII, LINE 2D - OTHER ADJUSTMENTS:	*******	
SEEA REVENUE INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 3,615,795.		
SEER REVENUE INCHOUSED IN CONSOLIDATED FINANCIAL STRIEMENTS 5,015,755.		
PART XIII, LINE 2D - OTHER ADJUSTMENTS:		
SEEA EXPENSES INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 3,688,862.		······

SCHEDULE F (Form 990)	Statement of Activities Outside the United Sta Complete if the organization answered "Yes" to Form 990,	tes <u>OMB No. 1645-0047</u> 2010
Department of the Treasury Internal Revenue Service	Part IV, line 14b, 15, or 16. Attach to Form 990. See separate instructions.	Open to Public Inspection
Name of the organizati	Employer identification number	

THE A	LLIANCE TO SAVE EN	NERGY				52-1082991		
Part	General Info to Form 990, Par		ctivities Out	tside the United States. Compl	ete if the organ	ization answered "	Yes*	
	-			ds to substantiate the amount of the g selection criteria used to award the gra			Yes 🔲 I	No
2 1	F or grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of g	rant funds outs	ide the United Sta	les.	
3 /	Activities per Region. (Ti	he following Part	I, line 3 table ca	an be duplicated if additional space is	1			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, specific type ce(s) in region	(f) Total expenditure for and investment in region	ts
SOUTH	ASIA	1		PROGRAM SERVICES.	ENERGY EFFI PROGRAMS.	CIENCY	263,60	56.

SOUTH ASIA	1	3	PROGRAM SERVICES.	PROGRAMS.	263,666.
RUSSIA & THE NEWLY				ENERGY EFFICIENCY	
INDEPENDENT STATES	1	2	PROGRAM SERVICES.	PROGRAMS.	282,672.
	<u></u>				
, , , , , , , , , , , , , , , , , , ,					
······································					
3 a Sub-total	2	5			546,338.
b Total from continuation					
sheets to Part 1	0	0	ļ		0.
c Totals (add lines 3a					
and 3b)	2	5			546,338.

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

Schedule F (Form 990) 2010

Schedule F (Form 990) 2010	THE ALLIA	THE ALLIANCE TO SAVE ENERGY	X		52~1082991	16(Pace 2
Part II Grants and Other Assistan recipient who received more	nce to Orga e than \$5,00	nizations or Entities C 0. Check this box if no	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.	omplete if the org than \$5,000	ganization answerec	l "Yes" to Form 9	190, Part IV, line 15, for	Â
Part II can be duplicated if additional space is needed.	additional sp	ace is needed.	-					
1 (b) IRS code section (a) Name of organization and EIN (if applicable)	de section applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	rganizations or counsel l	listed above that are n has provided a section	ecognized as charities by the 501(c)(3) equivalency letter	foreign country,	recognized as tax-e)	kempt by		
3 Enter total number of other organizations or entities	nizations or (entities						
							Sched	Schedule F (Form 990) 2010

12-20-10

Page 3	 (h) Method of valuation (book, FMV, appraisal, other) 						Schedule F (Form 990) 2010
V, line 16.	(g) Description of non-cash assistance						Schedu
52-1082991 s" to Form 990, Part I	(f) Amount of non-cash assistance						
52- he organization answered "Yes" t	(e) Manner of cash disbursement						
tes. Complete if t	(d) Amount of cash grant						
ENERGY e the United Star	c) Number of recipients		· · · · · · · · · · · · · · · · · · ·				
THE ALLIANCE TO SAVE ENERGY nce to Individuals Outside the Unit additional snare is needed	(b) Region						
Schedule F (Form 990) 2010 THE ALLIANCE TO SAVE ENERGY 52-1082991 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be challeded if additional space is needed Dart III can be challeded if additional space is needed	(a) Type of grant or assistance						

Scheo	JULE F (Form 990) 2010 THE ALLIANCE TO SAVE ENERGY	52-1082991	Page 4
Parl	W Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Incored	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2010

SCHEDULE G (Form 990 or 990-EZ)		Supplemental Inform Fundraising or Ga	mir	ng A	Activities	18, c	or 19,	омв No. 1545-0047 2010
Department of the Treasury Internal Revenue Service	orift	the organization entered more that Attach to Form 990 or Form 990-E	n \$15,	000 oi	n Form 990-EZ, line	6a.		Open To Public Inspection
Name of the organizatio				000 0	opurate monutation		Employer ide	entification number
		CE TO SAVE ENERGY					52-1082991	
	sing Activities complete this par	 Complete if the organization answer t. 	ered "	res" to	o Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not
 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list 	tions I email solicitations itations blicitations on have a written o led in Form 990, P n highest paid ind	f ☐ Solicitat g Special or oral agreement with any individual 'art VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (inclue rofess	non-g gover aising ding o ional 1	overnment grants rnment grants events fficers, directors, trus fundraising services?	stees	Ye:	
(i) Name and addres or entity (fund		(ii) Activity	have c	Did raiser sustody atrol of utions?	(iv) Gross receipts from activity	to (Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		······································	Yes	No			·····	
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or licensing.	ch the organizatio	n is registered or licensed to solicit (contric	SUTION	s or has been notified	anıs	exempt from i	egistration
	······································							
*****	*****				****			

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

Schedule G (Form 990 or 990-EZ) 2010

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 Schedule G (Form 990 or 990-EZ) 2010
 THE ALLIANCE TO SAVE ENERGY
 52-1082991
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 Part II
 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000
 \$15,000
 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000,

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			ANNUAL AWARD		NONE	(add col. (a) through
			DINNER			- col. (c))
пe			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	542,271.			542,271.
	2	Less: Charitable contributions	433,817.			433,817.
<u> </u>	3	Gross income (line 1 minus line 2)	108,454.			108,454.
	4	Cash prizes				
ses	5	Noncash prizes				
Expen	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	177,602.			177,602.
	10	Direct expense summary. Add lines 4 through	h 9 in column (d)		►	(177,602)
	11	Net income summary. Combine line 3, colum	n (d), and line 10			-69,148.
P.	irt I	II Gaming. Complete if the organization	answered "Yes" to Form 9	90, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				

Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
es	2	Cash prizes			-	
Direct Expenses	3	Noncash prizes				
Direct I	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes %	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		►	()
	8	Net gaming income summary. Combine line 1	, column d, and line 7		•	
	ls t	er the state(s) in which the organization operat he organization licensed to operate gaming act No," explain:	tivities in each of these	states?	•••••	Yes No
		re any of the organization's gaming licenses re Yes," explain:		÷	,	

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Schedule G (Form 990 or 990-EZ) 2010

Sch	edule G (Form 990 or 990-EZ) 2010 THE ALLIANCE TO SAVE ENERGY 5	2-1082	991		Page 3
11	Does the organization operate gaming activities with nonmembers?	[Yes	🗌 No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed				
	to administer charitable gaming?	Í		Yes	No
13	Indicate the percentage of gaming activity operated in:				
e	The organization's facility		13a		%
ŧ	An outside facility		13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	\$:			
	Name 🕨				
	Address 🕨				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	[Yes	No
ŀ	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amoun	nt			
L	of gaming revenue retained by the third party \triangleright \$				
,	If "Yes," enter name and address of the third party:				
	a res, entername and address of the third party.				
	Name 🕨				
	Address ►				
16	Gaming manager information:				
	Name	·····			
	Gaming manager compensation 🕨 💲				
	Description of services provided 🕨				
	Director/officer Employee Independent contractor				
	Mandatory distributions:				
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to			¥	N
	retain the state gaming license?	······	J	res	I INO
t	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	tne			
	organization's own exempt activities during the tax year s t IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, colum		nd (W on	i Dort III
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional infor				
	lines 9, 90, 100, 150, 150, 16, and 170, as applicable. Also complete this part to provide any additional into	mation	300	aistru	Guons).
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(Form 990) For certain Officers, Directors, Trosters, Kay Employces, and Highest Competended Employces, Description of the travel mean of the organization answared "Yes" to Form 990, Part NU, Nile 23. 2010 Operation of the travel mean of the organization Employer identification number Director Number 1 Employer identification number Director Number 1 The ALLIANCE TO ENVE ENERGY 52-108293. The organization provided any relevant information reparing them liters. The organization concerned to the organization provided any of the following expenses or listed in Form 990. Part VII. Section A, Ine 1a, Complete Part III to provide any relevant information repared by a differer, directors, trutates, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Did the organization course based absorber II' No, complete Part III to explain 15 Operation based organization course and provide divergeneration of the organization 's compensation committee Divergeneration committee 15 Did the organization committee Writtee employment contract 2 Compensation cornealization consultant X compensation consultant<	SCHEDULE J	Compens	sation Information	1	OMB No. 1	545-004	17
Compute the organization Compute the organization answord "Yes" to Form 990, Fort IV, the 23. Compute the organization Name of the organization THE ALLIANCE TO SAVE EXERCY Employer in the filter of the organization Employer in the filter of the organization Part II, Social A, like 14. Complete Part II to provide any relevant information regarding these liters. First Cleas or charter travel Yes Name Preschement of providen and gross-up payments Health or acceleration of all of the organization folder any of the following to or for a parson listed in Form 990, Part VII, Social A, like 14. Complete Part II to provide any relevant information regarding these liters. Image: Social Part VII, Social A, like 14. Complete Part II to provide any relevant information regarding these liters. Image: Social Part VII, Social Part		-			00	40	
Operation Port IV, the 23. Operation Name of the organization Employer identification number THE ALLIANCE TO BAYE RREAT 52-1082391 Part II Questions Regarding Compensation 52-1082391 Part III Questions Regarding Compensation 52-1082391 Part IIII council to box(e) if the organization provided any of the following to or for a person listed in Form 990, Part IV, the tax Complete Part III to provide any relevant information regarding these terms. Implicit to the tax Part III to provide any relevant information regarding these terms. Implicit to any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reinbursement or provision of all of the expenses described abox? If 'No,' complete Part III to explain. 1b III to any of the following the organization uses to estabilish the compensation or curre substantiation prive to reinbursing or allowing expenses incured by all offices, directors, trustees, and the CEO/Executive Director. Check all that apply. Implicit the employment contract Independent compensation consultant X Operanization require exploration substantiation prive to reinbursing or allowing expenses incured by all offices, directors, trustees, and the CEO/Executive Director. Check all that apply. Implicit the box or compensation committee Independent compensation consultant X Operand by the board construst. 2	(1 0111 000)	Comp	pensated Employees		ĽU	I U	
Department of the lorgen/zation Attach to Form 990. See separate instructions. Department of the instruction of the instruction of the instructions. Department of the instructis. Department of the instructions.					Open to	Publi	c
Name of the organization Employer identification number 52 1082891 Part E Questions Regarding Compensation Yes No 1a Check the appropriate box(se) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Implementation and gross-up payments Implementation Implementation 1a Check the appropriate box(se) if the organization follow a written obley regarding payment or reinbursement or provision of all of the expanses described abov? If TNA', complete Part III to explain Implementation Implementation 2 Indicate which, if any, of the following the organization tollow a written obley regarding payment or reinbursement or provision of all of the expanses described abov? If TNA', complete Part III to explain Implementation Implementation 2 Indicate which, if any, of the following the organization uses to establish the compensation committee Implementation Implementation 4 During the year, old any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization. Implementation Implementation 4 During the year, old any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filling organization or a related organization Implementation Implementation <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>							
Part J: Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a parson listed in Form 990, Part VII, Section A, Ine 1a. Complete Part III to provide any relevant information regarding these litems. Image: Compensation Part VII, Section A, Ine 1a. Complete Part III to provide any relevant information regarding these litems. Image: Compensation Part VII, Section A, Ine 1a, Complete Part III to provide any relevant information parson listed in Form 990, Part VII, Section A, Ine 1a are checked, clid the organization follow a written policy regarding payment or reimbursement or provision of all of the expanses described above? If 'No,' complete Part III to explain 1b 2 If any of the boxes on line 1 are checked, clid the organization follow a written policy regarding payment or reimbursement or provision of all of the expanses described above? If 'No,' complete Part III to explain 1b 2 Indicate which, If any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, If any, of the following the organization uses to establish the compensation committee Yes to any of the organization: 'X Compensation committee 2 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization? 4a X 5 For persons bliefed in Form 990, Part VII, Section A, line 1a, did the organization pay or		**************************************		Employer ide	ntificatio	on nun	nber
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Part VII, Section A, line 1a. Complete Part III to provide any relevant information regaring these terms. Image: Comparison of Companion of Comparison o	1a Check the appropri	iate box(es) if the organization provided any	of the following to or for a person listed in Form	990,			
Pirst-class or charter travel Housing allowance or residence or personal use Payments for business use of personal residence Tax will for companions Payments for business use of personal residence Payments for business use of personal residence Tax will for companions Personal services (e.g., maid, chauffeur, chef) Pirst intation flees b If any of the boxes on line 1 are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain D 2 Did the organization regults substantiation prior to reimbursing or allowing expenses incurred by all officers, directors. trustees, and the CEO/Executive Director. Theck all that apply. Compensation computite 2 Unrig the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment from, a supplemental nonqualified retirement plan? 4 Daring the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization? Re 9 Receive a severance payment from, a supplemental nonqualified retirement plan? Ab X 9 Participate in, or receive payment from, a supplemental nonqualified retirement plan? Ab X 9 Participate in, or receive payment from, a supplemental nongualified retirement plan? Ab X 9 Participat				·			
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 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment from the organization or a related organization? b Participate In, or receive payment form, a supplemental nonqualified retirement plan? c Participate In, or receive payment from, an equity-based compensation arrangement? if "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each Item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? if "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? if "Yes" to line 6a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? if "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in Form 990, Part VII, se	· · · · ·			committee			
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If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a X a The organization? 5b X b Any related organization? 5b X if "Yes" to line 5a or 5b, describe in Part III. 5b X 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X 7 X b Any related organization? 6b X 7 X b Any related organization? 6b X 7 X f "Yes" to line 6a or 6b, describe in Part III. 7 X 7 X 7 So b, describe in Part III. 7 X 8 7 X 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III							x
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5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a X a The organization? 5b X b Any related organization? 5b X if "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6a X contingent on the net earnings of: a The organization? 6a X b Any related organization? 6a X 6b X if "Yes" to line 6a or 6b, describe in Part III. 6b X 7 X 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X 9 If "Yes" to li	·····	· · · · · · · · · · · · · · · · · · ·					
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a X a The organization? 5b X b Any related organization? 5b X if "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6a X contingent on the net earnings of: a The organization? 6a X b Any related organization? 6a X 6b X if "Yes" to line 6a or 6b, describe in Part III. 6b X 7 X 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 X 9 If "Yes" to li	Only section 501(c)(3) and 501(c)(4) organizations must con	nplete lines 5-9.				
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b Any related organization? 5b X If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a X a The organization? 6a X b Any related organization? 6b X if "Yes" to line 6a or 6b, describe in Part III. 6b X 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III. 7 X 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 X 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9							
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 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? if "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III. 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 Were "to line 8, did the organization also follow the rebuttable presumption procedure described in Part III. 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Part III. 	If "Yes" to line 5a o	r 5b, describe in Part III.					
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a The organization? 6a x b Any related organization? 6b x if "Yes" to line 6a or 6b, describe in Part III. 6b x 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 x 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 x 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9 9							
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 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III							
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9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in 9 9	8 Were any amounts	reported in Form 990, Part VII, paid or accri	ued pursuant to a contract that was subject to t	he		Ī	_
Regulations section 53.4958-6(c)? 9	initial contract exce	ption described in Regulations section 53.4	1958-4(a)(3)? If "Yes," describe in Part III		. 8		х
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ENERGY
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chedule J

Schedule J (Form 990) 2010 THE ALLIANCE TO SAVE ENERGY 52-1082991 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 in 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 are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(a)	(E)	Ð
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)()-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	Ξ	247,915.	0.	0.	22 000.	31 285.	301 200	C
1 KATERI CALLAHAN	(B)	.0	*0	• 0	.0		.0	0
	()	178,388.	0.	0.	21,780.	23,546.	223 714.	0
2 BRIAN T. CASTELLI	Û	.0	0.	.0	.0	.0	.0	0
	8	178,287.	.0	0.	16,500.	17,056.	211,843.	0.
3 GAIL HENDRICKSON	8	0.	0.	0.	•0		N .	0.
	€	150,554.	.0	0.	21,780.	23,628.	195,962.	0.
4 JEFFREY HARRIS	۲	0.	0.	0.	.0	0.		0.
	Ξ	131,378.	0.	.0	16,500.	23 763.	171 641.	0.
5 LOWELL UNGAR	9	.0	• 0	о.	•	.0	.0	0.
	e	127,917.	.0	0.	13,025.	22,450.	163,392.	0
6 MERRILEE HARRIGAN	۲	.0	0.	0.	.0	.0		0.
	Ξ	135,512.	0.	.0	.0	18,333.	153,845.	•0
7 BRADFORD PENNEY	۲	.0	.0	0.	0	•0	*	.0
	E	108,950.	•	.0	16,500.	24,814.	150,264.	0.
8 LAURA VAN WIE MCGRORY	(•0	.0	0	.0	0.	0.	C
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Page 2

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.



Employer identification number

52-1082991

THE ALLIANCE TO SAVE ENERGY

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

OF ENERGY USE.

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

THE ALLIANCE TO SAVE ENERGY STRIVES TO BE THE WORLD'S PREMIER

ORGANIZATION PROMOTING ENERGY EFFICIENCY TO ACHIEVE A HEALTHIER

ECONOMY, A CLEANER ENVIRONMENT, AND GREATER ENERGY SECURITY. TO ACHIEVE

THIS GOAL, THE ALLIANCE TO SAVE ENERGY:

FORM 990, PART VI, SECTION B, LINE 11: WHEN THE DRAFT IS RECEIVED FROM THE

PREPARER, IT IS REVIEWED FIRST BY THE DIRECTOR OF FINANCE AND THE CHIEF

FINANCIAL OFFICER FOR ACCURACY. THEN THE DRAFT IS CIRCULATED TO THE

EXECUTIVE MANAGEMENT TEAM COMPOSED OF THE PRESIDENT AND TWO EXECUTIVE

VICE-PRESIDENTS. ONCE REVIEWED AND APPROVED, THE DOCUMENT IS SIGNED BY THE

CFO FOR FILING AND A COPY IS SENT TO ALL MEMBERS OF THE AUDIT AND FINANCE

COMMITTEE OF THE BOARD OF DIRECTORS; OTHER BOARD MEMBERS ARE MADE AWARE OF

THE AVAILABILITY OF THE RETURN SHOULD THEY DESIRE A COPY.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT IS

DETERMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS AND

RATIFIED BY THE BOARD. A COMPENSATION REVIEW IS COMPILED OF SIMILAR

ORGANIZATIONS AND IS USED TO GUIDE COMPENSATION DISCUSSIONS. ALSO

CONSIDERED ARE PERFORMANCE GOALS AND ADHERENCE TO THE MISSION OF THE

ORGANIZATION. THE COMPENSATION OF OTHER TOP MANAGEMENT OFFICIALS IS

DETERMINED THROUGH A SIMILAR PROCESS INCLUDING A FORMAL PERFORMANCE REVIEW

LED BY THE SR. DIRECTOR OF ADMINISTRATION (HUMAN RESOURCES) WITH DECISIONS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 01-24-11 Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization THE ALLIANCE TO SAVE ENERGY	Employer identification number 52-1082991
THE ALLIANCE TO SAVE ENERGY	
MADE BY THE EXECUTIVE MANAGEMENT TEAM. THESE PROCESSES OCCURS ANNUALLY.	99,49 199 3 waar taan a far ama kata kata Atta Atta Atta Atta Atta Att
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
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AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MS, MN, NC, ND, NJ, NH, NM, NY	
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV	
FORM 990, PART VI, SECTION C, LINE 19: ALL DOCUMENTS ARE MADE AVAILABLE	
UPON REQUEST.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED GAINS ON INVESTMENTS: 748.	
PRIOR PERIOD ADJUSTMENTS: -31,163.	
TOTAL TO FORM 990, PART XI, LINE 5 -30,415.	
FORM 990 PART XII, LINE 2C	
THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND	
SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL	
STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.	
FORM 990, PART III, LINE 1	
MISSION STATEMENT CONTINUATION	
LEADS WORLDWIDE ENERGY-EFFICIENCY INITIATIVES IN RESEARCH, POLICY	
ADVOCACY, EDUCATION, TECHNOLOGY DEPLOYMENT AND COMMUNICATIONS THAT	
IMPACT ALL SECTORS OF THE ECONOMY;	
PROVIDES VISION AND ACTIVISM THROUGH ITS BOARD OF DIRECTORS, WHICH	
INCLUDES LEADERS FROM BUSINESS, GOVERNMENT, THE PUBLIC INTEREST SECTOR	
032212 01-24-11	Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or	990-EZ) (2010)			Page 2
Name of the organization				Employer identification number
*****	THE ALLIANCE	TO SAVE ENERGY		52-1082991
AND ACADEMIA;			MARKAN MANUNA TANA TANA MANUNA MAN	1919 IN 1919 FILL IN 1919 IN 1919 FILL IN 1919
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EXPERTS AND PROFESS	IONALS.	·····	·	
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FORM 990, PART VII				
AVERAGE HOURS PER W	EEK DEVOTED TO	RELATED ORGANIZATIONS		
	ASE	SEEA		
KATERI CALLAHAN	37.5	3		
NDTAN CACODITI	37.5	3		
BRIAN CASTELLI	57.5	3		
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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	 Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Attach to Form 990. 	s and Unrelated Partner 'Yes" to Form 990, Part IV, line 33, 3 See separate instructions.	artnerships ine 33, 34, 35, 36 uctions.	or 37.		OMB No. 1545-0047 2010 Open to Public Inspection
Name of the organization THE ALLIANCE TO SAVE ENERGY	z energy				Employer identi 52-1082991	Employer identification number 52 - 1082991
Part I Identification of Disregarded Entities (Complete if the organization	lete if the organization answered "Yes	answered "Yes" to Form 990, Part IV, line 33.)	3.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	or Total income	me End-of-year assets		(f) Direct controlling entity
					 V. V	
Part II Identification of Related Tax-Exempt Organizations (Complete if th organizations during the tax year.)	zations (Complete if the organization	ie organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt), Part IV, line 34 b	ecause it had one	or more related tax-exi	ampt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charrity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controled entity?
SOUTHEAST ENERGY EFFICIENCY ALLIANCE - 20-4949501, 1850 M STREET, NW, STE 600, WASHINGTON, DC 20036	COALITION OF GOVERNMENT, BUSINESS, AND CONSUMER LEADERS ENGAGED IN	GEORGIA	501(C)(3)	LINE 11A, I	THE ALLIANCE TO SAVE ENERGY	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ons for Form 990.		-		Schedule R	Schedule R (Form 990) 2010

12-21-10 LHA

)) 2010 ion of Rel ins treated	THE ALLIANCE TO SAVE ENERGY ated Organizations Taxable as a P as a partnership during the tax year	ERGY s a Partne X year.)		(Complete if the organization answered	wered "Yes" to Form	72-1082991 "Yes" to Form 990, Part IV, line 34 because it had one or more related	34 because it	52-1082991 had one or more	related	Page 2
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicite (state or foreign country)	(d) Direct controlling entity ex	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end of year assets	(h) Disproportion- ate atlocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or P General or P managing partner? Yes No	(j) (k) General or Percentage managing ownership ves No
Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year.)	rganizations Taxable a	s a Corpo g the tax y		olete if the organi	or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	to Form 990, Par	rt IV, line 34 b	ecause it had or	te or more	related
(a) Name, address, and EIN of related organization	an N		(b) Primary activity	(C) Legal domicile (state or foreign country)	dd) Birect controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) cotal Share of end-of year assets		(h) Percentage ownership
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032162 12-21-10				44		_		Schedule	R (Form	Schedule R (Form 990) 2010

eto line 1 fany entry le lated in Parts II, II, or IV of this schedule. The taxy entry le lated in Parts II, II, or IV of this schedule. The taxy related contribution region expansion engage in any of the following tenascions with one or more related organizations lated in Parts II/V or compared contribution from other organization(s) The compared contribution from other organization(s) The compared contribution from the organization(s) The compared contribution from the organization(s) The compared contribution from the organization(s) The compared control control of the organization(s) the desets from other organization(s) and of assets the other organization for expenses and of assets equipment, malling lats, or other assets of latellese, equipment, malling lats, or other assets and of control organization for expenses and of the above is "Yes." See the instructions for information organization for expenses and of control organization for expenses and of the above is "Yes." See the instructions for information organization for the expenses and of control organization for expenses and of control organization for expenses and of the above is "Yes." See the instructions for information or	Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)				
Dung the tax year, did the organization encape In any of the following treatentions with one or more related organizatione listed in Parts HV and the enginements (in yourdak or (ph) early finance (in another (i	ote. Complete line 1 if any entity is listed in Parts II III or IV of this schedule				Voc No
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	165 12-21-10	45			Schedule R (Form 990) 2010

	utal was not a related organization. See instructions regarding exclusion for certain investment partnerships.	lerships.				tain investment partnerships.	
(a)	(9)	(0)	(q)	(e)	£	(6)	(L)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations? Yes No	Share of end-of- year assets	Dispropor- tionate allocations? Yes No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1085)	Se de Se

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52-1082991 Page 4

Schedule R (Form 990) 2010 THE ALLIANCE TO SAVE ENERGY

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art VII Supplemental	Information
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Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

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Form 8868 (Rev. 1-2011)	······································				Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ext				· · · · · · · · · · · · · · · · · · ·	X
Note. Only complete Part II if you have already been granted an at			Form 8868.		
If you are filing for an Automatic 3-Month Extension, complete					
Part II Additional (Not Automatic) 3-Month Ex	aensio	n of Time. Only file the original (no ec			
Type or Name of exempt organization			Employer ide	ntification i	number
print THE ALLIANCE TO SAVE ENERGY			52-10	<u>82991</u>	
File by the extended Number, street, and room or suite no. If a P.O. box, se	e instruc	tions.			
due date for 1850 M STREET, NO. 600	·····				
return. See City, town or post office, state, and ZIP code. For a for instructions. WASHINGTON, DC 20036	reign add	Iress, see instructions.	·····		
					[
Enter the Return code for the return that this application is for (file	a separa	te application for each return)	•••••		01
Application	Return	Application	······		Return
is For	Code	Is For			Code
Form 990	01				
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720		~~~~	09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a previou	sly filed Form	8868.	
JOHN MAMONE ● The books are in the care of ► 1850 M. STREET,	SUI	TE 600 - WASHINGTON,	DC 200	36	
Telephone No. ► (202) 530-4357					
 If the organization does not have an office or place of business 	in the Ui			- ,	
 If this is for a Group Return, enter the organization's four digit (neck this
box > If it is for part of the group, check this box >		ach a list with the names and EINs of all			
	IOVEM	BER 15, 2011.			
5 For calendar year 2010 , or other tax year beginning		, and ending			······································
6 If the tax year entered in line 5 ls for less than 12 months, cl			Final return		
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS REQUIRED TO) GAT	HER INFORMATION TO E	TILE AN	ACCURA	TE
AND COMPLETE RETURN.					
			1 1		
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, e	enter the tentative tax, less any			~
nonrefundable credits. See instructions.			<u>8a \$</u>		0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,					
tax payments made. Include any prior year overpayment all	owed as	a credit and any amount paid			•
previously with Form 8868.			8b \$		0.
c Balance due. Subtract line 8b from line 8a. Include your pa		th this form, if required, by using			~
EFTPS (Electronic Federal Tax Payment System). See instru			8c \$		0.
Signa Under penalties of perjury, I declare that I have examined this form, includi it is true, correct, and complete, and that I am authorized to prepare this fo	ing accom	nd Verification panying schedules and statements, and to th	e best of my kno	wledge and b	elief,
Signature		Anewfant	Date 🕨 🤞	e/21	11

Form 8868,	(Rev. 1-2011)
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Form	8868
(Rev.	January 2011)
	nent of the Treasury Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

0 1

File	a	se	para	ite	ap	plic	atio	n for	each	return	•

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I	Automatic 3-Month Extension	of Time. Only s	ubmit original (no copies needed).
Longer and the second second			

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

Type or	Name of exempt organization	Employer identification number
print		F0 1000001
City building	THE ALLIANCE TO SAVE ENERGY	52-1082991
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions.	
filing your return. See	1850 M STREET, NO. 600	
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	~
]	WASHINGTON, DC 20036	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application	Return	Application			Return
Is For	Code	is For			Code
Form 990	01	Form 990-T (corporation)			07
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
• The books are in the care of ► <u>1850 M. STREET</u>	, SUI'	<u> TE 600 - WASHINGTON,</u>	DC	20036	
Telephone No. 🕨 (202) 530-4357		FAX No. 🕨			
• If the organization does not have an office or place of business	s in the Ur	nited States, check this box		►	
If this is for a Group Return, enter the organization's four digit (Group Exe	emption Number (GEN) If th	is is fo	r the whole group, c	heck this
box 🕨 🔄 . If it is for part of the group, check this box 🕨	and atta	ch a list with the names and EINs of all	memb	ers the extension is	for.
1 I request an automatic 3-month (6 months for a corporation <u>AUGUST 15, 2011</u> , to file the exemption is for the organization's return for:	•	•		The extension	
X calendar year 2010 or					
tax year beginning	90	d ending			
	, aii	a enang		_ ·	
2 If the tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on: Initial return Fina	al retur	n	
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions.			3a	\$	Ο.
b If this application is for Form 990 PF, 990 T, 4720, or 6069,	enter anv	refundable credits and	1		·····
estimated tax payments made. Include any prior year overp	•		Зb	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your pa					
by using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$	0.
Caution. If you are going to make an electronic fund withdrawal w			8879-	EO for payment inst	
LHA For Paperwork Reduction Act Notice, see Instructions		*****		Form 8868 (Re	

Zhang, Yong Z

. .

From:Zhang, Yong ZSent:Friday, April 15, 2011 11:10 AMTo:'CharExt'Subject:THE ALLIANCE TO SAVE ENERGY, NYS REG. NO 14-90-33, EIN52-1082991

We respectfully request an extension of time of filing 2010 NY CHAR - 500 return, because additional time is required to gather all necessary information. Thank you.

Thanks,

Yong

Yong Zhang Tax Services

RSM McGladrey, Inc.

8000 Towers Crescent Dr., Ste 500, Vienna, VA 22182-62054 P 703.336.6517 F 703.336.6401 Main 703.336.6400

New as of June 1, 2010: Yong.Zhang2@mcgladrey.com



Experience the Power of Being Understood.™

McGladrey

McGladrey & Pullen, LLP Certified Public Accountants

8000 Towers Crescent Drive Suite 500 Vienna, VA 22182 O 703.336.6400 F 703.336.6401 www.mcgladrey.com

June 15, 2011

New York State Department of Law Office of the Attorney General Charities Bureau – Registration Section 120 Broadway New York, New York 10271

Re:

The Alliance to Save Energy EIN: 52-1082991 NY State Registration No.: 14-90-33 Form: CHAR 500 Year: December 31, 2010

The above-referenced charitable organization hereby requests an additional three-month extension of time to submit its New York Form CHAR 500 for the year ended December 31, 2010. The organization is requesting this additional extension of time because all of the information necessary to file an accurate report is not available at this date. We have attached a copy of federal Form 8868 to document the organization's request for an additional extension of time to file its federal Form 990.

If you have any questions regarding this matter please call me.

Very truly yours,

RSM McGLADREY, INC.

Thans

Yong Zhang Tax Services

Enclosure

	-	-	-	
	g	\square	n	
Form	-	-		
FOIIII	-		-	

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 black lung benefit trust or private foundation)

> The organization may have to use a copy of this return to satisfy state reporting requirements.



B Check if applicable: Address Change THE ALLIANCE TO SAVE ENERGY	D Employer identific	ation number
Change THE ALLIANCE TO SAVE ENERGY		
Name		
LIchange Doing Business As	52-1082	991
Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone number	
Termin- ated 1850 M STREET 600	(202) 8	57-0666
Amended City or town, state or country, and ZIP + 4	G Gross receipts \$	12,030,589.
Applica- WASHINGTON DC 20036	H(a) Is this a group ret	
F Name and address of principal officer:KATERI CALLAHAN	for affiliates?	Yes X No
SAME AS C ABOVE	H(b) Are all affiliates inclu	
I Tax-exempt status: x 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or 527		st. (see instructions)
J Website: WWW, ASE, ORG	H(c) Group exemption	number >
K Form of organization; x Corporation Trust Association Other ► L Year of	of formation: 1977 M	State of legal domicile: DC
Part I Summary		
1 Briefly describe the organization's mission or most significant activities: A COALITION OF	GOVERNMENT	
BUSINESS, AND CONSUMER LEADERS DEDICATED TO INCREASE THE EFFICIENCY		
2 Check this box > if the organization discontinued its operations or disposed of more	than 25% of its net ass	ets.
3 Number of voting members of the governing body (Part VI, line 1a)		36
4 Number of independent voting members of the governing body (Part VI, line 1b)		35
 Binefly describe the organization's mission or most significant activities: <u>A COALITION OF A BUSINESS</u>, <u>AND CONSUMER LEADERS DEDICATED TO INCREASE THE EFFICIENCY</u> Check this box Check this box if the organization discontinued its operations or disposed of more Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2011 (Part V, line 2a) Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 		258
6 Total number of volunteers (estimate if necessary)		C
7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34		0.
	Prior Year	Current Year
2 8 Contributions and grants (Part VIII, line 1h)	12,664,590.	11,849,116.
9 Program service revenue (Part VIII, line 2g)	0.	0.
8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,665.	5,188.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-62,337.	-13,426
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,606,918.	11,840,878.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	7,275,110.	7,707,939,
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Othersenses (Part IX, column (D), line 25)	0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) 345,511.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,077,470.	3,984,310,
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,352,580.	11,692,249,
19 Revenue less expenses. Subtract line 18 from line 12	254,338.	148,629.
Ber	ginning of Current Year	End of Year
20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20	4,761,487.	6,188,413.
21 Total liabilities (Part X, line 26)	2,781,450.	4,062,096
	1,980,037.	2,126,317
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 <u>RONALD L. STUBBLEFIELD, CHIEF FI</u> Type or print name and title	nalel I. Stubble NANCIAL OFFICER	fiel 11-07-2012	
Paid Preparer	Print/Type preparer's name YONG ZHANG, CPA Firm's name MCGLADREY LLP	Preparer's signature	Date 1100/12 Firm's EIN 42-0714325	
Use Only	Firm's address 8000 TOWERS CRESCENT DR VIENNA, VA 22182-6205	. STE 500	Phone no. 703-336-6400	
May the I	RS discuss this return with the preparer shown ab 23-12 LHA For Paperwork Reduction Act Not			lo 11)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	1 990 (2011) THE ALLIANCE TO SAVE ENERGY rt III Statement of Program Service Accomplishments	52~1082991		Page 2
1 4				
1	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission:			<u>. </u>
ı	THE ALLIANCE TO SAVE ENERGY PROMOTES ENERGY EFFICIENCY WORLDWIDE TO			
	ACHIEVE A HEALTHIER ECONOMY, A CLEANER ENVIRONMENT, AND GREATER ENERGY			
	SECURITY,			
2	Did the organization undertake any significant program services during the year which were not listed on			
	the prior Form 990 or 990-EZ?	[Yes	X No
	If "Yes," describe these new services on Schedule O.			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	? [Yes	x No
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accomplishments for each of its three largest program services, a	as measured by e	expenses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount c			
	others, the total expenses, and revenue, if any, for each program service reported.	-		
4a	(Code:) (Expenses \$9,317,533, including grants of \$) (Reve	enue \$)
	DEMONSTRATION PROGRAMS - DEVELOP AND IMPLEMENT PROGRAMS OF A TECHNICAL			
	ASSISTANCE OR FACILITATION NATURE TO BRING ABOUT COST EFFICIENT ENERGY			
	CONSERVATION.			
4b	(Code:) (Expenses \$) (Rev	enue \$)
	POLICY PROGRAMS - DEVELOP ALLIANCE POLICY POSITIONS IN THE ENERGY			
	EFFICIENCY AREA, ALSO, DESIGN AND IMPLEMENT RELATED RESEARCH PROJECTS,			
4c	(Code:) (Expenses \$661,093, including grants of \$) (Rev	enue \$)
	COMMUNICATIONS PROGRAM - PRODUCE AND DISSEMINATE PUBLICATIONS			
	CONTAINING FINDINGS ON POLICY AND DEMONSTRATION PROGRAMS.			
4d	Other program services (Describe in Schedule O.)			
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4</u> e	Total program service expenses 11,047,499,		.	
			Form 9	90 (2011)

:

Form 990 (2011) THE ALLIANCE TO SAVE ENERGY 52-1082991 Part IV Checklist of Required Schedules 52-1082991						
L			Vac	No		
1	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		103	140		
•	If "Yes," complete Schedule A	1	х			
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_~	~			
	public office? If "Yes," complete Schedule C, Part I	3		v		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	- 3		<u> </u>		
-	during the tax year? If "Yes," complete Schedule C, Part II	4	v			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		X			
U	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5				
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	- 5		X		
Ŭ		c				
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X		
'	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_				
0	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 III	8		X		
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide					
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent					
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X					
	as applicable.					
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,					
	Part VI	<u>11a</u>	<u>x</u>			
b						
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x		
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total					
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<u>11c</u>		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 separate or consolidated financial statements for the tax year include a footnote that addresses					
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X			
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete					
	Schedule D, Parts XI, XII, and XIII	12a		X		
b	Was the organization included in consolidated, independent audited financial statements for the tax year?					
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	x			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х		
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 assistance to any organization					
	or entity located outside the United States? 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 assistance to individuals			1		
	located outside the United States? 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		х		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		1 ***		
	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,"		<u> </u>	1		
.0	complete Schedule G, Part III	19		x		
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1	x		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	·····	<u> </u>		
<u>D</u>	The second statements to this return (1 200	000	1		

Form **990** (2011)

4

Form	990 (2011) THE ALLIANCE TO SAVE ENERGY 52-1082991		<u> </u>	age 4
Ра	rt IV Checklist of Required Schedules (continued)	ı		
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	,	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	ļ
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 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	·	L
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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		ļ
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ļ	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	1	x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	x	
b	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		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	x	

Form 990 (2011)

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	990 (2011) THE ALLIANCE TO SAVE ENERGY		52-1082991		P	age 5
Pa						
	Check if Schedule O contains a response to any question in this Part V				<u></u>	
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<u>1a</u>	33			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	<u> </u>			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and r	-				
	(gambling) winnings to prize winners?		• • • • • • • • • • • • • • • • • • • •	1c	x	
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	258	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns? .		<u>2b</u>	x	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)				
Зa	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," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	ority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accol	unt)?	4a	x	
b	If "Yes," enter the name of the foreign country: > SOUTH AFRICA, INDIA					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Αςςοι	unts.			
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 trans-	action	?	5b		x
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	l	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	ganization solicit			
	any contributions that were not tax deductible?			<u>6a</u>	ļ	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions	or gifts			
	were not tax deductible?			6b	ļ	ļ
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 se			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?	1		7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contra	act?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f	ļ	X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8	899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. [
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a	t any ti	me during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	<i>.</i>		9b	ļ	
10	Section 501(c)(7) organizations. Enter:	1	1			1
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	L	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		-		
11	Section 501(c)(12) organizations. Enter:	1	L			
	Gross income from members or shareholders	11a	1			
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	י <mark>104</mark>	1?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b)	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				-	
а	Is the organization licensed to issue qualified health plans in more than one state?			<u>13a</u>		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1	1			
	organization is licensed to issue qualified health plans	13b	•	4		
	Enter the amount of reserves on hand	130	:			
				14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b		

Form **990** (2011)

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	990 (2011) THE ALLIANCE TO SAVE ENERGY	52-1082991			age 6
Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7.		"No" re	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See ins	tructions.			
	Check if Schedule O contains a response to any question in this Part VI				x.
Sec	tion A. Governing Body and Management				
	1 1			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a				
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	35			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with a	וע other			
	officer, director, trustee, or key employee?		2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct				
	of officers, directors, or trustees, or key employees to a management company or other person?		3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		<u>x</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint o				
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockhol				
	persons other than the governing body?		7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the	-			
а	The governing body?		<u>8a</u>	x	
b	Each committee with authority to act on behalf of the governing body?		8b	x	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code.)		ļ	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	*****	10a		x
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	filing the form?	11a	x	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	x	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to confli	cts?	12b		x
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," des		1		
	in Schedule O how this was done		12c	 	x
13	Did the organization have a written whistleblower policy?		13	x	
14	Did the organization have a written document retention and destruction policy?	<i>.</i>	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by ind	ependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
	The organization's CEO, Executive Director, or top management official		15a	x	
b	Other officers or key employees of the organization		15b	x	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with	ha			
	taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its pa	rticipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	S			
<u></u>	exempt status with respect to such arrangements?	<u></u>	16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, FL, G				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501(c)(3)s only)	availat	ble	
	for public inspection. Indicate how you made these available. Check all that apply.				
	Own website				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	interest policy, ar	nd finar	ncial	
	statements available to the public during the tax year.				
20	State the name, physical address, and telephone number of the person who possesses the books and reco	ds of the organiza	ation: 🕽	•	
	RONALD L, STUBBLEFIELD - (202) 857-0666				
132000	1850 M STREET NO. 600, WASHINGTON, DC 20036				
01-23-			Form	990	(2011)
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Form 990 (20		52-1082991	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Corr	npensated	
	Employees, and Independent Contractors	-	
	Check if Schedule O contains a response to any question in this Part VII	,	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete	this table for all persons required to be listed. Report compensation for the calendar year ending with or within the	organization's tax year.	

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

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos heck) than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot pr/trus	h an	compensation	compensation	amount of
	week (decaribo			lau		///////////////////////////////////////	(66)	from	from related	other
	(describe hours for	direct						the organization	organizations (W-2/1099-MIS C)	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(11 2/1000 1000)	organization
	organizations	trust	iai tru		oyee	oupe				and related
	in Schedule	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	0)	Ind	last	\$0	Key	E E	For			
(1) TOM KING										
<u>CO-CHAIR</u>	2.00	X		X				0.	0,	0,
(2) ROBERT J. DIXON							ł			
FIRST VICE-CHAIR	1.00	X		X				0.	0.	0.
(3) THE LATE CHARLES H. PERCY										
FOUNDING CHAIR	1.00	Х		X				0,	0.	0.
(4) FRANCIS J. MURRAY										
SECRETARY	1,00	X		X				0.	0.	0.
(5) ROBERT PRATT										
TREASURER	1.00	Х	<u> </u>	X	ļ	ļ		0.	0.	0.
<pre>(6) FRANCES BEINECKE</pre>										
MEMBER	1.00	х			<u> </u>	_		0.	0.	0,
(7) GEORGE BLITZ										
MEMBER	1.00	Х		<u> </u>	ļ	ļ		0.	0.	0.
(8) STEPHEN BROBECK										
MEMBER	1.00	X	ļ		ļ	ļ		0.	0.	0.
(9) HELEN BURT						ĺ				
MEMBER	1,00	X	ļ		ļ	 		0.	0.	0.
(10) IAIN CAMPBELL										
MEMBER	1.00	X				ļ		0,	0,	0.
(11) JORGE CARRASCO										
MEMBER	1.00	Х		ļ		 	ļ	0.	0.	0.
(12) KEMEL DAWKINS										
MEMBER	1.00	X	ļ		ļ	ļ		0.	0.	0.
(13) JEFF DREES										
MEMBER	1,00	X	ļ		ļ	ļ		0.	0.	0.
(14) THOMAS K. DREESSEN										
MEMBER	1.00	X	ļ			<u> </u>		0.	0.	0.
(15) ROGER DUNCAN	-					1				
MEMBER	1.00	X	ļ			ļ		0.	0.	0.
(16) ANTHONY EGGERT										
MEMBER	1.00	X	ļ		ļ			0.	0.	0.
(17) JOHN C. FOX										
MEMBER	1,00	Х		L	l	<u> </u>	I	0.	0.	0.

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Form 990 (2011) THE ALLIA	NCE TO SAVE EN	ERG	Y						52-108299	1		Pa	age 8
Part VII Section A. Officers, Directors	s, Trustees, Key Er	nplo	oyee	s, a	nd l	High	iest	Compensated Employ	ees (continued)				
(A) Name and title	(B) Average hours per week	(do box	not c	(C Pos heck ss pe	C) itior ^{more} rson		one th an	(D) Reportable compensation from	(E) Reportable compensation from related		Esti amo	(F) mate ount o ther	
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	(fro orga and	ensa m the nizati relationization	e ion ed
(18) CAROLYN GREEN			1			1	1						
MEMBER	1.00	х						0.		o.			0.
(19) THOMAS P. GRUMBLY MEMBER	1.00							0.		0.			0.
(20) THOMAS R. KUHN													
MEMBER	1.00	x						0.		0.			0.
(21) TERRY MCCALLISTER													
MEMBER	1.00	х						0.		0.			0.
(22) DAVE MCCURDY													
MEMBER	1.00	X	ļ	ļ				0.		0.			0.
(23) J. MICAEL MCQUADE													
MEMBER	1.00	x	ļ		ļ		ļ	0.		0.			0,
(24) WILLIAM A. NITZE													
MEMBER	1.00	Х		ļ	ļ			0.		0.			0.
(25) EARLE H. O'DONNELL					1								
MEMBER	1,00	X	<u> </u>					0.		0			0.
(26) KEVIN RIES													
MEMBER	1.00		I	I	l		.l	0.		0.			0.
1b Sub-total c Total from continuation sheets to Pa								0.		0. 0.		1 0 1	0.
d Total (add lines 1b and 1c)								1,426,877.		0.			<u>. 674.</u>
2 Total number of individuals (including							ho r			<u>v.</u> .		141,	674.
compensation from the organization						-,							10
												Yes	No
3 Did the organization list any former of	ificer, director, or tru	uste	e, ke	ey er	nple	oyee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J											3	-	x
4 For any individual listed on line 1a, is t	he sum of reportab	le co	omp	ensa	atio	n an	d ot	her compensation from	the organization				
and related organizations greater than	n \$150,000? If "Yes,	" co	mpl	ete .	Sch	edul	le J	for such individual			4	X	
5 Did any person listed on line 1a receiv	e or accrue compe	nsat	ion f	from	ı an	y uni	relat	ted organization or indiv	idual for services				
rendered to the organization? If "Yes,"	" complete Schedul	e J I	for s	uch	per	son		·····	·····		5		x
Section B. Independent Contractors													
1 Complete this table for your five highe									•	ensatio	on fr	om	
the organization. Report compensation		rear	endi	ing v	vith	or w	vithi	n the organization's tax	year.				
A) Name and busi								(B) Description of s	services	Con	(C)) Isatio	'n
WILLIAM D. FAY	101											201	010
<u>6738 MELROSE DRIVE, MCLEAN, VA 22</u> FIRST OPTION, 59 N. SANTA CRUZ AV								CONSULTING				201	,010,
<u>STE-T, LOS GATOS, CA 95030</u>	· 12 • ,							CONSULTING				161	035.
<u>ens 1, 105 entes, en 95050</u>								CONSULTING				101	,0,5,
	·												
2 Total number of independent contract \$100,000 of compensation from the o	· •	not li	mite	ed to	the	ose li 2	isteo	I d above) who received n	nore than		<u> </u>		
SEE PART VII, SECTION A CON		TS				4				Fo	orm 🤅	990 ((2011)
	Parking												1

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Part VII Section A. Officers, Directo (A)		npic	yee			ngn	est			(5)
Name and title	(B) Average hours	(cl		Pos		n app	ily)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099·MISC)	other compensation from the organization and related organizations
(27) JAMES E. ROGERS										
MEMBER	1.00	X						0.	0,	
(28) PETER SMITH										
MEMBER	1.00	х	ļ			 		0.	0.	
(29) FRED STEPHAN										
MEMBER	1.00	Х	 	 		 	 	0.	0.	
(30) SUSAN STORY										
MEMBER	1.00	X	 				ļ	0.	0.	
(31) SUSAN STRATTON										
MEMBER	1.00	X	 			<u> </u>		0.	0.	
(32) DAVE SZCZUPAK										
MEMBER	1,00	X						0.	0.	
(33) SUSAN TIERNEY	1									
AEMBER	1.00	X	<u> </u>					0.	0.	
(34) WILLIAM VON HOENE MEMBER	1									
(35) ERWIN FURUKAWA	1.00	A						0.	0.	
MEMBER	1.00	v						0.	0.	
(36) KATERI CALLAHAN	1.00					+		······································	<u> </u>	
PRESIDENT	37,50	x		x				258,500,	0.	18,14
(37) GAIL HENDRICKSON				1	<u> </u>				`	10,11
SXECUTIVE VICE PRESIDENT	37.50			x				186,903.	0.	12,47
(38) BRIAN T. CASTELLI										······································
EXECUTIVE VICE PRESIDENT	37.50			x				185,765.	0.	15,23
(39) KIRK W. MCLAREN										· · · · · · · · · · · · · · · · · · ·
CFO	37.50			х				121,509.	0.	12,60
(40) FLOYD DESCHAMP										-
VICE PRESIDENT	37,50		ļ			x	<u> </u>	163,692.	0.	14,34
(41) KARA O'CONNELL										
VICE PRESIDENT	37.50		ļ	ļ	ļ	x	ļ	121,509.	0.	12,60
(42) DANIEL HOOKS										
DIRECTOR OF FINANCE	37.50			 	ļ	X	 	101,840.	0.	11,87
(43) JEFFREY P, HARRIS										
SR VP FOR PROGRAMS	37,50		 		ļ	X	ļ	153,549.	0.	13,94
(44) MERRILEE S. HARRIGAN										
/ICE PRESIDENT	37.50				 	X	 	133,610.	0.	10,34
			<u> </u>		l					
			ł							
		I	l	L	I	1	.1		[

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	Statement of Rever			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded fron tax under sections 512 513, or 514
1 a	Federated campaigns	1a					
h	Membership dues		1 407 750				
c	Fundraising events		1,427,750.				
d	Related organizations		416,096.				
u	Government grants (contribut						
e f	All other contributions, gifts, gran	·	2,945,575.				
•	similar amounts not included abo		B 050 605				
F			7,059,695.				
g b	Noncash contributions included in lines			11 040 416			
	Total, Add lines 1a-1f			11,849,116.			1
<u> </u>			Business Code				
1	u						
Ь							
c							-
d							
e							
1 1	All other program service reve						
1	Total. Add lines 2a-2f						
	Investment income (including						
	other similar amounts)			4,481.			4,48
	Income from investment of ta						
5	Royalties		▶				
		(i) Real	(ii) Personal				
	Gross rents						
	Less: rental expenses						
	Rental income or (loss)						
d	Net rental income or (loss)		▶			·····	
7 a -	Gross amount from sales of	(i) Securities	(ii) Other				
	assets other than inventory	29,059.					
b	Less: cost or other basis						
	and sales expenses	28,352.					
c	Gain or (loss)	707.					
d	Net gain or (loss)			707.			7(
8 a (Gross income from fundraisin	g events (not					
i	including \$ 416	<u>,096.</u> of					
	contributions reported on line	1c). See					
1	Part IV, line 18	а	104,023.				
b	Less: direct expenses	b					
ci	Net income or (loss) from func	traising events	<u></u>	~57,336,			- 57, 31
9 a (Gross income from gaming ac	tivities. See					
l	Part IV, line 19	а					
bl	Less: direct expenses	b					
	Net income or (loss) from gam		►				
10 a (Gross sales of inventory, less	returns					
ä	and allowances	а	·				
bl	Less: cost of goods sold	b					
	Net income or (loss) from sale						
	Miscellaneous Revenu		Business Code				
11 a (OTHER INCOME		900099	43,910.			43,9:
							<u> </u>
c .							
	All other revenue				· · · · · · · · · · · · · · · · · · ·		-
	Total. Add lines 11a-11d			40 C1A			
	EVENED WM III IVU STATELU		.	43,910.			

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Form 990 (2011)

Form 990 (2011) THE ALLIANCE TO SAVE ENERGY Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respons	e to any question in this	s Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	800,516.	558,581.	215,214.	26,721.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	4,820,709.	3,359,574.	1,299,558.	161,577.
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	132,396.	92,267,	35,691.	4,438,
9	Other employee benefits	1,362,898.	995,976.	328,524.	38,398.
10	Payroll taxes	591,420.	412,163.	159,434.	19,823.
11	Fees for services (non-employees):				
а	u				
b		13,084.	13,084.		
	Accounting	102,207.	51,104.	51,103.	
d	Lobbying	73,609,	73,609.		
е	· · · · · · · · · · · · · · · · · · ·				
f	Investment management fees				
g		795,594.	510,938.	246,319.	38,337,
12	Advertising and promotion				
13	Office expenses	939,599.	529,327,	398,104.	12,168,
14	Information technology				
15	Royalties				
16	Occupancy	1,149,921.	80,514.	1,069,407.	
17	Travel	590,283.	457,168.	111,539.	21,576.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	727,819.	708,410.	7,085.	12,324,
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	96,288.		96,288.	
23					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
a	PRINTING AND PUBLICATIO	126,558.	93,186,	27,385.	5,987.
b	OTHER EXPENSES	113,349.	1,759.	111,590.	
с	DONATED SERVICE	-161,166.	161,166.		
d		-582,835.	3,271,005.	-3,858,002.	4,162.
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	11,692,249.	11,047,499.	299,239.	345,511,
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

132010 01-23-12

Form 990 (2011)

Form 990 (2011) Part X Balance Sheet

THE ALLIANCE TO SAVE ENERGY

L		L			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			239,992,	1	404,632.
	2	Savings and temporary cash investments				2	
	3				3,312,853.	3	4,093,137,
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, of					
		employees, and highest compensated employe					
	[of Schedule L				5	
	6	Receivables from other disqualified persons (a					
		4958(f)(1)), persons described in section 4958(
		employers and sponsoring organizations of sec					
		employees' beneficiary organizations (see instr				6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
٩	9	Prepaid expenses and deferred charges			161,619.	9	173,688.
	1	Land, buildings, and equipment: cost or other	s د	·····	101,017,	Ť	115,000.
	100	basis. Complete Part VI of Schedule D		1,744,222.			
	Ь	Less: accumulated depreciation		1 259 685.	580,825.	10c	484,537.
	11	Investments - publicly traded securities			454,738.	11	553,298,
	12	Investments - other securities. See Part IV, line			454,750,	12	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		i		14	
	15	Other assets. See Part IV, line 11			11,460.	15	479,121.
	16	Total assets. Add lines 1 through 15 (must eq			4,761,487.	16	<u>475,121.</u> 6,188,413.
	17	Accounts payable and accrued expenses			1,093,856,		1,645,794.
	18	Grants payable		18	1,045,754.		
	19	Deferred revenue			1,039,230.		1,272,585.
	20	Tax-exempt bond liabilities			1,039,230.	20	1,272,505,
Ś	21	Escrow or custodial account liability. Complete				21	· ··· ····
Liabilities	22	Payables to current and former officers, directo				<u> </u>	
lld	~~	highest compensated employees, and disqual					
Ë			•			22	
	23	Secured mortgages and notes payable to unre				23	474,696.
	24	Unsecured notes and loans payable to unrelate				24	474,030.
	25	Other liabilities (including federal income tax, p				<u> </u>	
	20	parties, and other liabilities not included on line	•				
		Schedule D			648,364.	25	669,021.
	26	Total liabilities. Add lines 17 through 25			2,781,450.	1	4,062,096.
		Organizations that follow SFAS 117, check l			2,701,400,	20	
Ņ		lines 27 through 29, and lines 33 and 34.					
ЭC	27	Unrestricted net assets			1,980,037.	27	2,126,317.
alaı	28	Temporarily restricted net assets	1,700,037.	28	2,120,517.		
Ë	29	B H F F F F F				29	
ğ		Organizations that do not follow SFAS 117,			······································		
л Ц		complete lines 30 through 34.					
ង	30	Capital stock or trust principal, or current fund	s			30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or e				31	
ŕΑ	32	Retained earnings, endowment, accumulated i				32	
Š	33	Total net assets or fund balances			1,980,037.	33	2,126,317.
		Total liabilities and net assets/fund balances	•••••		4,761,487.	1	6,188,413.

Form 990 (2011)

Form	990 (2011) THE ALLIANCE TO SAVE ENERGY	52~1082991		Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				x
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11	,840	<u>, 878</u> ,
2	Total expenses (must equal Part IX, column (A), line 25)	2	11	692	,249.
3	Revenue less expenses. Subtract line 2 from line 1	3		148	629,
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	,980	037.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2	349.
_6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2	,126	,317,
Pa	rt XII Financial Statements and Reporting				
-	Check if Schedule O contains a response to any guestion 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	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
b	Were the organization's financial statements audited by an independent accountant?		2b	x	
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			1
	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 in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	📃 Separate basis 🛛 🗴 Consolidated basis 📄 Both consolidated and separate basis				
Зa	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			1
	Act and OMB Circular A-133?		3a	х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
<u> </u>	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	x	
			Form	990	(2011)

	OULE A 0 or 990-EZ)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section		омв №. 1545-004 2011	
epartment of iternal Rever	f the Treasury tue Service	4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.		Open to Publ Inspection	
lame of t	he organizatio			entification nu	imbe
		THE ALLIANCE TO SAVE ENERGY	52	1082991	
Part I	Reason fe	or Public Charity Status (All organizations must complete this part.) See instruct			
he organi	ization is not a	private foundation because it is: (For lines 1 through 11, check only one box.)			
1		vention of churches, or association of churches described in section 170(b)(1)(A)(i).			
2	A school desc	ribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)			
3		cooperative hospital service organization described in section 170(b)(1)(A)(iii).			
4	A medical rese	arch organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the	e hospital's nar	ne,
	city, and state			-	
5	An organizatio	n operated for the benefit of a college or university owned or operated by a governmen	ntal unit described	t in	
	section 170(b)(1)(A)(iv). (Complete Part II.)			
6	A federal, state	e, or local government or governmental unit described in section 170(b)(1)(A)(v).			
7 🔝	An organizatio	n that normally receives a substantial part of its support from a governmental unit or fro	om the general pu	ublic described	in
	section 170(b)(1)(A)(vi). (Complete Part II.)			
8	•)(1)(A)(vi). (Complete Part II.) rust described in section 170(b)(1)(A)(vi). (Complete Part II.)			
8	A community t		bership fees, and	l gross receipts	s fro
	A community t An organizatio	rust described in section 170(b)(1)(A)(vi). (Complete Part II.)	•	•	
	A community t An organizatio activities relate	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) n that normally receives: (1) more than 33 1/3% of its support from contributions, mem	% of its support fr	om gross invest	stm
	A community t An organizatio activities relate income and ur	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) n that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3%	% of its support fr	om gross invest	stm
	A community t An organizatio activities relate income and un See section 5	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ad to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by th	% of its support fr	om gross invest	stm
9	A community t An organizatio activities relate income and ur See section 5 An organizatio	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ad to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by th 09(a)(2). (Complete Part III.)	% of its support fr ne organization af	rom gross invest ter June 30, 197	tm 75
9	A community t An organizatio activities relate income and ur See section 5 An organizatio An organizatio	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by th 09(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4).	% of its support fr ne organization af to carry out the p	om gross invest ter June 30, 197 urposes of one	tm 75
9	A community t An organizatio activities relate income and ur See section 5 An organizatio An organizatio more publicly	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) in that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% inrelated business taxable income (less section 511 tax) from businesses acquired by th 09(a)(2). (Complete Part III.) in organized and operated exclusively to test for public safety. See section 509(a)(4). in organized and operated exclusively for the benefit of, to perform the functions of, or the	% of its support fr ne organization af to carry out the p	om gross invest ter June 30, 197 urposes of one	stm 75.
9	A community t An organizatio activities relate income and ur See section 5 An organizatio An organizatio more publicly	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ad to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the D9(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or f supported organizations described in section 509(a)(1) or section 509(a)(2). See section	% of its support fr ne organization af to carry out the p nn 509(a)(3). Chec	om gross invest ter June 30, 197 urposes of one	tm 75
9	A community t An organizatio activities relate income and un See section 5 An organizatio An organizatio more publicly s describes the a Type I	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem and to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the D9(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h.	6 of its support fr ne organization af to carry out the p on 509(a)(3). Chec d	ter June 30, 197 aurposes of one ok the box that Type III - Other	tm 75 or
9	A community to An organizatio activities related income and un See section 5 An organizatio An organizatio more publicly sidescribes the a Type I By checking the	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the O9(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h. b Type II c Type III - Functionally integrated	6 of its support fr ne organization af to carry out the p on 509(a)(3). Chec d ore disqualified po	om gross invest ter June 30, 197 surposes of one sk the box that Type III - Other ersons other tha	or an
9	A community to An organizatio activities related income and un See section 5 An organizatio An organizatio more publicly sidescribes the a Type I By checking the foundation material	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the 09(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h. $b \square$ Type II $c \square$ Type III - Functionally integrated his box, I certify that the organization is not controlled directly or indirectly by one or more the support of the support of support of the support of	% of its support fr ne organization af to carry out the p on 509(a)(3). Chec d d ore disqualified p ion 509(a)(1) or se	om gross invest ter June 30, 197 surposes of one sk the box that Type III - Other ersons other tha	ttm 75. or
9	A community to An organizatio activities related income and un See section 5 An organizatio An organizatio more publicly so describes the a Type I By checking the foundation man If the organization	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ad to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the D9(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h. $b \square Type II c \square Type III - Functionally integrated his box, I certify that the organization is not controlled directly or indirectly by one or more nagers and other than one or more publicly supported organizations described in section tion received a written determination from the IRS that it is a Type II, or Type III$	6 of its support fr ne organization af to carry out the p on 509(a)(3). Chec d ore disqualified pe ion 509(a)(1) or se	om gross invest ter June 30, 197 surposes of one sk the box that Type III - Other ersons other tha	ttm 75. or
9	A community to An organizatio activities related income and un See section 5 An organizatio More publicly so describes the a Type I By checking the foundation mail of the organization	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the 09(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h. $b \square$ Type II $c \square$ Type III - Functionally integrated his box, I certify that the organization is not controlled directly or indirectly by one or more nagers and other than one or more publicly supported organizations described in section $b \square$ Type in $b \square$ Type II - $b \square$ Type II - Functionally integrated $b \square$ Type II - $b \square$ Type II - $b \square$ Type III - Functionally integrated $b \square$ Type II - $b \square$ Type III - $b \square$ Type III - Functionally integrated $b \square$ Type II - $b \square$ Type III - $b \square$ Type III - Functionally integrated $b \square$ Type II - $b \square$ Type III - $b \square$ Type III - Functionally integrated $b \square$ Type II - $b \square$ Type III - $b \square$ Type III - Functionally integrated $b \square$ Type II - $b \square$ Type II - $b \square$ Type III - Functionally integrated $b \square$ Type II - $b \square$ Type II - $b \square$ Type II - Functionally integrated $b \square$ Type Type II - $b \square$ Type II - $b \square$ Type II - Functionally integrated $b \square$ Type Type II - $b \square$ Type Type Type Type Type Type Type Type	% of its support fr ne organization af to carry out the p in 509(a)(3). Chec d d ore disqualified pu ion 509(a)(1) or se	om gross invest ter June 30, 197 surposes of one sk the box that Type III - Other ersons other tha	ttme 75. • or
9	A community to An organizatio activities related income and un See section 5 An organizatio An organizatio more publicly se describes the a Type I By checking the foundation mail of the organization Since August	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem and to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the 09(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h. $b \square Type II \qquad c \square Type III - Functionally integrated his box, I certify that the organization is not controlled directly or indirectly by one or more nagers and other than one or more publicly supported organizations described in section it is a Type I, or Type III and the organization form the IRS that it is a Type I, Type III or Type III anization, check this box$	% of its support fr ne organization af to carry out the p on 509(a)(3). Chec d ore disqualified pe ion 509(a)(1) or se	om gross invest ter June 30, 197 surposes of one sk the box that Type III - Other ersons other tha	an
9	A community to An organizatio activities related income and un See section 5 An organizatio An organizatio more publicly sidescribes the a Type I By checking the foundation main of the organization supporting org Since August (i) A person	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the 09(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h. b Type II c Type III - Functionally integrated his box, I certify that the organization is not controlled directly or indirectly by one or more nagers and other than one or more publicly supported organizations described in section tion received a written determination from the IRS that it is a Type I, Type III, or Type III ranization, check this box 17, 2006, has the organization accepted any gift or contribution from any of the following the organization form the function from any of the following the followi	<pre>% of its support fr ne organization af to carry out the p on 509(a)(3). Chec d ore disqualified perion tion 509(a)(1) or set ing persons? ii) and (iii) below,</pre>	ter June 30, 197 burposes of one ok the box that Type III - Other ersons other the ection 509(a)(2).	an
9	A community to An organizatio activities related income and un See section 5 An organizatio An organizatio More publicly sidescribes the a Type I By checking the foundation mail of the organization Since August (i) A person the gover	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the 09(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h. $b \Box$ Type II $c \Box$ Type III - Functionally integrated his box, I certify that the organization is not controlled directly or indirectly by one or more nagers and other than one or more publicly supported organizations described in section tion received a written determination from the IRS that it is a Type II, or Type III is anization, check this box 17, 2006, has the organization accepted any gift or contribution from any of the following who directly or indirectly controls, either alone or together with persons described in (ii	<pre>% of its support fr ne organization af to carry out the p on 509(a)(3). Chec d ore disqualified po ion 509(a)(1) or so ng persons? ii) and (iii) below,</pre>	ter June 30, 197 burposes of one sk the box that Type III - Other ersons other that ection 509(a)(2).	an
9	A community to An organizatio activities related income and un See section 5 An organizatio An organizatio more publicly sidescribes the a	rust described in section 170(b)(1)(A)(vi). (Complete Part II.) In that normally receives: (1) more than 33 1/3% of its support from contributions, mem ed to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% irrelated business taxable income (less section 511 tax) from businesses acquired by the O9(a)(2). (Complete Part III.) In organized and operated exclusively to test for public safety. See section 509(a)(4). In organized and operated exclusively for the benefit of, to perform the functions of, or the supported organizations described in section 509(a)(1) or section 509(a)(2). See section type of supporting organization and complete lines 11e through 11h. $b \Box$ Type II $c \Box$ Type III - Functionally integrated his box, I certify that the organization is not controlled directly or indirectly by one or more nagers and other than one or more publicly supported organizations described in section 17, 2006, has the organization accepted any gift or contribution from any of the following who directly or indirectly controls, either alone or together with persons described in (ii ning body of the supported organization?	<pre>% of its support fr ne organization af to carry out the p on 509(a)(3). Chec d ore disqualified p ion 509(a)(1) or se ng persons? ii) and (iii) below,</pre>	ter June 30, 197 burposes of one ok the box that Type III - Other ersons other that ection 509(a)(2).	an

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	(iv) Is the c in col. (i) lis governing	organization sted in your document?	(v) Did you organizat (i) of your	unotify the ion in col. r support?	(vi) ls organizatio (i) organize U.S.	the n in col. ed in the ?	(vii) Amount of support
		(see instructions))	Yes	No	Yes	No	Yes	No	······································
<u></u>									
· · · · · · · · · · · · · · · · · · ·									
T-+-1									
Total	I		1	1		1	I	1	

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

Schedule A (Form 990 or 990-EZ) 2011

	edule A (Form 990 or 990-EZ) 2011 TH	E ALLIANCE TO	SAVE ENERGY			52-1082991	Page 2
Pa	art II Support Schedule for (-					
	(Complete only if you checked				i failed to quality L	inder Part III. If the o	organization
0.	fails to qualify under the tests	listed below, pleas	e complete Part in				
	ction A. Public Support	······					
	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	8,988,013.	9,563,959.	12,111,353.	12,664,590.	11,849,116.	55,177,031.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	8,988,013.	9,563,959.	12,111,353.	12,664,590.	11,849,116.	55,177,031.
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)						8,821,455.
	Public support. Subtract line 5 from line 4.				· · ·		46,355,576.
	ction B. Total Support	·····	·····	r		·	
	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	8,988,013.	9,563,959.	12,111,353.	12,664,590.	11,849,116,	55,177,031.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	19,050.	19,529.	1,270.	4,665.	4,481.	48,995.
9							
	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 IV.)	38,674,	9,808.	8,821,	6,779,	43,910,	107,992,
11						l	55,334,018,
12						12	481,388.
13	· · · · · · · · · · · · · · · · · · ·	-			•		
0.	organization, check this box and stop	here			····		
	ction C. Computation of Publ						
1 4	Public support percentage for 2011 (I					14	83.77 %
15						15	83,57 %
16	a 33 1/3% support test - 2011. If the c	+					
	stop here. The organization qualifies						
1	o 33 1/3% support test - 2010. If the c	-					
	and stop here. The organization qual						
17:	a 10% -facts-and-circumstances tes	t - 2011. If the orga	anization did not c	heck a box on line	13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstant	ces" test, check th	is box and <mark>stop h</mark>	ere. Explain in Pa	rt IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a p	publicly supported	l organization		▶∟
I	o 10% -facts-and-circumstances tes	t - 2010. If the orga	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is ⁻	10% or
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, ch	eck this box and	stop here. Explair	n in Part IV how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	cly supported org	anization	▶∟
18	Private foundation. If the organizatio	n did not check a l	<u>oox on line 13, 16a</u>	a, 16b, 17a, or 17t	o, check this box a	and see instructions	<u>3 Þ</u>

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990 EZ) 2011

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

Sec	ction A. Public Support						······
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
-	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
Ĩ	furnished by a governmental unit to						
_	the organization without charge			· · · ·			
	Total. Add lines 1 through 5				·····		
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons				-		
b	Amounts included on lines 2 and 3 received from other than disgualified persons that exceed the greater of \$5,000 or 1% of the						
_	amount on line 13 for the year	<u></u>					
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)	····	1	1			
	ction B. Total Support					1	
	ndar year (or fiscal year beginning in) 🕨 🖡	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	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						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organ	ization,
	check this box and stop here						
Sec	ction C. Computation of Publi						
	Public support percentage for 2011 (li			column (fi)		15	%
	Public support percentage from 2010		-			16	%
<u>16</u> Sec	ction D. Computation of Inves						
					······	4.99	0/
							%
18	Investment income percentage from 2						%
1 9a	33 1/3% support tests - 2011. If the						
	more than 33 1/3%, check this box ar	•	• ·				
b	33 1/3% support tests - 2010. If the line 18 is not more than 33 1/3%, che	+					
20	Private foundation. If the organization						
				. ,			······································

132023 01-24-12

Schedule A (Form 990 or 990-EZ) 2011

Schedule B

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

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

Employer identification number

<u></u> ,	THE ALLIANCE TO SAVE ENERGY	52-1082991
Organization type (chee	sk one):	
Filers of:	Section:	
Form 990 or 990-EZ	x 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private 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	
	on is covered by the General Rule or a Special Rule. 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	cial Rule. See instructions.
General Rule		
	ation filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more emplete Parts I and II.	e (in money or property) from any one
Special Rules		
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990 EZ that met the 33 1/3% support test of t 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution o on (i) Form 990, Part VIII, line 1h, or (ii) Form 990 EZ, line 1. Complete Parts I and II.	
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one ons of more than \$1,000 for use <i>exclusivel</i> y for religious, charitable, scientific, literary, of cruelty to children or animals. Complete Parts I, II, and III.	
contributions for If this box is ch purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one or use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did necked, enter here the total contributions that were received during the year for an ex- ot complete any of the parts unless the General Rule applies to this organization bec table, etc., contributions of \$5,000 or more during the year.	not total to more than \$1,000. c <i>lusively</i> religious, charitable, etc., cause it received nonexclusively
	on that is not covered by the General Rule and/or the Special Rules does not file Sche ' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or o	

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) (2011)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

52-1082991

THE ALLIANCE TO SAVE ENERGY

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<u>1</u>		\$595,105.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$950,000.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$2,356,138.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$1,974,520.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$462,272.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$907,154.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

THE ALLIANCE TO SAVE ENERGY

52-1082991

Part I (Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$325,000.	Person x Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Payroll Payroll Payroll Parcash Parcash Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Payroll Noncash Complete Part II if there is a noncash contribution.

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

Page 3

THE ALLIANCE TO SAVE ENERGY

52-1082991

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	· · · · · · · · · · · · · · · · · · ·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	······		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990 990-FZ or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

 Schedule B (Form 990, 990 EZ, or 990 PF) (2011)

Page 4

Name of organiz	ation		Employer identification number
Part III	<u>5 TO SAVE ENERGY</u> Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc Use duplicate copies of Part III if addition	ridual contributions to section 501(c)(ne following line entry. For organization 2., contributions of \$1,000 or less for t	(7), (8), or (10) organizations that total more than \$1,000 for the is completing Part III, enter the year. (Enter this information once.) \blacktriangleright \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	t Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

SCHEDULE C (Form 990 or 990-EZ) Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527						OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Complete	e if the organization is described ► See separa	d below. ► Attach t te instructions.	o Form 990 or Form	990-EZ	Open to Public
 Section 501(c)(3) or Section 501(c) (other Section 527 organiz If the organization ans 	ganizations: Corr er than section 5(ations: Complete wered "Yes" to	Form 990, Part IV, line 3, or Forr plete Parts I-A and B. Do not con 01(c)(3)) organizations: Complete I	n 990-EZ, Part V, lind oplete Part I-C. Parts I-A and C below n 990-EZ, Part VI, lin	. Do not complete Pa le 47 (Lobbying Acti	art I-B. vities), tl	ıen
 Section 501(c)(3) or 	ganizations that	have NOT filed Form 5768 (electic Form 990, Part IV, line 5 (Proxy 1	on under section 501(h	n)): Complete Part II-l	3. Do not	complete Part II-A.
		ionar Complete Dart III	Tax), of Form 990-22		τολγιτάλ	, men
Name of organization Part I-A Compl	THE ALLIANC	E TO SAVE ENERGY anization is exempt unde				er identification number 52-1082991 anization.
2 Political expenditu	res	ation's direct and indirect politica				
Part I-B Compl	ete if the org	anization is exempt unde	er section 501(c)	(3).	<u> </u>	
 Enter the amount of Enter the amount of If the organization 4a Was a correction m b If "Yes," describe in 	of any excise tax of any excise tax incurred a sectio nade? n Part IV.	incurred by the organization unde incurred by organization manage n 4955 tax, did it file Form 4720 fo ganization is exempt unde	er section 4955 rs under section 4955 or this year?		., ► \$ <u> </u>	Yes No
L		by the filing organization for sec				(5).
2 Enter the amount of	of the filing organ	ization's funds contributed to oth	er organizations for se	ection 527		
					🏲 💲 _	
		. Add lines 1 and 2. Enter here an			► \$	
		1120-POL for this year?				Yes No
made payments. For contributions receire	or each organiza ved that were pr	nployer identification number (EIN tion listed, enter the amount paid omptly and directly delivered to a additional space is needed, provid	from the filing organiz separate political org	zation's funds. Also e anization, such as a	enter the	amount of political
(a) Nama	9	(b) Address	(c) EIN	(d) Amount paid filing organizati funds. if none, en	on's 🛛 🗘	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
						·····
		<u> </u>				
<u></u>			<u>, </u>	1	<u> </u>	

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990 EZ) 2011	THE ALLIANCE TO SA	VE ENERGY		52-108	2991 Page 2
Part II-A Complete if the org		pt under section	501(c)(3) and file	d Form 5768	
(election under sec	<u>`</u> ``				
	tion belongs to an affilia		Part IV each affiliated g	group member's nam	e, address, EIN,
	e of excess lobbying ex	. ,			
B Check 🕨 🛄 if the filing organiza	tion checked box A and	"limited control" provi	sions apply.		
Limit	ts on Lobbying Expend	litures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" means amount	ts paid or incurred.)		totals	totais
t - Total jabby ing average its was to infl					
1a Total lobbying expenditures to influe				73,609.	
 b Total lobbying expenditures to influing c Total lobbying expenditures (add li 				0,	
d Other exempt purpose expenditure	nes ra anu ru)			73,609.	
e Total exempt purpose expenditure	s (add lines 1c and 1d)	•••••••••••••••••••••••••••••••••••••••		11,618,640.	
f Lobbying nontaxable amount. Enter				<u> 11,692,249,</u> 734,612.	
If the amount on line 1e, column (a) o		ving nontaxable amou		/34,012.	
Not over \$500,000		e amount on line 1e.			
Over \$500,000 but not over \$1,000		plus 15% of the exces	s over \$500.000.		
Over \$1,000,000 but not over \$1,5		plus 10% of the exces			
Over \$1,500,000 but not over \$17,		plus 5% of the excess			
Over \$17,000,000	\$1,000,00				
g Grassroots nontaxable amount (en	ter 25% of line 1f)			183,653.	
h Subtract line 1g from line 1a. If zero			ſ	0.	
i Subtract line 1f from line 1c. If zero	or less, enter -0-			0.	
j If there is an amount other than ze	ro on either line 1h or lin	ie 1i, did the organizati	on file Form 4720	_	
reporting section 4911 tax for this	year?			<u></u>	Yes No
		aging Period Under Se			
	ations that made a sec				
C0	lumns below. See the			ge 4.)	
	Lobbying Expend	litures During 4-Year	Averaging Period		1
Calendar year	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
(or fiscal year beginning in)	(a) 2000	(b) 2009	(0) 2010	(u) 2011	
2a Lobbying nontaxable amount	640,197.	742,464.	767,629.	734,612.	2,884,902.
b Lobbying ceiling amount		/42,404,	101,023.	/54,012.	2,084,902.
(150% of line 2a, column(e))					4,327,353.
					4,527,555.
c Total lobbying expenditures	123,725.	35,668,	107,805.	73,609.	340,807.
			10,000.		
d Grassroots nontaxable amount	160,049.	185,616.	191,907.	183,653,	721,225.
e Grassroots ceiling amount	······				
(150% of line 2d, column (e))					1,081,838.
f Grassroots lobbying expenditures	13,741.	571.	5,806,	73,609,	93,727
				Schedule C (Form	990 or 990-F7) 2011

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 THE ALLIANCE TO SAVE ENERGY 52-1082991 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b))
of the	o lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912		-		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	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?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part	III-A, line	e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
-	expenses for which the section 527(f) tax was paid).				
а	Current vear		2a		

а	Current year	2a	
b	Carryover from last year	2b	
с	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		
	expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	
-			

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

Page 3

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Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990. See separate instructions.



Nam	e of the organization		Employer identification number
Pa	THE ALLIANCE TO SAVE ENERGY rt I Organizations Maintaining Donor Advised	Funde or Other Similar Funde o	<u>52-1082991</u>
1 0	organization answered "Yes" to Form 990, Part IV, line (Accounts. Complete in the
	organization answered Tes to Form 990, Part IV, line of	a) Donor advised funds	(b) Funds and other accounts
4	Total number at end of year		(b) I and and other accounts
1			
2			
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wr	-	
6	are the organization's property, subject to the organization's ex-		
0	Did the organization inform all grantees, donors, and donor adv		r
	for charitable purposes and not for the benefit of the donor or o		
Pa	impermissible private benefit? rt II Conservation Easements. Complete if the orga	pization approach "Yea" to Form 990. Bo	YesNo
1	Purpose(s) of conservation easements held by the organization		
1	Preservation of land for public use (e.g., recreation or edu		ricely important land area
	Protection of natural habitat	Preservation of a certific	rically important land area
	Preservation of open space	Preservation of a certile	eu historic structure
2	Complete lines 2a through 2d if the organization held a qualifie	d conconcilian contribution in the form of	a concervation accompany on the last
~	day of the tax year.	d conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
č	Number of conservation easements on a certified historic struct		
b b	Number of conservation easements included in (c) acquired aff		
	listed in the National Register		
з	Number of conservation easements modified, transferred, relea		
-	year >		
4	Number of states where property subject to conservation ease	ement is located ►	
5	Does the organization have a written policy regarding the perio		
	violations, and enforcement of the conservation easements it h		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, as		
7	Amount of expenses incurred in monitoring, inspecting, and er		· · · · · · · · · · · · · · · · · · ·
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h))(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes th	e organization's accounting for
1	conservation easements.		
Pa	rt III Organizations Maintaining Collections of .		ner Similar Assets.
	Complete if the organization answered "Yes" to Form 9		
1 a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition	bition, education, or research in furtherand	ce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describe	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statement a	ind balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ication, or research in furtherance of publ	ic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
			🕨 \$
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financial (gain, provide
	the following amounts required to be reported under SFAS 116	· · · ·	
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		• • •

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		E TO SAVE ENERG					52-1082			<u>ige 2</u>
Par	t III Organizations Maintaining C	ollections of A	rt, Histo	orical Tr	easures, o	r Othe	r Similar Ass	ets (conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	is, check	any of the	following that	are a sig	gnificant use of its	s collectior	1 items	3
	(check all that apply):									
а	Public exhibition	c	1 🗆 L	oan or exc	hange progra	ms				
b	Scholarly research	e			0.0					
с	Preservation for future generations	-								
4	Provide a description of the organization's co	ollections and explai	n how the	ev further fl	he organizatio	n's exen	nnt nurnose in Pa	ut XIV.		
5	During the year, did the organization solicit o									
Ŷ	to be sold to raise funds rather than to be ma							Yes] No
Par	t IV Escrow and Custodial Arran									<u>) NU</u>
	reported an amount on Form 990, Par	ot X line 21	eten tile	organizatio	in answered		-0181 550, Fait IV	, 1818 9, 01		

та	Is the organization an agent, trustee, custod								[·····]	1
	on Form 990, Part X?						····· l	Yes	L	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	bllowing ta	able:						
								Amoun	t	
	Beginning balance									
d	Additions during the year	******					. 1d			
е	Distributions during the year					•••••	. 1e			
f	Ending balance									
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					Yes		No
	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete i	f the organization ar	swered "	Yes" to Fo	rm 990, Part i	V, line 10	Э.			
		(a) Current year	1	ior year	1		d) Three years bac	k (e) Four	vears	back
1a	Beginning of year balance				1.1-1			1 1 1 1 1 1 1		<u></u>
	Contributions									<u> </u>
	Net investment earnings, gains, and losses									
	Grants or scholarships									
	1									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses				ļ					
g	End of year balance		1		I					
2	Provide the estimated percentage of the cur		ce (line 1g	, column (a	a)) held as:					
а	Board designated or quasi-endowment 🕨		%							
b	Permanent endowment	%								
с	Temporarily restricted endowment >	%								
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	are held a	and administer	red for th	ne organization			
	by:	-					5	[Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations	·····	•••••	••••••						
h	If "Yes" to 3a(ii), are the related organizations	listed as required (on Schodi			••••••		3b		
4	Describe in Part XIV the intended uses of the					••••••	•••••	30		
Par										
	, 3 , 1									
	Description of property	(a) Cost or c	1		t or other	• •	cumulated	(d) Boo	k valu	e
	· · · ·	basis (investi	mentj	Dasis	(other)	aep	preciation			
	Land									
	Buildings								······································	
с	Leasehold improvements			1	L,023,009.		600,959.		422	050.
d	Equipment									
	Other				721,213,		658,726,		62	487.
	. Add lines 1a through 1e. (Column (d) must e		X, colum	n (B), line						537.
							Schedu	le D (Forn		

Schedule D (Form 990) 2011

Deut VIII June sture suite Oti		ALLIANCE			ENERGY
Schedule D (Form 990) 2011	001170	377733400	ma	A	

52-1082991

Page	3

(1) Financial derivatives		Method of valuation: r end-of-year market value
(3) Other		
(A) (B) (B) (C) (C) (C) (D) (C) (E) (C) (G) (C) (G) (C) (G) (C) (G) (C) (G) (C) (H) (C) (I) (D) (I) (D) (a) Description of investment type (I) (D) (2) (D) (3) (D) (4) (D) (5) (D) (6) (C) (7) (D) (8) (D) (9) (D) (10) (D) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, tine 15. (a) Description		
(B)		
(C)		
(D)		
(E) (G) (G) (H) (I) (I) Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶ (b) Book value (a) Description of investment type (b) Book value (1) (b) Book value (2) (b) Book value (3) (b) Book value (4) (5) (6) (1) (7) (B) (8) (1) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(F) (G) (H) (I) Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ► (D) Part VIII Investments - Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value (1) (b) Book value (2) (b) Book value (3) (A) (4) (C) (5) (C) (6) (C) (7) (C) (8) (C) (9) (C) (10) (C) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(G) (H) (I) Investments - Program Related. See Form 990, Part X, line 13. Part VIII Investments - Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value (1) (b) Book value (2) (b) Book value (3) (A) (4) (A) (5) (B) (6) (B) (7) (B) (8) (B) (9) (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description (Col (b) must equal Form 990, Part X, col (B) line 13.)		
(H) (I) Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶ ▶ Part VIII Investments - Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value (1) (b) Book value (2) (b) Book value (3) (b) Book value (4) (c) (5) (c) (6) (c) (7) (c) (8) (c) (10) (c) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(I) Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶ Part VIII Investments - Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value (1) (b) Book value (2) (b) Book value (3) (b) Book value (4) (c) (5) (c) (6) (c) (7) (c) (8) (c) (9) (c) (10) (c) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value (1) (b) Book value (2) (c) (3) (c) (4) (c) (5) (c) (6) (c) (7) (c) (8) (c) (9) (c) (10) (c) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(a) Description of investment type (b) Book value (1) (2) (3) (3) (4) (4) (5) (5) (6) (7) (8) (9) (10) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(1) (2) (3) (4) (5) (5) (6) (7) (8) (9) (10) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, tine 15. (a) Description		
(2) (3) (4) (5) (5) (6) (7) (8) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(3) (4) (5) (5) (6) (7) (8) (9) (10) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► (2) Part IX Other Assets. See Form 990, Part X, tine 15. (a) Description		
(4) (5) (5) (6) (7) (7) (8) (9) (10) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(5) (6) (7) (7) (8) (9) (10) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(6) (7) (8) (9) (10) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► (10) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(7) (8) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► (2) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(8) (9) (10) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► (10) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(9) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
Part IX Other Assets. See Form 990, Part X, line 15. (a) Description		
(a) Description		
(1) OTHER RECIEVABLES		(b) Book value
		12,550.
(2) DUE FROM AFFILIATE		466,571.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	·	
Part X Other Liabilities. See Form 990, Part X, line 25.		
	ok value	
(1) Federal income taxes		
(2) DEFERRED RENT	669,021.	
(3)		
(4)	·····	
(5)		
(6)		
(7) (8)		
(9)		
(10)		
(11)		
	569 021	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) Fin 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that 2. FIN 48 (ASC 740).	t reports the organizatio	n's liability for uncertain tax positions under

Schedule D (Form 990) 2011

-		orm 990) 2011 THE ALLIANCE TO SAVE ENERGY Reconciliation of Change in Net Assets from Form 990 to A	Audited	Financ		52-1082 ments	991 Page 4
1		zenue (Form 990, Part VIII, column (A), line 12)			1		11,840,878.
2		penses (Form 990, Part IX, column (A), line 25)			2		11,692,249.
3		or (deficit) for the year. Subtract line 2 from line 1			3		148,629.
4		palized gains (losses) on investments			4		~2,349,
5		I services and use of facilities			5		<u> </u>
6		ent expenses			6		
7		riod adjustments			7		
8		escribe in Part XIV.)			8		
9	Total ad	justments (net). Add lines 4 through 8	• • • • • • • • • • • • • • • • • •	·····	9		-2,349.
10	Excess	or (deficit) for the year per audited financial statements. Combine lines 3 and			10		146,280,
preserver		Reconciliation of Revenue per Audited Financial Statemer				eturn	140,200,
1	••••••					1	19,912,786.
2		s included on line 1 but not on Form 990, Part VIII, line 12:		•••••••••••	••••		17, 512, 700.
a		ealized gains on investments	2a		2 349.		
b		I services and use of facilities			161,166.		
c		ies of prior year grants	20 20		101,100.		
d		escribe in Part XIV.)		7	913,091,		
e		s 2a through 2d				2e	8,071,908.
3		t line 2e from line 1				3	11,840,878.
4		s included on Form 990, Part VIII, line 12, but not on line 1:					11,040,070.
а		ent expenses not included on Form 990, Part VIII, line 7b	4a				
b		escribe in Part XIV.)	and a second and a second s				
						40	0.
5		s 4a and 4b /enue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	11.840.878.
		Reconciliation of Expenses per Audited Financial Stateme					
1		penses and losses per audited financial statements				1	19,740,906.
2		s included on line 1 but not on Form 990, Part IX, line 25:					19,740,900,
a		I services and use of facilities	2a		161,166.		
b		ar adjustments			101,100.		
c c		sses					
ď		escribe in Part XIV.)			887,491,	1	
		s 2a through 2d				2e	8,048,657.
3		t line 2e from line 1				3	11,692,249.
4		s included on Form 990, Part IX, line 25, but not on line 1:			•••••		11,052,245,
		ent expenses not included on Form 990, Part VIII, line 7b	4a				
		escribe in Part XIV.)	4b			1	
		s 4a and 4b				4c	٥
5		penses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	0.
+		Supplemental Information	******		************		11 092 249
L.		part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1a	and 4. Par	t IV lines 1	h and 2h	Part V line 4: Part
		XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl					
		IE 2: ON JANUARY 1, 2009, THE ORGANIZATION ADOPTED THE	ere and p	art to prov	ac any aa	unional in	iornasori.
THAT	<u>, DIL</u>	IS 2: ON DANGART 1, 2009, THE ORGANIZATION ADDRIED THE					
ACCC	UNTING	STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (FASB				
ASC	TOPIC 7	40-10), WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX					
BENE	FITS CI	AIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD B	E				
RECO	RD IN 1	THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE ORGAN	IZATION	[
MAY	RECOGNI	ZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY I	F IT IS	3			
MORE	LIKELY	THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON					
EXAM	INATION	BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF	THE				

Schedule D (Form 990) 2011

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Schedule D (Form 990) 2011 THE ALLIANCE TO SAVE ENERGY Part XIV Supplemental Information (continued)	52-1082991	Page 5
POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM		
SUCH & POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A		<u> </u>
GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT.		
THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES		
DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES,		******
AND ACCOUNTING IN INTERIM PERIODS.		
MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT	NA NY ALAO MARANA AMIN'NY FININA AMIN'NY FININA AMIN'NY FININA AMIN'NY FININA AMIN'NY FININA AMIN'NY FININA AMI	<u></u>
THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE		
ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH THE		
PROVISIONS OF THIS GUIDANCE. THE ORGANIZATION FILES INCOME TAX RETURNS IN		
THE U.S. FEDERAL JURISDICTION. GENERALLY, THE ORGANIZATION IS NO LONGER		<u> </u>
SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE OF LOCAL TAX		
AUTHORITIES FOR YEARS BEFORE 2008.		
PART XII, LINE 2D - OTHER ADJUSTMENTS:		
SEEA REVENUE INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 7,913,091.		
PART XIII, LINE 2D - OTHER ADJUSTMENTS:		
SEEA EXPENSES INCLUDED IN CONSOLIDATED FINANCIAL STATEMENTS 7,887,491.		
		·····

SCHEDULE F (Form 990)		Complete if the	vities Outside the Ur organization answered "Yes" to For Part IV, line 14b, 15, or 16. orm 990. See separate instruction	rm 990,	tes –	OMB No. 1545-0047 2011 Open to Public Inspection
Internal Revenue Service Name of the organization					Employer iden	tification number
-						
THE ALLIANCE TO SAVE		ativitian Ou	tside the United States. Comp		52-1082991	
to Form 990, P		ctivities Ou	tside the United States. Comp	lete if the organ	ization answered	"Yes"
		n maintain recor	ds to substantiate the amount of its gr	ants and other	assistance	
=	-		the selection criteria used to award the			Yes 🗌 No
United States.		-	procedures for monitoring the use of it		ther assistance o	utside the
	· · · · · · · · · · · · · · · · · · ·		an be duplicated if additional space is	1		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a prog describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
SOUTH ASIA						
AFGHANISTAN,				ENERGY EFFI	CIENCY	
BANGLADESH	1	. 0	PROGRAM SERVICES.	PROGRAMS.		580,287.
RUSSIA & THE NEWLY				ENERGY EFFI	CIENCY	
INDEPENDENT STATES -	1	0	PROGRAM SERVICES,	PROGRAMS.		427,671.
				ENERGY EFFI	CIENCY	
SUB-SAHARAN AFRICA	1	. 0	PROGRAM SERVICES.	PROGRAMS.		427,671.
				<u> </u>		
<u></u>						
3 a Sub-total		3 0				1,435,629.
b Total from continuation						
sheets to Part I		0	· · · · · · · · · · · · · · · · · · ·			0,
c Totals (add lines 3a and 3b)						1,435,629,
and 3b)		3 0	_1			L 400 047

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Schedule F (Form 990) 2011

(b) IRS code sectional space is additional space is and EIN (if applicable) (i		(d) Purpose of (e) Amount (f) Manuet of non-cash (g) Amount of non-cash (h) Description (i) Method of valuation (book, FMV, appraisal, other)				
	Part II can be duplicated if additional space is needed.	(b) IRS code section and EIN (if applicable) (c) Region				

01-23-12

Page 3		 (h) Method of valuation (book, FMV, appraisal, other) 					Schedule F (Form 990) 2011
	V, line 16.	(g) Description of non-cash assistance					Schedu
52-1082991	o Form 990, Part I	(f) Amount of non-cash assistance					
52-	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.	(e) Manner of cash disbursement					
	ltes. Complete if th	(d) Amount of cash grant					-
E ENERGY	le the United Sta d.	c) Number of recipients					
THE ALLIANCE TO SAVE ENERGY	e to Individuals Outsio Iditional space is neede	(b) Region					
Schedule F (Form 990) 2011 TH	Part III Grants and Other Assistance to Individuals Outside Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance					

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Scheo	UNE F (Form 990) 2011 THE ALLIANCE TO SAVE ENERGY	52-1082991	Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	x No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	x No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	x No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	x No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	x No

Schedule F (Form 990) 2011

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SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,

OMB No. 1545-0047 ٦ l

Open To Public

Name of the organizatio	Name	of the	organ	nizat	ior
-------------------------	------	--------	-------	-------	-----

	he organization entered more tha Nttach to Form 990 or Form 990-E					Inspection
Name of the organization				pulate monactions		r identification number
THE ALLIANC	E TO SAVE ENERGY				52-1082	991
Part I Fundraising Activities. required to complete this part	Complete if the organization answ	ered "Y	'es" to) Form 990, Part IV, I	ine 17. Form 99)0·EZ filers are not
1 Indicate whether the organization rais	····· · · · · · · · · · · · · · · · ·	ng acti	/ities.	Check all that apply.	······································	
a Mail solicitations	e 🛄 Solicita	tion of	non-g	overnment grants		
b Internet and email solicitations	f Solicita	tion of	gover	nment grants		
c Phone solicitations	g Special	fundra	ising (events		
d In-person solicitations						
2 a Did the organization have a written of						
key employees listed in Form 990, Pa				=		Yes No
b If "Yes," list the ten highest paid indiv compensated at least \$5,000 by the			agre	ements under which	ule lunuraiser	is to be
		(iii) fundi	Did	") O	(v) Amount p	aid (vi) Amount paid
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fúndi have c or con contrib	ustody trol of	(iv) Gross receipts from activity	tò (or retained fundraiser listed in col.	to (or retained by)
	· · · · · · · · · · · · · · · · · · ·	Yes	No			
	· · · · · · · · · · · · · · · · · · ·					
					-	
			L			
Total 3 List all states in which the organization or licensing.	n is registered or licensed to solicit		oution	l s or has been notifie	l d it is exempt f	rom registration
						<u></u>
_HA Paperwork Reduction Act Notice, s	see the Instructions for Form 990) or 99()-EZ.		Schedule (G (Form 990 or 990-EZ) 201

Pa		e G (Form 990 or 990 EZ) 2011 THE ALLIAN		"Yes" to Form 990, P		082991 Page 2 more than \$15,000
L		of fundraising event contributions and gr				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			ANNUAL AWARD		NONE	(add col. (a) through
			DINNER			- col. (c))
e			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	520,119.			520,119.
	2	Less: Charitable contributions	416,096.			416,096.
	3	Gross income (line 1 minus line 2)	104,023.			104,023.
	4	Cash prizes				
ses	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				161,359.
	10	Direct expense summary. Add lines 4 through				(161,359)
	11	Net income summary. Combine line 3, colum				-57,336,
Par	tl	II Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19,	or reported more than	
		\$15,000 on Form 990 EZ, line 6a.		.		
e			(a) Bingo	(b) Pull tabs/instant	I (c) Other damind	(d) Total gaming (add
Revenue			(2) 2	bingo/progressive bing	jo (c) - trict gammig	col. (a) through col. (c))
Rev						
	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
정	4	Rent/facility costs				
	5	Other direct expenses				
	<u> </u>		Yes %	Yes	% Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			()
	8	Net gaming income summary. Combine line	1, column d, and line 7		>	
0	Ent	er the state(s) in which the organization opera	too comina optivition			
		he organization licensed to operate gaming ad				Yes No
		No," explain:				
						· · · · · · · · · · · · · · · · · · ·
		re any of the organization's gaming licenses n		-		🗌 Yes 🗌 No
b	lf "`	Yes," explain:				

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Schedule G (Form 990 or 990-EZ) 2011

Sch	edule G (Form 990 or 990 EZ) 2011 THE ALLIANCE TO SAVE ENERGY 5	2-108299	1		Page 3
11	Does the organization operate gaming activities with nonmembers?] Ye	es [No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed				
	to administer charitable gaming?	Ē] <u>γ</u> ∈	es [No
13	Indicate the percentage of gaming activity operated in:				
a	a The organization's facility	13	la		%
	An outside facility		lb		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records				
	Name ►				
	Address 🕨		•		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Lather	_] γ €	es (No
Ł	b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	nt			
	of gaming revenue retained by the third party > \$,				
c	If "Yes," enter name and address of the third party:				
	Name				
	Address 🕨				
16	Gaming manager information:				
	Name 🕨				
	Gaming manager compensation 🕨 \$				
	Description of services provided 🕨				
		 			
	Director/officer Employee independent contractor				
17	Mandatory distributions:				
	I is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?	Г		es	No
ł	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in				
	organization's own exempt activities during the tax year > \$				
Pa	Int IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, colur	ons (iii) an	(v) h	and F	Part III
L	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional infor				

SCHEDULE J	Compensation Information	OM8 No. 1	545-004	47
(Form 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	20	11	
	Compensated Employees Complete if the organization answered "Yes" to Form 990,	<u> </u>		
Department of the Treasury	Part IV, line 23.	Open to		ic
Internal Revenue Service	Attach to Form 990. See separate instructions.	Inspec		<u></u>
Name of the organization	n En	nployer identificatio	on nui	mber
	THE ALLIANCE TO SAVE ENERGY	52-1082991		
Part I Question	s Regarding Compensation			
			Yes	No
	iate box(es) if the organization provided any of the following to or for a person listed in Form 990	1,		
	line 1a. Complete Part III to provide any relevant information regarding these items.			
First-class or c				
	Ipanions Payments for business use of personal reside cation and gross-up payments I Health or social club dues or initiation fees	ance		
	spending account End gloss up payments End and gloss up dayments End a	a		
	spending account Personal services (e.g., maid, chadnedi, cher	/		
h If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or			
	provision of all of the expenses described above? If "No," complete Part III to explain	1b		
	n require substantiation prior to reimbursing or allowing expenses incurred by all officers, directo			
	EO/Executive Director, regarding the items checked in line 1a?			
3 Indicate which, if a	ny, of the following the filing organization used to establish the compensation of the organization	n's		
	ector. Check all that apply. Do not check any boxes for methods used by a related organization			
	ation of the CEO/Executive Director. Explain in Part III.			
Compensation				
	compensation consultant			
x Form 990 of o		imittee		
4 During the year, did	any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
organization or a re	lated organization:			
a Receive a severance	e payment or change-of-control payment?	4a		x
b Participate in, or re-	ceive payment from, a supplemental nonqualified retirement plan?	4b		x
c Participate in, or re-	ceive payment from, an equity-based compensation arrangement?			x
If "Yes" to any of lir	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	c)(3) and 501(c)(4) organizations must complete lines 5-9.			
	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
contingent on the r				
				X
	ation?	<u>5b</u>		x
	r 5b, describe in Part III.			
	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
contingent on the r				
a The organization?		<u>6a</u>		X
	ation?	<u>-6b</u>	<u></u>	X
	r 6b, describe in Part III.			
	n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	_		
	es 5 and 6? If "Yes," describe in Part III			X
	reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		<u> </u>	X
	d the organization also follow the rebuttable presumption procedure described in		ĺ	
	n 53.4958-6(c)?		- 000	
- LINA FOR Paper work H	eduction Act Notice, see the Instructions for Form 990.	Schedule J (Form	n 990)	12011

Schedule J (Form 990) 2011 THE ALLIANCE TO SAVE ENERGY Part II Officers Directors Tructees Key Employees and Hinhest Comm	TANC	THE ALLIANCE TO SAVE ENERGY as Key Employees and Highest Co	<u>:Y</u> Compensated Emp	invees Use duning	52-1082991 ensated Employees. Else d'unitate conies if additional snace is needed	thana is needed		Page 2
∽ _ n	be rep Form	oorted in Schedule J 990, Part VII.	, report compensati	ion from the organiz	ation on row (i) and fror	n related organizations	s, described in the inst	ructions, on row (ii).
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the to	ed ind	lividual must equal t	he total amount of F	orm 990, Part VII, S	ection A, line 1a, applic	al amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.	 amounts for that inc 	lividual.
		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E) Tatal of actimute	(F)
(A) Name	1	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Hetirement and other deferred compensation	Nontaxable benefits	lotal of columns (B)(i)-(D)	compensation reported as deferred in prior Form 990
	9	247,915.	10,585.	0.	10,340.	7.800.	276,640.	0.
1 KATERI CALLAHAN	(ii)	0.	0.	0.		0.	•0	0.
	(1)	178,388.	8 515.	0,	7.476.	5,000.	199,379.	0.
2 GAIL HENDRICKSON	0	0.	.0	.0	•0	.0	0	0.
	Ξ	178,388.	7.377.	0	7 431.	7,800.	200,996.	0.
3 BRIAN T. CASTELLI	(ii)		0.	0.	0	.0	.0	0.
	Ξ	163,692.	.0	0	6,547.	7,800.	178,039.	0.
4 FLOYD DESCHAMP	(0)	0.	•0	.0	.0	.0	0.	.0
	Ξ	153,549.	0.	0.	6 142.	7 800	167,491.	0.
5 JEFFREY P. HARRIS	(i)		·0	·0	0	.0	.0	0,
	Ξ							
6	(1)							
	Ξ							
7	(ii)							
	Ξ							
ω	Ξ							
	Ξ							
0								
	Ξ							
10	<u>(i)</u>							
	Ξ							
11	Ξ							
	Ξ							
12	(ii)							
	()							
13	€							
	Ξ							
14	(ii)							
	Ξ							
15	(
	Ξ							
16	l (iii)							
				0			Schedu	Schedule J (Farm 990) 2011

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SCHEDULE O	Supplemental Information to Form 990 or 990)-EZ
(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.	ZUII Open to Public
Department of the Treasury Internal Revenue Service	Attach to Form 990 or 990-EZ.	Inspection
Name of the organization	THE ALLIANCE TO SAVE ENERGY	Employer identification number 52-1082991
FORM 990, PART I,	LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
OF ENERGY USE.		
		· · · · · · · · · · · · · · · · · · ·
FORM 990, PART III	, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
THE ALLIANCE TO SA	VE ENERGY STRIVES TO BE THE WORLD'S PREMIER	
ORGANIZATION PROMO	TING ENERGY EFFICIENCY TO ACHIEVE A HEALTHIER	
ECONOMY, A CLEANER	ENVIRONMENT, AND GREATER ENERGY SECURITY. TO ACHIEVE	
THIS GOAL, THE ALL	IANCE TO SAVE ENERGY:	
FORM 990, PART VI,	SECTION B, LINE 11: WHEN THE DRAFT IS RECEIVED FROM THE	
PREPARER, IT IS RE	VIEWED FIRST BY THE DIRECTOR OF FINANCE AND THE CHIEF	
FINANCIAL OFFICER	FOR ACCURACY. THEN THE DRAFT IS CIRCULATED TO THE	
EXECUTIVE MANAGEME	NT TEAM COMPOSED OF THE PRESIDENT AND TWO EXECUTIVE	
VICE-PRESIDENTS,	ONCE REVIEWED AND APPROVED, THE DOCUMENT IS SIGNED BY THE	· · · · · · · · · · · · · · · · · · ·
CFO FOR FILING AND	A COPY IS SENT TO ALL MEMBERS OF THE AUDIT AND FINANCE	
COMMITTEE OF THE B	OARD OF DIRECTORS; OTHER BOARD MEMBERS ARE MADE AWARE OF	
THE AVAILABILITY O	F THE RETURN SHOULD THEY DESIRE A COPY.	
FORM 990, PART VI,	SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT IS	
DETERMINED BY THE	EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS AND	
RATIFIED BY THE BO	ARD. A COMPENSATION REVIEW IS COMPILED OF SIMILAR	
ORGANIZATIONS AND	IS USED TO GUIDE COMPENSATION DISCUSSIONS. ALSO	
CONSIDERED ARE PER	FORMANCE GOALS AND ADHERENCE TO THE MISSION OF THE	
ORGANIZATION, THE	COMPENSATION OF OTHER TOP MANAGEMENT OFFICIALS IS	
DETERMINED THROUGH	A SIMILAR PROCESS INCLUDING A FORMAL PERFORMANCE REVIEW	
	ECTOR OF ADMINISTRATION (HUMAN RESOURCES) WITH DECISIONS eduction Act Notice, see the Instructions for Form 990 or 990-EZ. Sche	edule O (Form 990 or 990-EZ) (2011

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Schedule O (Form 990 or 990 EZ) (2011)	Page 2
Name of the organization	Employer identification number
THE ALLIANCE TO SAVE ENERGY	52-1082991
MADE BY THE EXECUTIVE MANAGEMENT TEAM. THESE PROCESSES OCCURS ANNUALLY.	2010-2011-2011-2011-2011-2011-2011-2011
	·····
FORM 990, PART VI. LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MS, MN, NC, ND, NJ, NH, NM, NY	
AK, AL, AK, AZ, CA, CY, FL, GK, HL, YL, KG, KY, KK, YL, KL, KL, KG, KK, KC, KL, KO, KH, KK, KY	
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV	
	·····
FORM 990, PART VI, SECTION C, LINE 19: ALL DOCUMENTS ARE MADE AVAILABLE	
UPON REQUEST.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS: -2,349.	
FORM 990 PART XII, LINE 2C	
THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND	
SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL	
STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.	
FORM 990, PART III, LINE 1	
MISSION STATEMENT CONTINUATION	
LEADS WORLDWIDE ENERGY-EFFICIENCY INITIATIVES IN RESEARCH, POLICY	
ADVOCACY, EDUCATION, TECHNOLOGY DEPLOYMENT AND COMMUNICATIONS THAT	
IMPACT ALL SECTORS OF THE ECONOMY;	
PROVIDES VISION AND ACTIVISM THROUGH ITS BOARD OF DIRECTORS, WHICH	
INCLUDES LEADERS FROM BUSINESS, GOVERNMENT, THE PUBLIC INTEREST SECTOR	
AND ACADEMIA;	

Schedule O (Form 990 or	990-EZ) (2011)		Page 2
Name of the organization	THE ALLIANCE	TO SAVE ENERGY	Employer identification number 52~1082991
			52*1062371
INITIATES AND PARTI	CIPATES IN PUBL	IC-PRIVATE PARTNERSHIPS,	
COLLABORATIVE EFFOR	TS AND STRATEGI	C ALLIANCES TO OPTIMIZE RESOURCES	AND
EXPAND ITS SPHERE O	F INFLUENCE; AN)	
EXECUTES ITS MISSIO	<u>n through a tea</u>	M OF RECOGNIZED ENERGY EFFICIENCY	
EXPERTS AND PROFESS	IONALS.		
	· ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
FORM 990, PART VII			
AVERAGE HOURS PER W	EEK DEVOTED TO	RELATED ORGANIZATIONS	
	ASE		
		SEEA	
KATERI CALLAHAN	37.5	3	
BRIAN CASTELLI	37,5	3	
	·····		

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	 Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Attach to Form 990. 	anizations and Unrelated Partnerships ion answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36 o Form 990. ► See separate instructions.	artnerships ine 33, 34, 35, 36 uctions.	, or 37.	0	OMB No. 1545-0047 2011 Open to Public Inspection
Name of the organization THE ALLIANCE TO SAVE ENERGY	VE ENERGY				Employer identification number 52-1082991	ication number
Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	plete if the organization answered "Yee	s" to Form 990, Part IV, line 3:	3.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	or Total income	(e) (e) End-of-year assets		(f) Direct controlling entity
Part II identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	nizations (Complete if the organization	answered "Yes" to Form 990), Part IV, line 34 b	ecause it had one	or more related tax-exe	mpt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b(13) controlled entity? Yes No
SOUTHEAST ENERGY EFFICIENCY ALLIANCE - 20-4949501, 1850 M STREET, NW, STE 600, WASHINGTON DC 20036	COALITION OF GOVERNMENT, BUSINESS, AND CONSUMER LEADERS ENGAGED IN	GEORGIA	501(C)(3)	LINE 11A, I	THE ALLIANCE TO SAVE ENERGY	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	tions for Form 990.				Schedule R	Schedule R (Form 990) 2011

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SEE PART VII FOR CONTINUATIONS

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Part III Identification of Related Organizations Taxable as a Partnership organizations treated as a partnership during the tax year.)	ganizations Taxable as a P. rtnership during the tax year	s a Partne ; year.)		(Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related (Sred Yes to Form	990, Part IV, line	34 because it	had one or more	e related	1
(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicite (state or foreign country)	(a) Direct controlling F entity ex	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(t) Share of total income	(g) Share of end-of-year assets	Disproportion- ate allocations?	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or P managing partner? Yes No	(J) (K) General or Percentage managing ownership Partner? Yes No
				-				ן 		
Identification of Related Organizations Laxable as a Corporation or ganizations treated as a corporation or trust during the tax year.)	ganizations laxable as rporation or trust during	s a Corpo 3 the tax)	ration or Irust (comp /ear.)	or irust (complete ii the organization answered ires to ronn 330, rat iv, nire 34 because ni tiau one of more related		10 FULLI 330, FA		ecanoc Ir rian Ol		
(a) Name, address, and EIN of related organization	Ξc		(b) Primary activity	(C) Legal domicite (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) total Share of end-of-year assets		(h) Percentage ownership
				44				Schedule	R (Form	Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011 THE ALLIANCE TO SAVE ENERGY			521082991		Page 3
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)	iswered "Yes" to Form	990, Part IV, line 34, 35, 3	5a, or 36.)		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ins with one or more re	lated organizations listed	in Parts II-IV?	Yes	°N No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a ×	X
b Gift, grant, or capital contribution to related organization(s)				1b	×
c Gift, grant, or capital contribution from related organization(s)				. 1c ×	X
d Loans or loan guarantees to or for related organization(s)				1d X	х
e Loans or loan guarantees by related organization(s)				. 1e	×
f Sale of assets to related organization(s)				1f	×
g Purchase of assets from related organization(s)				2 2 X	×
Exchange of assets with related organization(s)				1	×
i Lease of facilities, equipment, or other assets to related organization(s)				. 1 i	×
j Lease of facilities, equipment, or other assets from related organization(s)				1j X	×
k Performance of services or membership or fundraising solicitations for related org	lated organization(s)				X
 Performance of services or membership or fundraising solicitations by related orgen 	lated organization(s)			-	X
${f m}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ttion(s)			+	
n Sharing of paid employees with related organization(s)					
o Reimbursement paid to related organization(s) for expenses				10	X
				to x	-
d Other transfer of cash or property to related organization(s)				19	×
Other transfer of cash or property from related organization(s)					×
s for inform	who must complete th	is line, including covered r	ation on who must complete this line, including covered relationships and transaction thresholds.		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved		
(1) SOUTHEAST ENERGY EFFICIENCY ALLIANCE	۵.	625,292.0	0/T		
(2)					
(3)					
(4)					
(5)					
(b) 132163 01-23-12	45		Schedu	Schedule R (Form 990) 2011	15

Schedule R (Form 990) 2011 THE ALLIANCE TO SAVE ENERGY Part VI Unrelated Organizations Taxable as a Partnership (Complete if th	LANCE TO SAVE ENERGY able as a Partnership (Cou	mplete if the organ	e organization answered "Yes" to Form 990, Part IV, line 37.)	s" to Form	990, Part IV, line (7.)		52~1082991	e	Page 4
Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	entity taxed as a partners structions regarding exclu	hip through which t ision for certain inv	the organization conduestion condu	ucted mor	e than five percen	: of its activities (m	leasured t	oy total assets or	dross n	(anue)
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Predominant income Predominant income (ercluded from tax under section 512-514)	(e) Are all 501(c)(3) 0105.?	(f) Share of total income	(g) Share of end-of-year assets	Dispropor- tionate allocations?	(h) (i) (i) Dispropor- Dispropor- Dispropor- allocations? of Schedule K-1 E Ves. No. (Form 1065) V	(j) General or managing partner? Yes NO	(j) (k) General or Percentage managing ownership Partner?
				2						
									· · ·	
								Schedule	. R (Forn	Schedule R (Form 990) 2011

Schedule R (Form 990) 2011 THE ALLIANCE TO SAVE ENERGY	52-1082991	Page 5
Part VII Supplemental Information		
Complete this part to provide additional information for responses to questions on Schedule R (see instru-	ctions).	
PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:		
		· · · · ·
NAME OF RELATED ORGANIZATION:		
SOUTHEAST ENERGY EFFICIENCY ALLIANCE		
PRIMARY ACTIVITY: COALITION OF GOVERNMENT, BUSINESS, AND CONSUMER LEADERS		
ENGAGED IN PROMOTING		······································
	· · · · · · · · · · · · · · · · · · ·	

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► X

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File a separate application for each return.

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,

	second data	anylafile	and alials an	- file for	Charitina	& Nonprofit
VISH.	www.n	ooviewe.	яна свек он	e-me nx	Unannes	$\sim \alpha

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
print	THE ALLIANCE TO SAVE ENERGY	X 52-1082991
File by the due date for filing your return, See	Number, street, and room or suite no. If a P.O. box, see instructions. 1850 M STREET, NO. 600	Social security number (SSN)
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036	

Enter the Return code for the return that this application is for (file a separate application for each return)

pplication Return Application			Return		
Is For	Code	de Is For			Code
Form 990	01	Form 990-T (corporation)			07
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	01	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
JOHN MAMONE • The books are in the care of ▶ <u>1850 M. STREET</u> , Telephone No.▶ <u>(202) 530-4357</u> • If the organization does not have an office or place of business • If this is for a Group Return, enter the organization's four digit (box ▶, If it is for part of the group, check this box ▶ 1 I request an automatic 3-month (6 months for a corporation <u>AUGUST 15, 2012</u> , to file the exemption is for the organization's return for: ▶ X calendar year <u>2011</u> or ▶ tax year beginning	s in the Ur Group Exe <u>and atta</u> required t organiza	FAX No. ►	s is for memb	the whole group, ers the extension i	
 If the tax year entered in line 1 is for less than 12 months, c Change in accounting period 			l retur	n	
3a If this application is for Form 990 BL, 990 PF, 990 T, 4720, nonrefundable credits. See instructions.	or 6069, 6	enter the tentative tax, less any	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	onter an	refundable credits and	્ગ્ય	Ψ	
estimated tax payments made. Include any prior year over			Зb	\$	Ο.
			30	φ	<u> </u>
			0-	\$	0.
by using EFTPS (Electronic Federal Tax Payment System).			3c		
Caution. If you are going to make an electronic fund withdrawal			00/9-		
LHA For Privacy Act and Paperwork Reduction Act Notice,	, see Insti	uctions.		⊢orm 8868 (Rev. 1.2012)

Form 886	8 (Rev. 1-2012)					
• If you a	re filing for an Additional (Not Automatic) 3-Mont	th Extension, c	omplete only Part II and check th	is box		
	y complete Part II if you have already been granted					
If you a	re filing for an Automatic 3-Month Extension, cor					
Part II	Additional (Not Automatic) 3-Mont	th Extensior	<mark>n of Time.</mark> Only file the origi	nal (no co	pies needed).	
			Enter filer'	s identifyin	number, see ins	tr
Type or	Name of exempt organization or other filer, see in	nstructions		Employer	identification numb	be
print						
File by the	THE ALLIANCE TO SAVE ENERGY				52-1082991	
due date for filing your	Number, street, and room or suite no. If a P.O. b	ox, see instruct	tions.	Social sec	urity number (SSN	I)
return. See	1850 M STREET, NO. 600					
instructions.	City, town or post office, state, and ZIP code. Fo	or a foreign add	ress, see instructions.			
<u></u>	WASHINGTON, DC 20035		·			
Enter the	Return code for the return that this application is for	or (file a separa	te application for each return)			
						- T
Applicati	วท	Return	Application			
Is For		Code	Is For	12、19.1 × 1.2 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 × 1.4 ×		
Form 990	······································	01			Stational Constraint	100
Form 990	***	02	Form 1041-A			4
Form 990		01	Form 4720			_
Form 990		04	Form 5227	······		4
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			4
····	T (trust other than above)	06	Form 8870			
STOP! DO	o not complete Part II if you were not already gra	anted an auton	natic 3-month extension on a pre	viously file	d Form 8868.	
	JOHN MAMONE					
	ooks are in the care of 🕨 <u>1850 M. STREET, SU</u>	JITE 600 - W				
	one No. 🕨 (202) 530-4357		FAX No. 🕨			
	rganization does not have an office or place of bus					
	s for a Group Return, enter the organization's four					
box 🕨 [If it is for part of the group, check this box 🕨			of all memb	ers the extension is	<u>s t</u>
	quest an additional 3-month extension of time until		<u>15, 2012</u> .			
	calendar year 2011, or other tax year beginnin		, and end	m -		
6 lfth	le tax year entered in line 5 is for less than 12 mon	ths, check reas	ion:	I Final r	eturn	
	_ Change in accounting period					
	te in detail why you need the extension					
ADI	NITIONAL TIME IS REQUIRED TO FILE AN A	CCURATE AND	COMPLETE RETURN,			·
		<u> </u>				
	is application is for Form 990-BL, 990-PF, 990-T, 4	1720, or 6069, e	enter the tentative tax, less any			
	irefundable credits. See instructions.			<u>8a</u>	\$	
	his application is for Form 990-PF, 990-T, 4720, or 6	•				
	payments made. Include any prior year overpayme	ent allowed as a	a credit and any amount paid			
	eviously with Form 8868.			<u>d8</u>	\$	
c Bal	ance due, Subtract line 8b from line 8a, Include yo <u>PS (Electronic Federal Tax Payment System). See</u>		th this form, if required, by using			
				80	\$	

Form 8868 (Rev. 1-2012)

ISPECTION 2 cation number 2991 -0666 9,715,32 Yes No No Nestructions)
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	90 (2012) Page 2
Part	
-	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	The Alliance to Save Energy ("ASE") promotes energy efficiency worldwide to achieve a healthier economy, a cleaner environment
	and greater energy security. To achieve this goal, the Alliance to Save Energy leads worldwide energy efficiency initiatives in research.
	research.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$5,341,676 including grants of \$) (Revenue \$)
70	Demonstration programs - develop and implement programs of a technical assistance or facilitation nature to bring about
	cost efficient energy conservation.
4b	(Code:) (Expanses \$ and and including grants of \$) (Revenue \$
40	(Code:) (Expenses \$ 2,019,309 including grants of \$) (Revenue \$) Policy programs - develop Alliance policy positions in the energy efficiency area. Also, design and implement related research
	availanta
4.	
4c	(Code:) (Expenses \$ 1,268,540 including grants of \$) (Revenue \$)
	Communications program - produce and disseminate publications containing findings on policy and demonstration programs.
-	
4d	Other program services (Describe in Schedule O.)
4-	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 8,629,525

Form 990 (2			ALLIANCE	SAVE	ENERGY
Part IV	Checklist	of Require	d Schedules	 _	

		_	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	12
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	1.1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	x	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, 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 III	8		x
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? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
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	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 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 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 separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X	x
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	x	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? 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 assistance to individuals located outside the United States? 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	Ĩ	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		x
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		X
D	in rest to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		-

Part IV	Checklist o	of Require	d Schedules (contin	ued)	
Form 990			ALLIANCE			ENERGY

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			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	x	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		x
b		24b	1 E.e.	
c	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	11.	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) 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	ί.	x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b		X
-	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29 30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part 1	31	116	x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	1	X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	x	
-		-	000	

Form 990 (2012)

_	990 (2012) THE ALLIANCE TO SAVE ENERGY		52-1082	991	P	age 5
Ра	rt V Statements Regarding Other IRS Filings and Tax Compliance					_
_	Check if Schedule O contains a response to any question in this Part V					
		1		1	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	31			1.00
b			0			
c						
	(gambling) winnings to prize winners?			1c	X	-
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		0.54			
	filed for the calendar year ending with or within the year covered by this return		251			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	_
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	-	X
				3b	-	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other			1.5		
2.	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a	X	_
b	If "Yes," enter the name of the foreign country: SOUTH AFRICA					
53	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial					
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 transa	action	·	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	1	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to			2.1	1	
	any contributions that were not tax deductible as charitable contributions?			6a	1	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					
6	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 se			7a	X	-
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			12.4	1.1	1.0
	to file Form 8282?	······		7c	5. I.I.	X
d	If "Yes," indicate the number of Forms 8282 filed during the year			1000	1	1
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
h	Sector for the sector of sector and an planted, of sector for hereo, and allo organiz	ation f	ile a Form 1098-C?	7h	10.1	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					1
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ne during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					-
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	1	-
0	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			614	
1	Section 501(c)(12) organizations. Enter:	1				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1.75				
	amounts due or received from them.)	11b			100	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
3	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	1	
	Note. See the instructions for additional information the organization must report on Schedule O.			-		
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				1
	Enter the amount of reserves on hand	13c	1	-	1	
	Did the organization reaction and provide the independence in a section of the terms of			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	le O		14b	1	

Form	1990 (2012) THE ALLIANCE TO SAVE ENERGY 52-10	82991	P	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	ra "No" i	respor	ise
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management		100	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	33		1
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			8
b	Enter the number of voting members included in 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 with any other			-
	officer, director, trustee, or key employee?	2	-	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	1 1.1	11	
1.1	of officers, directors, or trustees, or key employees to a management company or other person?		-	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		12.1	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		-	X
6	Did the organization have members or stockholders?			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		1.0	
	more members of the governing body?	7a	-	X
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	-		v
~	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b	-	X
8			x	
a		8a	X	-
b	,	8b	•	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	12.1	x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		-	A
000	ton b. Tonoles (mis section a requests information about poincies not required by the internal Revenue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	165	X
h	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form		X	-
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	114		-
12a	그는 것 같은 것 같	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X	1.00
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		1.5	1
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	A 1
15	Did the process for determining compensation of the following persons include a review and approval by independent		1	1
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization		X	1.1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
-	exempt status with respect to such arrangements?	16b	-	
	tion C. Disclosure			77.00
17	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, FL,			, KS
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s or	ly) availal	ble	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Violation request Other (explain in Schedule O)	Sale -		
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy	, and fina	ncial	
20	statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organ	inotions b	11	
20	orate the name, physical address, and telephone number of the person who possesses the books and records of the organ	Inzation:	-	

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1850	М	STREET,	STE	600,	WASHINGTON,	D

EET, STE 600, WASHINGTON, DC 20036 SEE SCHEDULE O FOR FULL LIST OF STATES

THE	ALLIANCE	TO	SAVE	ENERGY
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) FRANCES BEINECKE MEMBER	1.00	x						0.	0.	0.
(2) GEORGE BILTZ MEMBER	1.00	x			Ĩ.	Ĩ.		0.	0.	0.
(3) STEPHEN BROBECK MEMBER	1.00	x						0.	0.	0.
(4) HELEN BURT MEMBER	1.00	x						0.	0.	0.
(5) IAIN CAMPBELL MEMBER	1.00	x	1					0.	0.	0.
(6) JORGE CARRASCO MEMBER	1.00	x				Ĩ		0.	0.	0.
(7) KEMEL DAWKINS MEMBER	1.00	x				1		0.	0.	0.
(8) JEFF DREES MEMBER	1.00	x				Ĩ		0.	0.	0.
(9) THOMAS K. DREESSEN MEMBER	1.00	x	T					0.	0.	0.
(10) ROGER DUNCAN MEMBER	1.00	x						0.	0.	0.
(11) ANTHONY EGGERT MEMBER	1.00	x			1			0.	0.	0.
(12) HONORABLE ROBERT FOSTER MEMBER	1.00	x	Ĩ.					0.	0.	0.
(13) JOHN C. FOX MEMBER	1.00	x						0.	0.	0.
(14) CAROLYN GREEN MEMBER	1.00	x	Ĩ					0.	0.	0.
(15) THOMAS P. GRUMBLY MEMBER	1.00	x	N		Ě		12.0	0.	0.	0.
(16) THOMAS R. KUHN MEMBER	1.00	x						Ο.	0.	0.
(17) TERRY MCCALLISTER MEMBER	1.00	x						0.	0.	0.

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Part VII Section A. Officers, Directo (A) Name and title	(B) Average hours per week	(do box offi	not c	Posi heck r	c)	n one oth an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) stima mour othe	ated nt of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee Highest compensated	empioyae Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or	from ganiz nd rel	ation
(18) DAVE MCCURDY MEMBER	1.00	x				111	0.	0.			0
(19) J. MICEAL MCQUADE	1.00	-		-			0.	0.	-		0
MEMBER		x		-			0.	0.			0
(20) WILLIAM A. NITZE	1.00										1.1
MEMBER	1 00	X	-				0.	0.			0
(21) EARLE H. O'DONNELL MEMBER	1.00	x					0	0			•
(22) KEVIN RIES	1.00	•	-		-	-	0.	0.	-		0
MEMBER	1.00	x					0.	0.			0
(23) JAMES E. ROGERS	1.00					-		0.			U
MEMBER		X					0.	0.	_		0
(24) PETER SMITH	1.00			11.1	1.1.1.1		1		-		100
MEMBER		X				1	0.	0.			0
(25) FRED STEPHAN MEMBER	1.00										
(26) SUSAN STORY	1.00	X	-	_	-	-	0.	0.	1		0
MEMBER	1.00	x					0.	0.			0
1b Sub-total		-	-		•	-	0.	0.			0
c Total from continuation sheets to	Part VII, Section A						1,534,979.	0.		12,	504
d Total (add lines 1b and 1c)						1.1	1,534,979.	0.	14	12,	504
2 Total number of individuals (including		lose	liste	ed ab	oove)	vho re	eceived more than \$100	000 of reportable			
compensation from the organization		_	-	-	-	_				IVe	1
3 Did the organization list any former	officer director or th	ietor	a ko	Vor	nlove	o ork	alabast componented or		-	Yes	s No
line 1a? If "Yes," complete Schedule					S 10.0		lignest compensated er		3	1.1	X
4 For any individual listed on line 1a, i			omp	ensa	tion a	nd oth	er compensation from t	he organization	-	1	
and related organizations greater th									4	X	
5 Did any person listed on line 1a rece	eive or accrue comper	nsat	ion f	rom	any u	relate				-	
rendered to the organization? If "Ye	s," complete Schedul	eJf	or su	Jch p	persor				5		X
Section B. Independent Contractors 1 Complete this table for your five hid			and a								
 Complete this table for your five hig the organization. Report compensation 									sation	from	
	(A)	cart	Gridi	ig w	iur or	I	(B)	cai.	(C)	-
Name and b	usiness address	_			_		Description of se	ervices	Comp	ensat	ion
WILLIAM D. FAY									4	5	
6738 MELROSE DRIVE, M	ICLEAN, VA	423	101	L.	_	-	CONSULTING		18	5,	550
						-				-	
2 Total number of independent contra		ot li	mite	d to		listed	above) who received m	ore than			
\$100,000 of according to 11											
\$100,000 of compensation from the SEE PART VII, SEC		אדין	1117	TT T	1 ON	GUT	PTTT		-	000	(201

Part VII Section A. Officers, Directors, Tru	stees, Key Er	mple	oyee	s, a	nd H	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours			(C Pos	C) ition			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) SUSAN STRATTON	1.00									
MEMBER		X		-		-		0.	0.	0.
(28) DAVE SZCZUPAK	1.00			Tei-				1		1. 2
MEMBER		X		1				0.	0.	0.
(29) SUSAN TIERNEY	1.00	1								1
MEMBER	1 00	X	_					0.	0.	0.
(30) WILLIAM VON HOENE	1.00									
MEMBER	1 00	X	-	<		-		0.	0.	0.
(31) ERWIN FURUKAWA MEMBER	1.00	x						0	0	0
(32) KATERI ANNE CALLAHAN	37.50	A	-		-	-		0.	0.	0.
PRESIDENT	3.00	x		x				257,243.	0.	23,994
(33) DANIEL HOOKS	37.50	A	-	4	1			231,243.	0.	43,994
DIRECTOR OF FINANCE	57.50	x						ο.	ο.	0.
(34) TOM KING	1.00								0.	0.
CO-CHAIR	1.00	x			1.1			0.	0.	0.
(35) ROBERT J. DIXON	1.00		2							<u> </u>
FIRST VICE-CHAIR		x		x				0.	0.	0.
(36) FRANCIS J. MURRAY	1.00									
SECRETARY		x		x				0.	ο.	0.
(37) ROBERT PRATT	1.00			1.0						-
TREASURER		x		х				0.	0.	0.
(38) GAIL HENDRICKSON	37.50							15.000.000		
EXECUTIVE VICE PRESIDENT				х	2	1		186,375.	0.	14,739
(39) BRIAN T. CASTELLI	37.50							5.5		
EXECUTIVE VICE PRESIDENT	3.00			х				185,026.	0.	20,375
(40) KIRK W. MCLAREN (UNTIL 5.8.12)	37.50		1			1.0		1000		
CFO				х				93,775.	0.	0
(41) RON STUBBLEFIELD (UNTIL 3.25.13	37.50		1							
CFO	28 50			X				93,424.	0.	5,606
(42) FLOYD DESCHAMP	37.50			11				100 000		0 500
VICE PRESIDENT	27 50			1		X		168,000.	0.	2,520
(43) JEFFREY P. HARRIS	37.50					77		150 550		10 075
SR VP FOR PROGRAMS	27 50	-	-	-	-	X		152,558.	0.	19,075
(44) MERRILEE S. HARRIGAN VICE PRESIDENT	37.50					x		141,820.	0.	17 021
(45) MAUREEN GUTTMAN	37.50	-	-	-	-	-		141,020.	0.	17,031
DIRECTOR	57.50					x		131,779.	0.	18 286
(46) MONIQUE C. O'GRADY	37.50	-	-	-	-	1		131,119.	0.	18,286
VICE PRESIDENT	57.50					x		124,979.	0.	20,878
		-	-		-		-			
								the second se		

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Part VIII Statement of Revenue

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a	Federated campaigns		1a				-	
b	Membership dues .		1b					
C	Fundraising events .		1c					
d	Related organizations		1d					
e f	Government grants (cont All other contributions, gif		1e					
3	and similar amounts not incl	uded above	1f	0 715 201				
g	Noncash contributions include			9,715,391				
-	Total. Add lines 1a-1f				9,715,391			
				Business Code	0,110,001			-
2a				1				
b								
C								
d								
e				C 1				
f	All other program serv							
9 3	Total. Add lines 2a-2f Investment income (i	ncluding	divide	>				
-	and other similar amou	ints) .		>				
4	Income from investment			-			-	
5	Royalties							
1.57		(i) Real		(ii) Personal				-
6a	Gross rents							
b	Less: rental expenses	1						
C	Rental income or (loss)		_					10
d 7a	Net rental income or (le Gross amount from sales of	OSS) . (i) Securiti						
14	assets other than inventory	() Occurr		(ii) Other				
b	Less: cost or other basis and sales expenses .			1				6
c	Gain or (loss)							
d	Net gain or (loss) .	• • •	· · .	🕨				-
8a	Gross income from fur events (not including \$ of contributions reported	d on line 10						
	See Part IV, line 18 .							
	Less: direct expenses Net income or (loss) fro			events . ►				
	Gross income from gar See Part IV, line 19	ning activi	ties.				7	1
b	Less: direct expenses		. b			1.1.1		
c	Net income or (loss) fro			vities ►				
	Gross sales of inv returns and allowances	3	. a					
	Less: cost of goods so							h
C	Net income or (loss) fro Miscellaneous Re		of inve	Business Code				
11a			-	Busilless Code				
b								
c								
d	All other revenue .			<u> </u>	1			
е	Total. Add lines 11a-1	1d						
12	Total revenue. See ins	structions.		🕨 🗍	9,715,391			

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Coone	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons				· · · · · D
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9L	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21			general expenses	experies
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	1,079,554	552,300	388,291	138,963
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	1,075,554	552,500	300,231	130,303
7 8	Other salaries and wages	4,226,189	3,690,641	526,196	9,352
	section 401(k) and 403(b) employer contributions)	222,496	113,829	108,667	
9	Other employee benefits	1,550,438	803,878	746,560	
10	Payroll taxes	529,611	270,949	258,662	
11 a	Fees for services (non-employees): Management				
b		0.1273	0000		
c		2,495	2,154	341	
d	Professional fundraising services. See Part IV, line 17	64,030	64,030		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,561,783	1,425,139	48,742	87,902
12	Advertising and promotion	34,062	28,420	5,517	125
13	Office expenses	273,217	192,547	80,670	120
14	Information technology	294,041	157,464	134,848	1,729
15	Royalties	I			
16	Occupancy	993,385	508,307	485,078	
17	Travel	508,356	447,862	32,757	27,737
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	254,861	254,861		
20	Interest	29,541	15,113	14,428	
21 22	Payments to affiliates				
22	Depreciation, depletion, and amortization	96,288	49,261	47,027	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	10,560	5,402	5,158	
а	Allocated Expenses	4.440	0.070	0.100	
b	Printing and Publications	4,440 56,222	2,272	2,168	8,792
c d		50,222	45,095	2,335	8,192
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	11,791,569	8,629,525	2,887,444	274,600
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► _ if following SOP 98-2 (ASC 958-720)		0,020,020	2,007,111	217,000

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THE ALLIANCE TO SAVE ENERGY

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Part X | Balance Sheet

Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year 404,632. 624,553. 1 Cash - non-interest-bearing 1 553,298. 553,298. 2 2 Savings and temporary cash investments 4,093,137. 1,834,710. Pledges and grants receivable, net 3 3 Accounts receivable, net 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 Assets Notes and loans receivable, net 7 7 8 8 Inventories for sale or use 173,688. 194,570. Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment: cost or other 1,845,202. basis. Complete Part VI of Schedule D _____ 10a b Less: accumulated depreciation 10b 1,355,973. 484,537. 489,229. 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 479,121. 160,575. 3,856,935. Other assets. See Part IV, line 11 15 15 6,188,413. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 1,462,764. 1,645,794. Accounts payable and accrued expenses 17 17 18 Grants payable 18 1,272,585. 182,818. 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 .iabilities Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disgualified persons. Complete Part II of Schedule L 22 474,696. 1,460,000. Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 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 669,021. 701,214. 25 Schedule D 4,062,096. 3,806,796. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here Kan and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,126,317. 50,139. Unrestricted net assets 27 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 2,126,317. 50,139. 33 33 Total net assets or fund balances 3,856,935. 6,188,413. Total liabilities and net assets/fund balances 34 34

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				Part
			1.1.1.	
5,39			1	1
1,569	11		2	2
6,17	-2		3	3
6,31	2		4	4
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(Forn Departm Internal I	ent of the Revenue S	r 990-EZ) Treasury Service	Compl	blic Charity S ete if the organization is 4947(a)(1) n Attach to Form 990 or Fo	a section	501(c)(3) charitable	organiza e trust.	tion or a s	ection		OMB No. 20 Open to Inspe	12 Publication) ic
Name	of the	organizatio		LIANCE TO SAV	E ENE	RGY			E		identificati 2-1082		
Part		Reason f		rity Status (All organiz			e this part	t.) See inst	tructions.				
1 2 2 3 4 1		church, con school desc hospital or a medical res y, and state	vention of church ribed in section 1 a cooperative hosp earch organization	h because it is: (For lines es, or association of chur (70(b)(1)(A)(ii). (Attach So pital service organization operated in conjunction	ches desc hedule E.) described with a hos	ribed in se in section pital descr	ction 170 170(b)(1) ibed in se	(b)(1)(A)(i) (A)(iii). ction 170	(b)(1)(A)(-		's nam	ne,
5 L			on operated for the b)(1)(A)(iv). (Comp	e benefit of a college or u	niversity ov	wned or op	perated by	a governi	mental ur	it describ	ed in		
6 [_			ment or governmental uni	t described	d in sectio	n 170(b)(*	1)(A)(v).					
7 [X An	organizatio	and the second	ceives a substantial part					or from th	e general	public desc	ribed i	'n
8	A	community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
10	inc Se	come and u e section 5	nrelated business 509(a)(2), (Comple	unctions - subject to certa taxable income (less sec te Part III.) operated exclusively to te	tion 511 ta	x) from bu	sinesses a	acquired b	y the org				
11 L	mo de a [] By fou	ore publicly escribes the Type I checking t undation ma	supported organiz type of supporting b his box, I certify th anagers and other	hat the organization is not than one or more publicl	on 509(a)(lete lines 1 ype III - Fu controllec y supporte	1) or section 1e through Inctionally in I directly of ad organization	on 509(a)(2 n 11h. integrated r indirectly ations des	2). See see c / by one o cribed in s	tion 509	(a)(3). Che pe III - Nor squalified	eck the box n-functional persons oth	that ly integ ner tha	grated
f			ganization, check	ritten determination from this box	the IRS that	atitisa iy	pe I, Type	ii, or type	e III				
g				organization accepted a	ny gift or c	ontribution	from any	of the foll	owing pe	rsons?			
	(i)			directly controls, either a								Yes	No
		the gove	rning body of the	supported organization?							11g(i)		
				on described in (i) above?									-
h				a person described in (i) n about the supported or							[11g(iii)		-
(i) N	ame of s organiza	supported ation	(ii) EIN	(described on lines 1-9 in col. (i) listed in your or		organizat	u notify the tion in col. r support?	organizat	is the ion in col. ized in the S.?	(vii) Amoun sup	t of mo port	netary	
				(see instructions))	Yes	No	Yes	No	Yes	No			
2										1.0		-	-
						1			1	-			

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 THE ALLIANCE TO SAVE ENERGY Part II | Support Schedule for Organizations Described in Sections 170

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t 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.)

Section A. Public Support					· · · · · · · · · · · · · · · · · · ·	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not	0563050	10111252	12664500	119/0116	20231139.	66420157
 include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 	9303939.	12111355.	12004590.	11049110.	20231139.	00420157.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9563959.	12111353.	12664590.	11849116.	20231139.	66420157.
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,		1	S			2001150
column (f)					-	2991158. 63428999.
6 Public support. Subtract line 5 from line 4. Section B. Total Support	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -					03420999.
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	9563959.	12111353.	12664590.	11849116.	20231139.	66420157.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties						
 and income from similar sources 9 Net income from unrelated business activities, whether or not the 	19,529.	1,270.	4,665.	4,481.	854.	30,799.
 business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 	9,808.	8,821.	6,779.	43,910.	135.	
11 Total support. Add lines 7 through 10			1		141	66520409.
12 Gross receipts from related activities	a second s				12	481,388.
13 First five years. If the Form 990 is for						
organization, check this box and sto Section C. Computation of Pub	lic Support Pe	ercentage				
14 Public support percentage for 2012					14	95.35 %
15 Public support percentage from 201					15	83.77 %
16a 33 1/3% support test - 2012. If the						
stop here. The organization qualifies b 33 1/3% support test - 2011. If the and stop here. The organization qua	as a publicly support	ported organization ot check a box on	n line 13 or 16a, and	d line 15 is 33 1/39	% or more, check t	his box
17a 10% -facts-and-circumstances tes and if the organization meets the "fac meets the "facts-and-circumstances"	st - 2012. If the org cts-and-circumstar	ganization did not nces" test, check l	check a box on lin his box and <mark>stop</mark>	ne 13, 16a, or 16b, here. Explain in Pa	and line 14 is 10% art IV how the orga	or more,
b 10% -facts-and-circumstances tes more, and if the organization meets t organization meets the "facts-and-cir	st - 2011. If the org	ganization did not umstances" test, c	check a box on lin heck this box and	ne 13, 16a, 16b, or I stop here. Explai	17a, and line 15 is n in Part IV how th	e 10% or
18 Private foundation. If the organization						

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990 EZ) 2012 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

Calendar year (or fiscal year beginning in)	1-10000	(1) 0000	4.10040	1.11.0014	1.10010	107.1.1
지수는 것이 집에 있는 것이 가지 않는 것이 가지 않는 것이 집에 집에 있는 것이 있는 것이 없다. 나는 것이 없는 것이 없 않 않이 않	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not include any "unusual grants.")					· · · · · ·	
				1	1	
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			, I			
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf				4		
5 The value of services or facilities				1		
furnished by a governmental unit to		· · · · · · · · · · · · · · · · · · ·	1	No		
the organization without charge			P	hin	· · · · · · · · ·	
6 Total. Add lines 1 through 5				1	1	
7a Amounts included on lines 1, 2, and		·			1	
3 received from disqualified persons					1.1	
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	•	-		T		
amount on line 13 for the year	-					
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)			Contraction of the second s			
Section B. Total Support	21.02.22	27.2.2.2	0.022555	No. 200.5	1 30.000	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						-
c Add lines 10a and 10b		· · · · · · · · · · · · · · · · · · ·	· · · · · · ·			
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				2		
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)				E-		
14 First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a secti	ion 501(c)(3) organiz	zation,
check this box and stop here						
Section C. Computation of Public	c Support Pe	ercentage				
15 Public support percentage for 2012 (lin	ne 8, column (f) c	livided by line 13,	column (f))		15	
16 Public support percentage from 2011	Schedule A, Parl	t III, line 15			16	2
Section D. Computation of Inves	tment Incom	e Percentage	1			
17 Investment income percentage for 201	2 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	
18 Investment income percentage from 2					18	A.I
19a 33 1/3% support tests - 2012. If the c					33 1/3%, and line	
more than 33 1/3%, check this box an						
b 33 1/3% support tests - 2011. If the			A STATE OF A		Contraction of the second s	A STATISTICS AND A STATISTICS
line 18 is not more than 33 1/3%, chec	· · · ·					
20 Private foundation. If the organization						Contraction of the second s

Sc	he	dul	le	B
00		uu		-

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

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Employer identification number

Name of the organization

No. 19 - 17 - 18 - 18 - 19 - 19 - 19 - 19 - 19 - 19		
	THE ALLIANCE TO SAVE ENERGY	52-1082991
Organization type(chee	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
*	4947(a)(1) nonexempt charitable trust treated as a private foundatio	n
	501(c)(3) taxable private foundation	
33 0 M	on is covered by the General Rule or a Special Rule. 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a	a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

X For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 Part I, line 2 of its Form 990-PF, to certify that it does not 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) (2012)

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

Name of organization

Employer identification number

52-1082991

THE ALLIANCE TO SAVE ENERGY

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>1,203,830</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Schedule E	3 (Form 990,	990-EZ,	or 990-PF)	(2012)
Name of or	anization			

Name of organization

Page 3

Employer identification number

52-1082991

THE ALLIANCE TO SAVE ENERGY

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<u> </u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
$-\equiv$			

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

	orm 990, 990-EZ, or 990-PF) (2012)		Page					
lame of organi	zation		Employer identification number					
HE ALL	IANCE TO SAVE ENERGY		52-1082991					
Part III	Exclusively, religious, charitable, etc., indi year. Complete columns (a) through (e) and t the total of exclusively religious, charitable, et Use duplicate copies of Part III if addition	vidual contributions to section 501(c)(he following line entry. For organization c., contributions of \$1,000 or less for the al space is peeded.	(7), (8), or (10) organizations that total more than \$1,000 for the is completing Part III, enter the year. (Enter this information once.) \$					
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I		<u></u>	_					
-		(e) Transfer of gift						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
-	(e) Transfer of gift							
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
a) No. from 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, a		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, a	nd ZIP + 4	Relationship of transferor to transferee					

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

SCHEDULE C	Pol	itical Campaign	and Lobbvi	na Activities	OMB No. 1545-0047
(Form 990 or 990-EZ)		izations Exempt From Incon	사람이 가지 않는 것 같아.	207.823.23	2012
Department of the Treasury		the organization is describe			Z. Open to Public
Internal Revenue Service	· complete i	and the state of the second state of the	ate instructions.		Inspection
 Section 501(c)(3) orga Section 501(c) (other Section 527 organization section 527 organization answ Section 501(c)(3) orga Section 501(c)(3) orga If the organization answ Section 501(c)(4), (5), Name of organization 	anizations: Complete than section 501(tions: Complete P rered "Yes," to For anizations that hav anizations that hav rered "Yes," to For or (6) organization THE ALLIA	orm 990, Part IV, line 4, or Fo ve filed Form 5768 (election u ve NOT filed Form 5768 (elect orm 990, Part IV, line 5 (Prox	Perform Part I-C. Parts I-A and C below orm 990-EZ, Part VI, I nder section 501(h)): (ion under section 501 y Tax), or Form 990-I ERGY	w. Do not complete Part I-B. line 47 (Lobbying Activities), Complete Part II-A. Do not cor (h)): Complete Part II-B. Do no EZ, Part V, line 35c (Proxy Ta Emplo	then nplete Part II-B. ot complete Part II-A. ax), then yer identification number 52-1082991
1 Provide a description	n of the organizati	ion's direct and indirect politic	al campaign activities		
3 Volunteer hours					
Part I-B Comple	te if the orga	nization is exempt und	ler section 501(c)(3).	
		curred by the organization und			
		curred by organization manag			
		1955 tax, did it file Form 4720			Yes No
4a Was a correction ma	ade?				Yes No
b If "Yes," describe in	Part IV.				
Part I-C Comple	te if the orga	nization is exempt und	ler section 501(c), except section 501(c	:)(3).
1 Enter the amount dir	rectly expended b	y the filing organization for se	ction 527 exempt fun	ction activities \$	
2 Enter the amount of	the filing organiza	ation's funds contributed to ot	her organizations for	section 527	
exempt function act	ivities			►\$	
		Add lines 1 and 2. Enter here a		L,	
		20-POL for this year?			Yes No
made payments. For contributions receive	r each organizatio ed that were prom	loyer identification number (El n listed, enter the amount pai nptly and directly delivered to ditional space is needed, prov	d from the filing organ a separate political or	nization's funds. Also enter the ganization, such as a separat rt IV.	e amount of political e segregated fund or a
(a) Name		(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter .0.
			1		
			4 Landard Street		Section Section

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

Schedule C (Form 990 or 990-EZ) 2012

 Schedule C (Form 990 or 990 EZ) 2012
 THE ALLIANCE TO SAVE ENERGY
 52

 Part II-A
 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768
 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). if the filing organization checked box A and "limited control" provisions apply. (a) Filing (b) Affiliated group Limits on Lobbying Expenditures

	(The term "expenditures" m	organization's totals	totals	
1a	Total lobbying expenditures to influence publ	ic opinion (grass roots lobbying)	64,303.	
b	Total lobbying expenditures to influence a leg			
c	Total lobbying expenditures (add lines 1a and	i 1b)	64,303.	
d	Other exempt purpose expenditures		12,704,405.	
e	Total exempt purpose expenditures (add lines	s 1c and 1d)	12,768,708.	
f	Lobbying nontaxable amount. Enter the amount		788,435.	
- 1	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of	line 1f)	197,109.	
h	Subtract line 1g from line 1a. If zero or less, e	0.		
1	Subtract line 1f from line 1c. If zero or less, er	0.		
j	If there is an amount other than zero on eithe reporting section 4911 tax for this year?	r line 1h or line 1i, did the organization file Form 4720		Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendi	tures During 4-Year /	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount	742,464.	767,629.	734,612.	788,435.	3,033,140.
b Lobbying ceiling amount (150% of line 2a, column(e))					4,549,710.
c Total lobbying expenditures	35,668.	107,805.	73,609.	64,030.	281,112.
d Grassroots nontaxable amount	185,616.	191,907.	183,653.	197,109.	758,285.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,137,428.
f Grassroots lobbying expenditures	571.	5,806.	73,609.	64,303.	144,289.

Schedule C (Form 990 or 990-EZ) 2012

A Check

B Check

1

52-1082991 Page 2

52-1082991 Page 3

Schedule C (Form 990 or 990-EZ) 2012 THE ALLIANCE TO SAVE ENERGY 52-108299 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)).

	or each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		(a))
of the	e lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?		-	-	
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?	U			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	C			
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities? Total. Add lines 1c through 1i		-		_
22	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				-
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			_	
	t III-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		-	100	110
2	were substantially all (50% of more) dues received nondeductible by members?		1 4 1		
	Did the organization make only in-house lobbying expenditures of \$2,000 or loss?		1		1. 1.
3	Did the organization make only in house lobbying expenditures of \$2,000 or less?		2		
-	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	n 501(c)("No," OF	2 3 (5), or se R (b) Part		ne 3, is
3 Dar	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	n 501(c)("No," OF	2 3 (5), or se R (b) Part		ne 3, is
1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	n 501(c)("No," OF	2 3 (5), or se R (b) Part		ne 3, is
1 2 a	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year	n 501(c)("No," OF al	2 3 (5), or se (b) Part		ne 3, is
1 2 a	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	n 501(c)("No," OF al	2 3 (5), or se (b) Part 2 2 2 2 b		ne 3, is
1 2 b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total	n 501(c)("No," OF al	2 3 (5), or se (b) Part 2 2 2 2 2 2 2 2 2		ne 3, is
1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	n 501(c)("No," OF al	2 3 (5), or se (b) Part 2 2 2 2 2 2 2 2 2		ne 3, is
1 2 a b c	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds Section 162(e) and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds Section 162(e) dues	n 501(c)("No," OF al	2 3 (5), or se (b) Part 2 2 2 2 2 2 2 2 2		ne 3, is
1 2 a b c 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political Did the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political estimate of nondeductible lobbying estimate of nondeductible lobbying estimate of political estimate of nondeductible lobbying estimate of political estimate of nondeductible lobbying est	n 501(c)("No," OF al ess plitical	2 3 (5), or se (b) Part 2a 2b 2c 3		ne 3, is
1 2 a b c 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds Section 162(e) and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds Section 162(e) dues	n 501(c)("No," OF al ess plitical	2 3 (5), or se (b) Part 2a 2b 2c 3		ne 3, is

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

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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



Nam	e of the organization THE ALLIANCE TO SAV	E ENERGY	Employer identification num 52-1082991
Pa			
-	organization answered "Yes" to Form 990, Part IV, line (
_		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
5	Did the organization inform all donors and donor advisors in wi	riting that the assets held in donor advi	rised funds
	are the organization's property, subject to the organization's ex	xclusive legal control?	Yes 🗌
6	Did the organization inform all grantees, donors, and donor adv		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	e conferring
_	impermissible private benefit?		Yes
Pa	t II Conservation Easements. Complete if the orga	nization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ucation) Preservation of an hi	istorically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Y
a	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic struct		
d	Number of conservation easements included in (c) acquired af	ter 8/17/06, and not on a historic struc	sture
	listed in the National Register	*****	2d
3	Number of conservation easements modified, transferred, release year	ased, extinguished, or terminated by th	he organization during the tax
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period		f
	violations, and enforcement of the conservation easements it h	nolds?	Yes 🗌
6	Staff and volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and en	nforcing conservation easements durin	ng the year > \$
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 17	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes	s the organization's accounting for
-	conservation easements.		
Pa	t III Organizations Maintaining Collections of		Other Similar Assets.
-	Complete if the organization answered "Yes" to Form 9	the second se	
1a	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhilt		rance of public service, provide, in Part X
	the text of the footnote to its financial statements that describe		
D	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, edu relating to these items:	lcation, or research in furtherance of pl	bublic service, provide the following amou
			► ¢
	(i) Revenues included in Form 990, Part VIII, line 1		
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treas		
-	the following amounts required to be reported under SFAS 11		and gant, provide
а	Revenues included in Form 990, Part VIII, line 1		b \$
	Assets included in Form 990, Part X		► \$
5			······································

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12 Schedule D (Form 990) 2012

t III Organizations Maintaining C Using the organization's acquisition, accessi (check all that apply): Public exhibition	on, and other record						
(check all that apply):		ds, check any of th	he following that	are a signif	icant use of it:	s collection	tems
Public exhibition			A				
			xchange program				
Scholarly research	e	• U Other					
Preservation for future generations	2 - 10 a da d						
			-		C	art XIII.	
			and the second second second		_	7.	Π.
							1
	The second se	ete if the organiza	tion answered "Y	es" to Forr	n 990, Part IV	, line 9, or	
		diany for contributi	ons or other ass	ets not incl	uded		
						Vee	
If "Ves." evoluin the arrangement in Part XIII	and complete the fo	lowing table:					
in res, explain the analyement in Part All	and complete the it	biowing table.		- F		Amount	
Beginning balance					10	Amount	-
							_
					00		
Did the organization include an amount on F	orm 990 Part X line	012		L		Vec	
		1			Three years back	k (e) Four v	ears ba
Beginning of year balance				5-1			
the second se			5				
						1	
			- 1	1			
Construction of the second		1				12	
			1.0				
	rent year end baland	ce (line 1a, column	(a)) held as:				
		%					
	%						
	%						
그 엄마에 집했다. 그렇는 방법을 걸었는 것이라는 것은 물질을 하는 것이 가지 않는 것이 없는 것이다.	uld equal 100%.						
		ation that are held	and administer	ed for the o	organization		
by:						N N	es I
(i) unrelated organizations						3a(i)	
							-
If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Schedule R?				3b	- 1 L
					1101010101010101010100		
t VI Land, Buildings, and Equipm	nent. See Form 990	0, Part X, line 10.					
Description of property			and the second se			(d) Book	value
Land			- 1	0			
Buildings	24			-	Sandal		
		1 4 4	22 000 1	60'	7 022	126	,16
Leasehold improvements		1,1	.23,989.	00	7,823.	430	, 10
Leasehold improvements			21,213.		8,150.		,10
Itt ICI EVIELIT ECICOVIEIE	Provide a description of the organization's of During the year, did the organization solicit of to be sold to raise funds rather than to be main in the solid to raise funds rather than to be main in the solid to raise funds rather than to be main in the organization an agent, trustee, custod on Form 990, Part X? If "Yes," explain the arrangement in Part XIII Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount on F If "Yes," explain the arrangement in Part XIII. If and programs Administrative expenses End of year balance Provide the estimated percentage of the cur Board designated or quasi-endowment ▶ Temporarily restricted endowment ▶ Temporarily restricted endowment ▶ The percentages in lines 2a, 2b, and 2c shou Are there endowment funds not in the posse by: (i) unrelated organizations If "Yes" to 3a(ii), are the related organizations If "Yes" to 3a(ii), are the related organizations Description of property Description of property	Provide a description of the organization's collections and expla During the year, did the organization solicit or receive donations to be sold to raise funds rather than to be maintained as part of IV Escrow and Custodial Arrangements. Complete the organization an agent, trustee, custodian or other interme on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the for Beginning balance Additions during the year Distributions during the year Distributions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line If "Yes," explain the arrangement in Part XIII. Check here if the e V Endowment Funds. Complete if the organization an Beginning of year balance Contributions Met investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current year end balance Beard designated or quasi-endowment ▶ Permanent endowment ↓ Permanent endowment funds not in the possession of the organizations If "Yes" to 3a(ii), are the related organizations listed as required to the set organizations If "Yes" to 3a(ii), are the related organizations listed as required to the set of the organizations If "Yes" to 3a(ii), are the related organizations listed as required to the set of the organizations If "Yes" to 3a(ii), are the related organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as required to the set of the organizations listed as	Provide a description of the organization's collections and explain how they furthe During the year, did the organization solicit or receive donations of art, historical tra- to be sold to raise funds rather than to be maintained as part of the organization's IV Escrow and Custodial Arrangements. Complete if the organization's reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contribution on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance Additions during the year Ending balance Distributions during the year Ending balance V Endowment Funds. Complete if the organization has be V Endowment Funds. Complete if the organization answered "Yes" to I (a) Current year (b) Prior year Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Char expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column Board designated or quasi-endowment ▶% Permanent endowment ▶% Temporarily restricted endowment ▶% Discribe in	Provide a description of the organization's collections and explain how they further the organizatio During the year, did the organization solicit or receive donations of art, historical treasures, or other to be sold to raise funds rather than to be maintained as part of the organization's collection? IV Escrow and Custodial Arrangements. Complete if the organization answered "\ reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other ass on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance Additions during the year Distributions during the year (a) Current year (b) Prior year (c) Two years Beginning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships Diff expenditures for facilities and programs Administrative expenses Diff the organization the programs (b) Prior year (c) Two years Beard designated or quasi-endowment) % The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administer by: (i) unrelated organizations If "Yes" to 3a(ii), are the related organizations is endowment funds. V Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other)	Provide a description of the organization's collections and explain how they further the organization's exempt During the year, did the organization solicit or receive donations of art, historical treasures, or other similar ass to be sold to raise funds rather than to be maintained as part of the organization's collection? IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Forr reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not incl on Form 990, Part X? If 'Yes, "explain the arrangement in Part XIII and complete the following table: Beginning balance Additions during the year Distributions during the year Contributions during the year Contributions during the year Distributions during the year Contributions V Endowment Funds. 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Describe in Part XIII the intended uses of the organization's exempt (b) Cost or other basis (investment (b) Cost or other basis (investment (c) Cost or other basis (investment) (c) Accour depred (c) Cost or ther basis (investment) (c) Cost or other basis (investment) (c) Cost or other basis (investment) (c) Accour (c) Prior (c) Accour (c)	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Pa During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to risk funds rather than to be maintained as part of the organization's collection? IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance Additions during the year Distributions during the year Dis	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Secrow and Custodial Arrangements. Complete if the organization's oncentric treasures, or other sector Part IV. Ine 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If Yes, "explain the arrangement IN Part XIII and complete the following table: Additions during the year It description include an amount on Form 990, Part X, line 21? If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII Yes If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XII If Yes

Schedule D (Form 990) 2012

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		ost or end-of-year market value
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	2	
	2	
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ee Form 990, Part X, line 1		
(b) Book value	(c) Method of valuation: Co	ost or end-of-year market value
	1	
		(h) Destructure
Description		(b) Book value
e 15)		•
line 25.		
	(b) Book value	
	701.214.	
	e Form 990, Part X, line 12 (b) Book value	ee Form 990, Part X, line 13. (b) Book value (c) Method of valuation: Co

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

2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains 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 . . 3 . . 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.) . 4c c Add lines 4a and 4b . f Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I</i> , line 12.) 5 9,7 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 11,7 1 Total expenses and losses per audited financial statements . . 1 11,7 Amounts included on line 1 but not on Form 990, Part IX, line 25: a 2a 2a 2a 2 Donated services and use of facilities . . . 1 11,7		XI Reconciliation of Revenue per Audited Financial Statements With Revenue per		
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Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 20 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 addition information. Part X, Line 2: N: January 1, 2009, the organization adopted the accounting standard on accounting for uncertainty in income taxes FASB ASC TOPIC 740-10), which addresses the determination of whether tax benefits claimed or expected to be claimed on tax return should be recorded in the financial statements. Under this guidance, the organization may recognize the tax benefit rom an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authoritie	c	Add lines 4a and 4b	4c	
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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 addition formation. Part X, Line 2: N: January 1, 2009, the organization adopted the accounting standard on accounting for uncertainty in income taxes FASB ASC TOPIC 740-10), which addresses the determination of whether tax benefits claimed or expected to be claimed on tax return should be recorded in the financial statements. Under this guidance, the organization may recognize the tax benefit rom an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authoritie	Part)	Supplemental Information		
rom an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authoritie	art V, forma art X,	line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to ation. Line 2: N: January 1, 2009, the organization adopted the accounting standard on accounting for uncertain	o provide a	ny additional e taxes
rom an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authoritie			4	
	tax re	turn should be recorded in the financial statements. Under this guidance, the organization may recognize	the tax ber	
	om ar	uncertain tax position only if it is more likely than not that the tax position will be sustained on examinati	on by taxin	g authorities,
based on the technical merits of the				******
	ased	on the technical merits of the		
		***************************************	*************	*****

 Schedule D (Form 990) 2012
 THE ALLIANCE TO SAVE ENERGY
 52-1082991 Page 5

 Part XIII Supplemental Information (continued)
 POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM

 SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A

 GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT.

 THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES

 DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES,

 AND ACCOUNTING IN INTERIM PERIODS.

MANAGEMENT EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. THE ORGANIZATION FILES INCOME TAX RETURNS IN THE U.S. FEDERAL JURISDICTION. GENERALLY, THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U.S. FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2008.

SCHEDULE F (Form 990)	ates -	OMB No. 1545-0047				
Department of the Treasury Internal Revenue Service			e organization answered "Yes" to Fo Part IV, line 14b, 15, or 16. Form 990.		-	Open to Public Inspection
Name of the organization					Employer iden	tification number
THE ALLIANCE TO	SAVE EN	FROV			52-10829	001
		and the second sec	tside the United States. Comp	lete if the organ		
to Form 990, Par				iere il ille ergal		
the grantees' eligibility f	or the grants or a	assistance, and	rds to substantiate the amount of its g the selection criteria used to award th procedures for monitoring the use of i	ne grants or ass	istance?	Yes No
United States.					anner assistance o	
3 Activities per Region. (T (a) Region	he following Part (b) Number of	t I, line 3 table c (c) Number of	an be duplicated if additional space is (d) Activities conducted in region	T	vity listed in (d)	(f) Total
(മ) നട്ടുത്ന	offices in the region	employees, agents, and independent contractors in region	(by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a pro describe	egram service, e specific type ce(s) in region	expenditures for and investments in region
SOUTH ASIA - AFGHANISTAN,				ENERGY EFFICIENCY		
BANGLADESH	3	8	PROGRAM SERVICES	PROGRAMS		203,089.
						10.000
RUSSIA & THE NEWLY				ENERGY EFF:	ICIENCY	
INDEPENDENT STATES	1	0	PROGRAM SERVICES	PROGRAMS		119,124.
SUB-SAHARAN AFRICA	1	0	PROGRAM SERVICES	ENERGY EFF: PROGRAMS	ICIENCY	141,121.
				-		
3 a Sub-total	5	8		1		463,334.
b Total from continuation					-	
sheets to Part I c Totals (add lines 3a		0		1		0.

and 3b) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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8

Schedule F (Form 990) 2012

463,334.

|--|

12-10-12

	(h) Method of valuation (book, FMV, appraisal, other)					
	(g) Description of non-cash assistance					
	(f) Amount of non-cash assistance					
Part III can be duplicated if additional space is needed.	(e) Manner of cash disbursement					
	(d) Amount of cash grant					
ed.	(c) Number of recipients					
ditional space is need	(b) Region					
Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance					

Schedule F (Form 990) 2012 THE ALLIANCE TO SAVE ENERGY Part IV Foreign Forms

52-1082991 Page 4

	"Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions		
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	🗆 Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	🗆 Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	🗆 Yes	X No
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	🗆 Yes	X No

Schedule F (Form 990) 2012

Schedule F	Form 990) 2012 THE ALLIANCE TO SAVE ENERGY	52-1082991	Page 5
Part V	Supplemental Information	200 B 3 2 3 3	
	Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I,	line 3, column (f) (accounting	method;
	amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (a	ccounting method); and Part I	II, column
_	(c) (estimated number of recipients), as applicable. Also complete this part to provide any addition	al information.	
		1.25 - 2	
			_
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			_
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1-1-1-1			
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SCHEDULE J (Form 990) Department of the Treasury Internal Revenue Service	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.	20 Open	1545-0047 012	
Name of the organization		Employer identification		nber
	THE ALLIANCE TO SAVE ENERGY	52-10829	91	_
Part I Questions Re	egarding Compensation			-
Part VII, Section A, line First-class or charter Travel for compani Tax indemnification Discretionary spen	ons Payments for business use of persona Health or social club dues or initiation	ersonal use al residence fees ur, chef)	Yes	No
	uire substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	Executive Director, regarding the items checked in line 1a?			
CEO/Executive Director establish compensation Compensation com Independent comp Form 990 of other	Densation consultant Image: Compensation survey or study organizations Image: Compensation survey or study	ization to		
organization or a related			x	
	a payment from, a supplemental nonqualified retirement plan?		1	X
c Participate in, or receive	payment from, an equity-based compensation arrangement?	40		X
If "Yes" to any of lines 4 Only section 501(c)(3)	a-c, list the persons and provide the applicable amounts for each item in Part III. and 501(c)(4) organizations must complete lines 5-9.			
contingent on the reven				
a The organization?		5a	1 1	X
b Any related organization	1?		-	X
contingent on the net ea	rm 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensi arnings of:		-	
a The organization?	-2	6a	+	X
	1?	6b		Δ
	, describe in Part III. rm 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payme and 6? If "Yes," describe in Part III			x
	orted in Form 990, Part VII, paid or accrued pursuant to a contract that was subject t			
initial contract exception 9 If "Yes" to line 8, did the	n described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III e organization also follow the rebuttable presumption procedure described in			X
Regulations section 53.	4958-6(c)?			

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

Schedule J (Form 990) 2012

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII. Section A. Ine 1a. applicable column (D) and (F) amounts for that individual.		olipadoj -i rat	renort compensati	on from the organize	ation on row (i) and fror	n related organization	is, described in the ins	thirting on row (ii)
	on Form on Form	ported in Schedule J 1 990, Part VII. dividual must equal ti	report compensation	orm 990, Part VII, Si	ection A, line 1a, applic	able column (D) and ((E) amounts for that inc	dividual.
		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
(1) KATERI ANNE CALLAHAN	0	212,243.	45,000.	.0	12,978.	11,016.	281,237.	.0
PRESIDENT		.0	.0	.0		• 0	.0	.0
(2) GAIL HENDRICKSON	0	161,957.	24,418.	.0	9,767.	4,972.	201,114.	.0
EXECUTIVE VICE PRESIDENT		.0	.0	.0	.0	.0	.0	.0
(3) BRIAN T. CASTELLI	()	165,026.	20,000.	.0	10,174.	10,201.	205,40	
EXECUTIVE VICE PRESIDENT		.0	.0	.0		.0		
(4) FLOYD DESCHAMP	(1)	168,000.	.0	.0	2,52	0.	170,52	
VICE PRESIDENT		.0	•0	•0		•0		
(5) JEFFREY P. HARRIS	()	152,558.	.0	.0	9,278.	9,797.	171,633.	
SR VP FOR PROGRAMS	(II)	.0	.0	•0		.0	.0	.0
(6) MERRILEE S. HARRIGAN	()	131,820.	10,000.	.0	8,270.	8,761.	158,851.	
VICE PRESIDENT	(ii)		.0	0.	.0			0.
(7) MAUREEN GUTTMAN	()	131,779.	.0	• 0	7,477.	10,809.	150,065.	
DIRECTOR	(ii)	.0	.0	.0	.0	0.	0.	.0
	(1)							
	(ii)							
	(i)							
	(II)							
	8							
	(11)							
	Ξ							
	(ii)							
	Ξ							
	(ii)							
	Ξ							
	(1)							
	(1)							
	(1)							
	(1)							
	(ii)							
	(1)							

Schedule J (Form 990) 2012 THE ALLIANCE TO SAVE ENERGY	52-1082991 Page 3
Complete this part to 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	d for Part II. Also complete this part for any
ROGHIOMA INFORMATION. PART I, LINE 4A: KIRK MCLAREN RECEIVED SEVERANCE IN THE AMOUNT OF	
	Schedule J (Form 990) 2012

232113 12-10-12 SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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



Name of the organization THE ALLIANCE TO SAVE ENERGY Employer identification number 52-1082991

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

OF ENERGY USE.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: POLICY ADVOCACY, EDUCATION, TECHNOLOGY DEPLOYMENT AND COMMUNICATIONS THAT IMPACT ALL SECTORS OF THE ECONOMY. THE ORGANIZATION PROVIDES VISION AND ACTIVISM THROUGH ITS BOARD OF DIRECTORS, WHICH INCLUDES LEADERS FROM BUSINESS, GOVERNMENT, THE PUBLIC INTEREST SECTOR AND ACADEMIA. ADDITIONALLY ASE, INITIATES AND PARTICIPATES IN PUBLIC-PRIVATE PARTNERSHIPS, COLLABORATIVE EFFORTS AND STRATEGIC ALLIANCES TO OPTIMIZE RESOURCES AND EXPAND ITS SPHERE OF INFLUENCE. IT EXECUTES ITS MISSION THROUGH A TEAM OF RECOGNIZED ENERGY EFFICIENCY EXPERTS AND PROFESSIONALS.

FORM 990, PART VI, SECTION B, LINE 11: WHEN THE DRAFT IS RECEIVED FROM THE PREPARER, IT IS REVIEWED FIRST BY THE EXECUTIVE MANAGEMENT TEAM COMPOSED OF THE PRESIDENT AND ONE EXECUTIVE VICE-PRESIDENTS. ONCE REVIEWED AND APPROVED, THE DOCUMENT IS SENT TO ALL MEMBERS OF THE AUDIT AND FINANCE COMMITTEE OF THE BOARD OF DIRECTORS AND IS MADE AVAILABLE TO THE FULL BOARD.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS AND TOP MANAGEMENT OFFICIALS ARE REQUIRED TO DISCLOSE ANNUALLY ANY POTENTIAL CONFLICT OF INTEREST. IN THE EVENT OF A POTENTIAL CONFLICT, THAT PERSON WILL RECUSE HIMSELF/HERSELF FROM ALL DISCUSSIONS AND VOTE.

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization	Employer identification number
The Alliance to Save Energy	52-1082991
Form 990, Part VI, Section B, Line 15: Compensation for the president is det	ermined by the Executive Committe of the Board of
Directors and ratified by the Board. A compensation review is compiled of	similar organizations and is used to guide compensation
discussions. Also considered are performance goals and adherence to the	mission of the organization. The compensation of
other top management officials is determined through a similar process, inc	cluding a formal performance review, led by the
HR Manager, with decisions made by the Executive Management team. The	ese processes occur annually.
Form 990, Part VI, Line 17, list of states receiving a copy of the Form 990:	
AK,AL,AR,AZ,CA,CO,CT,FL,GA,HI,IL,KS,KY,MA,MD,ME,MI,MS,NJ,NH,NM,NY	OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV,NC,MN,ND
Form 990, Part VI, Section C, Line 19: All documents are made available up	on request.
Form 990, Part IX, Line 11G, Other Fees:	
Consulting:	
Program Service Expenses	1,425,139
Management and General Expenses	48,742
Fundraising Expenses	87,902
Total Expenses	1,561,783
Total Other Fees on Form 990, Part IX, Line 11G, Col A	1,561,783
The 2012 Form 990 - Part I, Part III, Part VIII, Part IX, and Part XI have been a	mended to restate the income and expenses
for the year to their correct amounts.	

	Name of the organization THE ALLIANCE	ALLIANCE TO SAVE ENERGY				Employer identification number 52-1082991	entificati 82991	on numbe
Part I	Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	plete if the organization answered "Ye	s" to Form 990, Part IV, line 33	(1)				
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	me End-of-year assets		(f) Direct controlling entity	olling
				_				
Part II	Identification of Related Tax-Exempt Organizations (Complete if the organizations during the tax year.)	nizations (Complete if the organization	organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	, Part IV, line 34 b	scause it had one	or more related tax	k-exempt	
	(a)	(q)	(c)	(q)	(e)	(4)		(g) Section 512(b)(13)
	Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity		controlled entity?
DUTHE	SOUTHEAST ENERGY EFFICIENCY ALLIANCE -	COALITION OF GOVERNMENT,						-
0-494	20-4949501, 50 HURT PLAZA, SUITE 1250,	BUSINESS, AND CONSUMER				THE ALLIANCE TO	TO	2
ATLANTA,	PA, GA 30303	LEADERS	GEORGIA	501(C)(3)	LINE 11A, I	SAVE ENERGY		×
								-
								+
								-

12-10-12 LHA

	(k) al or Percentage er/ No					I more related	(i) Section 512(b/13) ontrolled entity?	Yes No					-		
	(j) Ceneral or DX managing partner? 55) Yes No		-			d one or	(h) Percentage ownership								
organizations treated as a partnership during the tax year.)	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)					Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	(g) Share of end-of-year assets					1			
	(h) Disproportion- ate allocations? Yes No					art IV, line 34						-			_
	(g) Share of end-of-year assets					m 990, P.	(f) Share of total income								
	end- as		 _			es" to For	(e) Type of entity (C corp, S corp, or trust)	-							
	(f) Share of total income					wered "Y	(C corp			/					
			-		_	ation ans	(d) Direct controlling entity								
	(e) nant income , unrelated, rom tax und s 512-514)					le organiz	(d) Direct contr entity								
	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)					plete if th	(c) Legal domicite (state or foreign	country)							
						rust (Com	69 Fea	-						-	
	(d) Direct controlling entity						(b) Primary activity								
year.)	(c) Legal domicite foreign country)					a Corpora	Primary								
iring the tax	1					Identification of Related Organizations Taxable as a Corporation or organizations treated as a corporation or trust during the tax year.)			Π		Π			Т	Τ
nership du	(b) Primary activity					nizations oration or	15								
as a partr		TT	T	П	П	ted Orga as a corp	, and EIN anization								
s treated	, and EIN inization					on of Rela	(a) Name, address, and EIN of related organization								
anization	(a) Name, address, and EIN of related organization					ntification	Name of re								
rarr III org	Name, of rel					Part IV Ide org									

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				×	Yes No
During the tax year, did the organization engage in any of the following transactior	ns with one or more r	sactions with one or more related organizations listed in Parts II-IV?	n Parts II-IV?		-
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		******		1a	×
b Gift, grant, or capital contribution to related organization(s)				1b	×
c Gift, grant, or capital contribution from related organization(s)				1c	~
d Loans or loan guarantees to or for related organization(s)				1d	×
e Loans or loan guarantees by related organization(s)		*****	******	1e	~
f Dividends from related organization(s)				#	~
a Sale of assets to related organization(s)				4	X
ation(s)				ŧ	~
Exchange of assets with related organization(s)				=	X
				ţ.	~
k Lease of facilities, equipment, or other assets from related organization(s)				¥	×
Performance of services or membership or fundraising solicitations for relat	ed organization(s)			-	~
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			Ę	~
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)	*******************************	医外生气的 经资源 医子宫 计字子 医子宫 医子宫 医子宫 医子宫 医子宫 医子宫 医子宫 医子宫 医子宫 医子	-	X
				+	X
D Reimbursement paid to related organization(s) for expenses				¢	×
				+	×
					X
s Other transfer of cash or property from related organization(s)	who must complete t	his line, including covered re	elationships and transaction threshold	S.	9
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nount involved	

Provide the following information for each entity taxed as a partnership through which the organization cond that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	ntity taxed as a partner- ructions regarding excl	ship through which t usion for certain invu	which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) tain investment partnerships.	lucted more	e than five percer	nt of its activities (n	neasured t	y total assets o	or gross re	(enue)
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Are all 501(c) \$60 019.7 Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations? Yes No	(I) Code V-UBI mount in box 2(of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes NO	(j) (k) General or Percentage Dartner? ownership Ves No
				-						
								1		
							-			
								1		
									-	

12-10-12

Schedule R (Form 990) 2012 THE Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).