Form **990**

Department of the Treasury
Internal Revenue Service

# Return of Organization Exempt From Income Tax

**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)** ▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

**A For the 2020 calendar year, or tax year beginning 07-01-2020 , and ending 06-30-2021**

**B** Check if applicable:
- [x] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Final return/terminated
- [ ] Amended return
- [ ] Application pending

**C** Name of organization
CLEANTECH SAN DIEGO ASSOCIATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
PO BOX 178769

City or town, state or province, country, and ZIP or foreign postal code
SAN DIEGO, CA 92177

**D Employer identification number**
26-1584423

E Telephone number
(858) 568-7777

**G** Gross receipts $ 1,325,663

**F** Name and address of principal officer:
JASON ANDERSON
PO BOX 178769
SAN DIEGO,CA 92177

**H(a)** Is this a group return for subordinates? [ ] Yes [x] No

**H(b)** Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶

**I** Tax-exempt status: [ ] 501(c)(3) [x] 501(c) ( 6 ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

**J Website:** ▶ WWW.CLEANTECHSANDIEGO.ORG

**K** Form of organization: [x] Corporation [ ] Trust [ ] Association [ ] Other ▶

**L** Year of formation: 2007

**M** State of legal domicile: CA

## Part I Summary

**Activities & Governance**

**1** Briefly describe the organization's mission or most significant activities:
ACCELERATE CLEAN TECHNOLOGY INNOVATION IN SAN DIEGO TO BENEFIT ECONOMY, ENVIRONMENT & COMMUNITY.

**2** Check this box ▶[ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

| | | | |
|---|---|---|---|
| **3** | Number of voting members of the governing body (Part VI, line 1a) | **3** | 48 |
| **4** | Number of independent voting members of the governing body (Part VI, line 1b) | **4** | 47 |
| **5** | Total number of individuals employed in calendar year 2020 (Part V, line 2a) | **5** | 7 |
| **6** | Total number of volunteers (estimate if necessary) | **6** | 47 |
| **7a** | Total unrelated business revenue from Part VIII, column (C), line 12 | **7a** | 0 |
| **b** | Net unrelated business taxable income from Form 990-T, line 39 | **7b** | 0 |

| | | | Prior Year | Current Year |
|---|---|---|---|---|
| Revenue | **8** | Contributions and grants (Part VIII, line 1h) | 146,142 | 162,593 |
| | **9** | Program service revenue (Part VIII, line 2g) | 2,392,681 | 1,161,565 |
| | **10** | Investment income (Part VIII, column (A), lines 3, 4, and 7d ) | 0 | 0 |
| | **11** | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 0 | 1,505 |
| | **12** | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 2,538,823 | 1,325,663 |
| Expenses | **13** | Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) | 0 | 2,157 |
| | **14** | Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 |
| | **15** | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 616,776 | 630,661 |
| | **16a** | Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 |
| | **b** | Total fundraising expenses (Part IX, column (D), line 25) ▶0 | | |
| | **17** | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 1,719,955 | 786,894 |
| | **18** | Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 2,336,731 | 1,419,712 |
| | **19** | Revenue less expenses. Subtract line 18 from line 12 | 202,092 | -94,049 |
| | | | **Beginning of Current Year** | **End of Year** |
| Net Assets or Fund Balances | **20** | Total assets (Part X, line 16) | 595,652 | 421,557 |
| | **21** | Total liabilities (Part X, line 26) | 675 | 0 |
| | **22** | Net assets or fund balances. Subtract line 21 from line 20 | 594,977 | 421,557 |

## 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 — Date 2021-10-12

▶ JASON ANDERSON PRESIDENT/CEO
Type or print name and title

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check [ ] if self-employed | PTIN |
|---|---|---|---|---|
| | | 2021-10-12 | | P00646873 |

Firm's name ▶ ALDRICH CPAS AND ADVISORS LLP — Firm's EIN ▶ 93-0623286

Firm's address ▶ 7676 HAZARD CENTER DRIVE STE 1300
SAN DIEGO, CA 92108 — Phone no. (619) 810-4940

May the IRS discuss this return with the preparer shown above? (see instructions) [x] **Yes** [ ] **No**

## Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

**1** Briefly describe the organization's mission:

TO ACCELERATE CLEAN TECHNOLOGY INNOVATION AND PROMOTE THE EQUITABLE DEPLOYMENT OF SUSTAINABLE SOLUTIONS ACROSS THE SAN DIEGO REGION FOR THE BENEFIT OF THE ECONOMY, THE ENVIRONMENT, AND ALL MEMBERS OF THE COMMUNITY.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ **Yes** ☑ **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, 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 $ including grants of $ ) (Revenue $ )

SOUTHERN CALIFORNIA ENERGY INNOVATION NETWORK: THE SOUTHERN CALIFORNIA ENERGY INNOVATION NETWORK (SCEIN) IS A FREE PROGRAM FOR STARTUPS THAT ARE DEVELOPING SOLUTIONS TO HELP CALIFORNIA MEET ITS ENERGY GOALS. THE PROGRAM PROVIDES ACCESS TO THE RESOURCES AND FACILITIES OF A NUMBER OF REGIONAL PARTNER ORGANIZATIONS (LISTED BELOW) AND CONNECTIONS WITH INDUSTRY IN ORDER TO ACCELERATE THE COMMERCIALIZATION OF EMERGING ENERGY TECHNOLOGIES.

**4b** (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

CLEANTECH SAN DIEGO/UNIVERSITY OF SAN DIEGO I6 GRANT: THE UNIVERSITY OF SAN DIEGO AND ITS PARTNERS WILL SCALE-UP THE CAPACITY OF THE SAN DIEGO REGIONAL ENERGY INNOVATION NETWORK (SDREIN NOW KNOWN AS SCEIN) INCUBATOR PROGRAM TO SUPPORT THE CREATION AND COMMERCIALIZATION OF CLEAN ENERGY STARTUPS IN THE INLAND EMPIRE (NAMELY, RIVERSIDE AND SAN BERNARDINO COUNTIES). SDREIN (SCEIN) WAS FORMED IN 2016 TO OFFER FREE BUSINESS, TECHNICAL, AND REGULATORY SERVICES TO ENTREPRENEURS WITH BREAKTHROUGH ELECTRIC ENERGY TECHNOLOGIES IN THE AREAS OF SAN DIEGO, IMPERIAL, RIVERSIDE, AND SAN BERNARDINO. TO DATE, SDREIN (SCEIN) HAS SUPPORTED 25 STARTUPS EMPLOYING MORE THAN 144 PEOPLE AND RAISING $15.8 MILLION IN PRIVATE CAPITAL SINCE ACCEPTANCE INTO THE PROGRAM.HOWEVER, SDREIN (SCEIN) HAS FACED CHALLENGES IDENTIFYING CLEAN ENERGY STARTUPS FROM THE INLAND EMPIRE. THE INLAND EMPIRE HAS HISTORICALLY SUFFERED FROM LOW EDUCATION LEVELS COMPOUNDED BY AN ECONOMIC FOUNDATION OF LOW-TECH, LOW-WAGE JOBS, AND IS CURRENTLY MISSING SOME OF THE COMMON INGREDIENTS OF A HEALTHY INNOVATION ECOSYSTEM. DESPITE OUTREACH, ONLY 1 OF SDREIN'S (SCEIN'S) 25 STARTUPS SO FAR HAS COME FROM THE INLAND EMPIRE. IN ORDER FOR CLEAN ENERGY STARTUPS TO THRIVE IN THE INLAND EMPIRE, MORE RESOURCES NEED TO BE ALLOCATED TOWARDS BUILDING A STRONGER ENTREPRENEURIAL ECOSYSTEM AND A COHESIVE CLEANTECH INDUSTRY.

**4c** (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

CITY OF SAN DIEGO - SMART CITIES SAN DIEGO: SMART CITIES SAN DIEGO IS AN ALLIANCE BETWEEN PUBLIC, PRIVATE, AND ACADEMIC ORGANIZATIONS WORKING TOGETHER TO DEPLOY IOT TECHNOLOGIES, ADVANCE URBAN CONNECTIVITY, REDUCE GREENHOUSE GAS EMISSIONS, INCREASE WATER AND ENERGY EFFICIENCY, AND DRIVE ECONOMIC GROWTH IN THE SAN DIEGO REGION. AS PART OF THIS INITIATIVE, CLEANTECH SAN DIEGO IS WORKING WITH THE CITY OF SAN DIEGO ON AN INCLUSIVE AND CONNECTED COMMUNITIES ROADMAP AND WORKING WITH PARTNERS ON A REGIONAL APPROACH TO SMART CITIES INITIATIVES.

(Code: ) (Expenses $ including grants of $ ) (Revenue $ )

CLEANTECH SAN DIEGO IS A MEMBER-BASED TRADE ORGANIZATION THAT POSITIONS THE GREATER SAN DIEGO REGION, INCLUDING IMPERIAL COUNTY, AS A GLOBAL LEADER IN THE CLEANTECH ECONOMY. AS A NON-PROFIT ORGANIZATION, WE ARE UNIQUELY SUITED TO SUPPORT THE CLEANTECH INDUSTRY BY FOSTERING COLLABORATIONS ACROSS THE PRIVATE-PUBLIC-ACADEMIC LANDSCAPE, LEADING ADVOCACY EFFORTS TO PROMOTE CLEANTECH PRIORITIES AND ENCOURAGING INVESTMENT IN THE SAN DIEGO REGION. THE ORGANIZATION ACHIEVES THIS BY FOSTERING COLLABORATIONS ACROSS THE PRIVATE-PUBLIC-ACADEMIC LANDSCAPE, LEADING ADVOCACY EFFORTS TO PROMOTE CLEANTECH PRIORITIES, AND ENCOURAGING INVESTMENT IN THE SAN DIEGO REGION. CLEANTECH SAN DIEGO'S MEMBERSHIP INCLUDES MORE THAN 100 LOCAL BUSINESSES, UNIVERSITIES, GOVERNMENTS, AND NONPROFITS COMMITTED TO ADVANCING SUSTAINABLE SOLUTIONS FOR THE BENEFIT OF THE ECONOMY AND THE ENVIRONMENT.CLEANTECH SAN DIEGO DRIVES A NUMBER OF PROGRAMS THAT SUPPORT NEW AND EMERGING INDUSTRIES. SMART CITIES SAN DIEGO IS A COLLABORATION BETWEEN PUBLIC, PRIVATE AND ACADEMIC ORGANIZATIONS WORKING TO DEVELOP AND IMPLEMENT INITIATIVES THAT WILL IMPROVE THE SAN DIEGO REGION'S ENERGY INDEPENDENCE, EMPOWER CONSUMERS TO EMBRACE CLEAN TECHNOLOGIES, REDUCE GREENHOUSE GAS EMISSIONS AND DRIVE ECONOMIC GROWTH.

**4d** Other program services (Describe in Schedule O.)

(Expenses $ including grants of $ ) (Revenue $ )

**4e** **Total program service expenses** ▶

## Part IV Checklist of Required Schedules

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A* | 1 | | No |
| 2 | Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)? | 2 | Yes | |
| 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 | | No |
| 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 | | |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III | 8 | | No |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| 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 | | No |
| e | Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X* | 11e | | No |
| 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 | | No |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII* | 12a | | No |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional* | 12b | | No |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E* | 13 | | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | No |
| 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 | | No |
| 15 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV* | 15 | | No |
| 16 | Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV* | 16 | | No |
| 17 | Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions) | 17 | | No |
| 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 | | No |
| 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 | | No |
| 20a | Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H* | 20a | | No |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II* | 21 | | No |

**Part IV Checklist of Required Schedules** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 22 | Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III* | 22 | | No |
| 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 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a* | 24a | | No |
| 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 any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | **Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I | 25a | | |
| 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 | | |
| 26 | Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II* | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L,* Part III | 27 | | No |
| 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, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV* | 28a | | No |
| b | A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV* | 28b | | No |
| c | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV* | 28c | | No |
| 29 | Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M* | 29 | | No |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M* | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* | 31 | | No |
| 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 | | No |
| 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 | | No |
| 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 | Yes | |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| b | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* | 35b | | |
| 36 | **Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2* | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI* | 37 | | No |
| 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 | Yes | |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | 9 | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | | 1c Yes | |

**Part V** **Statements Regarding Other IRS Filings and Tax Compliance** *(continued)*

| | | | | | |
|---|---|---|---|---|---|
| **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 7 | | | |
| **b** | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | 2b | Yes | |
| **3a** | Did the organization have unrelated business gross income of $1,000 or more during the year? | | 3a | | No |
| **b** | If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* | | 3b | | |
| **4a** | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | 4a | | No |
| **b** | If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | |
| **5a** | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | 5a | | No |
| **b** | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | 5b | | No |
| **c** | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | 5c | | |
| **6a** | Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | | 6a | | No |
| **b** | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | 6b | | |
| **7** | **Organizations that may receive deductible contributions under section 170(c).** | | | | |
| **a** | Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? | | 7a | | |
| **b** | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | 7b | | |
| **c** | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | 7c | | |
| **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 contract? | | 7e | | |
| **f** | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | 7f | | |
| **g** | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | | 7g | | |
| **h** | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | 7h | | |
| **8** | **Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | | 8 | | |
| **9** | **Sponsoring organizations maintaining donor advised funds.** | | | | |
| **a** | Did the sponsoring organization make any taxable distributions under section 4966? | | 9a | | |
| **b** | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | 9b | | |
| **10** | **Section 501(c)(7) organizations.** Enter: | | | | |
| **a** | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | |
| **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: | | | | |
| **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 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 1041? | | 12a | | |
| **b** | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | 12b | | | |
| **13** | **Section 501(c)(29) qualified nonprofit health insurance issuers.** | | | | |
| **a** | Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O. | | 13a | | |
| **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 | | | |
| **c** | Enter the amount of reserves on hand | 13c | | | |
| **14a** | Did the organization receive any payments for indoor tanning services during the tax year? | | 14a | | No |
| **b** | If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* | | 14b | | |
| **15** | Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? | | 15 | | No |
| **16** | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. | | 16 | | No |

**Part VI** **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

## Section A. Governing Body and Management

| | | | | Yes | No |
|---|---|---|---|---|---|
| 1a | Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | 1a | 48 | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 47 | | |
| 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 | | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | | No |
| 6 | Did the organization have members or stockholders? | 6 | | Yes | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | | No |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | |
| a | The governing body? | 8a | | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | | Yes | |
| 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 | | | No |

## Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

| | | | Yes | No |
|---|---|---|---|---|
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | No |
| 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 | | No |
| 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 | Yes | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* | 12c | Yes | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes | |
| 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? | | | |
| a | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| b | Other officers or key employees of the organization | 15b | Yes | |
| | 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? | 16a | | No |
| 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 | | |

## Section C. Disclosure

**17** List the states with which a copy of this Form 990 is required to be filed ▶ CA

**18** Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records:
▶JASON ANDERSON PO BOX 178769 SAN DIEGO,CA 92177 (858) 568-7777

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| (1) JASON ANDERSON<br>PRESIDENT & CEO | 40.00<br>5.00 | X | | X | | | | 188,751 | 11,250 | 7,257 |
| (2) RICHARD AZER<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (3) LEE BARKEN<br>BOARD MEMBER | 0.30<br>1.00 | X | | | | | | 0 | 0 | 0 |
| (4) NANCY BELL<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (5) SCOTT ANDERS<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (6) JULIA BROWN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (7) SANDRA BROWN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (8) LT COL BRANDON NEWELL<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (9) SCOTT CRIDER<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (10) RAPHAEL DECLERQC<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (11) JOSH BROCK<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (12) DENNIS GAKUNGA<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (13) KELLEY GALE<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (14) CODY HOOVEN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (15) MIKE KRENN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (16) MARK HOOLEY<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (17) WILLIAM HOOPER<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |

**Part VII** **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|---|---|---|---|---|---|---|---|
| (18) TIM KELLEY<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (19) SEBASTIAN LUCIER<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (20) JOSH LAMPL<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (21) MARGARET LEINEN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (22) STANLEY MALOY<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (23) BERNARD LINDSEY<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (24) AAD DEN ELZEN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (25) TOM MILLIKAN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (26) MORTEN LUND<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (27) JAMIE GARRETT<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (28) DAVID GRAHAM<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (29) MIKE FIRENZE<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (30) LARRY GOLDENHERSH<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (31) SCOTT PETERS<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (32) JARED QUIENT<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (33) BRENDAN REED<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (34) TIM HEMIG<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (35) ROBERT HUBBARD<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (36) JOHN LORMON<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (37) SANJEET PANDIT<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (38) EDDIE PRICE<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (39) LAUREE SABHA<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (40) MICHAEL SULLIVAN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (41) NICK SERRANO<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (42) KATHY VALVERDE<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (43) TODD THAYER<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (44) JIM WARING<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (45) MEENA WESTFORD<br>BOARD MEMBER | 0.30<br>1.00 | X | | | | | | 0 | 0 | 0 |
| (46) BILL WALTON<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (47) PETER ZAHN<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (48) MICHAEL ZUCCHET<br>BOARD MEMBER | 0.30 | X | | | | | | 0 | 0 | 0 |
| (49) SHANNON BRESNAHAN<br>VICE PRESIDENT | 40.00<br>5.00 | | | X | | | | 54,937 | 2,496 | 7,149 |
| (50) MARTIN TUROCK<br>PROJECT MANAGER | 34.00 | | | | | X | | 117,366 | 0 | 0 |
| **1b Sub-Total** ▶ | | | | | | | | | | |
| **c Total from continuation sheets to Part VII, Section A** ▶ | | | | | | | | | | |
| **d Total (add lines 1b and 1c)** ▶ | | | | | | | | 361,054 | 13,746 | 14,406 |

**2** Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 2

| | | Yes | No |
|---|---|---|---|
| **3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* | **3** | | No |
| **4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual* | **4** | Yes | |
| **5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* | **5** | | No |

## Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII . . . . . ☐

| | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
|---|---|---|---|---|---|
| **Contributions, Gifts, Grants and Other Similar Amounts** | | | | | |
| 1a Federated campaigns | 1a | | | | |
| b Membership dues | 1b | | | | |
| c Fundraising events | 1c | | | | |
| d Related organizations | 1d | | | | |
| e Government grants (contributions) | 1e | 156,420 | | | |
| f All other contributions, gifts, grants, and similar amounts not included above | 1f | 6,173 | | | |
| g Noncash contributions included in lines 1a - 1f:$ | 1g | | | | |
| h **Total.** Add lines 1a-1f ▶ | | 162,593 | | | |
| **Program Service Revenue** | Business Code | | | | |
| 2a ENERGY INNOVATION | 900099 | 896,325 | 896,325 | | |
| b MEMBERSHIP DUES | 900099 | 258,600 | 258,600 | | |
| c K-12 WORKING GROUP | 900099 | 6,640 | 6,640 | | |
| d | | | | | |
| e | | | | | |
| f All other program service revenue. | | | | | |
| g **Total.** Add lines 2a–2f ▶ | 1,161,565 | | | | |
| 3 Investment income (including dividends, interest, and other similar amounts) ▶ | | | | | |
| 4 Income from investment of tax-exempt bond proceeds ▶ | | | | | |
| 5 Royalties ▶ | | | | | |
| | (i) Real | (ii) Personal | | | |
| 6a Gross rents | 6a | | | | |
| b Less: rental expenses | 6b | | | | |
| c Rental income or (loss) | 6c | | | | |
| d Net rental income or (loss) ▶ | | | | | |
| | (i) Securities | (ii) Other | | | |
| 7a Gross amount from sales of assets other than inventory | 7a | | | | |
| b Less: cost or other basis and sales expenses | 7b | | | | |
| c Gain or (loss) | 7c | | | | |
| d Net gain or (loss) ▶ | | | | | |
| **Other Revenue** | | | | | |
| 8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 | 8a | | | | |
| b Less: direct expenses | 8b | | | | |
| c Net income or (loss) from fundraising events ▶ | | | | | |
| 9a Gross income from gaming activities. See Part IV, line 19 | 9a | | | | |
| b Less: direct expenses | 9b | | | | |
| c Net income or (loss) from gaming activities ▶ | | | | | |
| 10a Gross sales of inventory, less returns and allowances | 10a | | | | |
| b Less: cost of goods sold | 10b | | | | |
| c Net income or (loss) from sales of inventory ▶ | | | | | |
| Miscellaneous Revenue | Business Code | | | | |
| 11a REFUNDS/DISCOUNTS | 900099 | 1,505 | | | 1,505 |
| b | | | | | |
| c | | | | | |
| d All other revenue | | | | | |
| e **Total.** Add lines 11a–11d ▶ | | 1,505 | | | |
| 12 **Total revenue.** See instructions ▶ | | 1,325,663 | 1,161,565 | 0 | 1,505 |

## 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).

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|---|---|---|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 2,157 | | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 288,178 | | | |
| 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 | 294,954 | | | |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 Other employee benefits | 9,771 | | | |
| 10 Payroll taxes | 37,758 | | | |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | | | | |
| c Accounting | 2,800 | | | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 19,609 | | | |
| 12 Advertising and promotion | 1,456 | | | |
| 13 Office expenses | 9,996 | | | |
| 14 Information technology | 2,037 | | | |
| 15 Royalties | | | | |
| 16 Occupancy | 15,125 | | | |
| 17 Travel | 220 | | | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | | | | |
| 23 Insurance | 7,061 | | | |
| 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.) | | | | |
| a ENERGY INNOVATION | 665,607 | | | |
| b PROGRAM EVENTS | 36,165 | | | |
| c GRANTS & CONTRACTS | 24,181 | | | |
| d MISCELLANEOUS | 1,920 | | | |
| e All other expenses | 717 | | | |
| 25 **Total functional expenses.** Add lines 1 through 24e | 1,419,712 | | | |
| 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). | | | | |

## Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX . . . . . ☐

| | | | (A) Beginning of year | | (B) End of year |
|---|---|---|---|---|---|
| Assets | 1 | Cash–non-interest-bearing | 555,296 | 1 | 421,557 |
| | 2 | Savings and temporary cash investments | | 2 | |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | | 8 | |
| | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a | | | |
| | b | Less: accumulated depreciation — 10b | | 10c | |
| | 11 | Investments—publicly traded securities | | 11 | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 12 | |
| | 13 | Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | 40,356 | 15 | 0 |
| | 16 | **Total assets.** Add lines 1 through 15 (must equal line 33) | 595,652 | 16 | 421,557 |
| Liabilities | 17 | Accounts payable and accrued expenses | 675 | 17 | 0 |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 | Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D | | 25 | |
| | 26 | **Total liabilities.** Add lines 17 through 25 | 675 | 26 | 0 |
| Net Assets or Fund Balances | | **Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.** | | | |
| | 27 | Net assets without donor restrictions | 594,977 | 27 | 421,557 |
| | 28 | Net assets with donor restrictions | | 28 | |
| | | **Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.** | | | |
| | 29 | Capital stock or trust principal, or current funds | | 29 | |
| | 30 | Paid-in or capital surplus, or land, building or equipment fund | | 30 | |
| | 31 | Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| | 32 | Total net assets or fund balances | 594,977 | 32 | 421,557 |
| | 33 | Total liabilities and net assets/fund balances | 595,652 | 33 | 421,557 |

## Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . . ☐

| | | | |
|---|---|---|---|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 1,325,663 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 1,419,712 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -94,049 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 594,977 |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | -79,371 |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 0 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column | 10 | 421,557 |

## Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . . ☐

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other _____<br>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 | | No |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:<br>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | | No |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:<br>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis | | | |
| c | If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | | No |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | 3b | | |

## Additional Data

Return to Form

**Software ID:**

**Software Version:**

**Form 990, Special Condition Description:**

| Special Condition Description |
| --- |

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

# Schedule of Contributors

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

OMB No. 1545-0047

**2020**

| Name of the organization | **Employer identification number** |
|---|---|
| CLEANTECH SAN DIEGO ASSOCIATION | 26-1584423 |

**Organization type** (check one):

| **Filers of:** | **Section:** |
|---|---|
| Form 990 or 990-EZ | ☐ 501(c)( ) (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, contributions totaling $5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

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

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

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

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

Name of organization
CLEANTECH SAN DIEGO ASSOCIATION

**Employer identification number**
26-1584423

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

**Contributors**

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|---|---|---|
| RESTRICTED | , | $ RESTRICTED | ☐ Person<br>☐ Payroll<br>☐ Noncash<br>(Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | $ | ☐ Person<br>☐ Payroll<br>☐ Noncash<br>(Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | $ | ☐ Person<br>☐ Payroll<br>☐ Noncash<br>(Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | $ | ☐ Person<br>☐ Payroll<br>☐ Noncash<br>(Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | $ | ☐ Person<br>☐ Payroll<br>☐ Noncash<br>(Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| - | | $ | ☐ Person<br>☐ Payroll<br>☐ Noncash<br>(Complete Part II for noncash contributions.) |

Name of organization
CLEANTECH SAN DIEGO ASSOCIATION

**Employer identification number**
26-1584423

**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 |
|---|---|---|---|
| - | | $ | |

| (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 |
|---|---|---|---|
| - | | $ | |

Name of organization
CLEANTECH SAN DIEGO ASSOCIATION

**Employer identification number**
26-1584423

**Part III** ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.) ▶ $ _____**

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP 4 | Relationship of transferor to transferee |
|---|---|
| | |

## Additional Data

Return to Form

**Software ID:**

**Software Version:**

**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" on Form 990, Part IV, line 23.**
**▶ Attach to Form 990.**
**▶ Go to *www.irs.gov/Form990* for instructions and the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Name of the organization
CLEANTECH SAN DIEGO ASSOCIATION

**Employer identification number**
26-1584423

## Part I Questions Regarding Compensation

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

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

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

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

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|---|---|---|---|---|---|---|---|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| 1 JASON ANDERSON<br>PRESIDENT & CEO | (i) | 188,751 | 0 | 0 | 0 | 7,257 | 196,008 | 0 |
| | (ii) | 11,250 | 0 | 0 | 0 | 0 | 11,250 | 0 |
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## Part III Supplemental Information

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

| Return Reference | Explanation |
|---|---|
| PART I, LINE 3 | THE COMPENSATION OF OFFICERS IS DISCUSSED AND APPROVED BY THE CLEANTECH SAN DIEGO EXECUTIVE COMMITTEE. THE COMMITTEE CONSIDERS COMPARABILITY DATA AND COMPENSATION/SALARY STUDIES; FURTHER DUE DILIGENCE MAY INVOLVE REVIEW OF OTHER SIMILAR NON-PROFIT ORGANIZATIONS. |

## Additional Data

Return to Form

**Software ID:**

**Software Version:**

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

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Name of the organization
CLEANTECH SAN DIEGO ASSOCIATION

**Employer identification number**
26-1584423

| Return Reference | Explanation |
|---|---|
| FORM 990, PART VI, SECTION A, LINE 6 | CLEANTECH SAN DIEGO ASSOCIATION HAS MEMBERS. THE CORPORATION HAS NO VOTING MEMBERS WITHIN THE MEANING OF THE CALIFORNIA NONPROFIT CORPORATION LAW. THIS CORPORATION'S BOARD MAY, IN ITS DISCRETION, ADMIT INDIVIDUALS TO ONE (1) OR MORE CLASSES OF NONVOTING MEMBERS; THE CLASS OR CLASSES SHALL HAVE SUCH RIGHTS AND OBLIGATIONS AS THE BOARD FINDS APPROPRIATE. |
| FORM 990, PART VI, SECTION B, LINE 11B | THE FORM 990 REVIEW PROCESS INVOLVES ISSUANCE BY AN INDEPENDENT TAX FIRM AND REVIEWED BY THE AUDIT COMMITTEE, CHAIR AND CFO. |
| FORM 990, PART VI, SECTION B, LINE 12C | ALL BOARD MEMBERS ARE REQUESTED TO DISCLOSE ANY POTENTIAL OR CURRENT CONFLICTS OF INTEREST. |
| FORM 990, PART VI, SECTION B, LINE 15 | THE COMPENSATION OF OFFICERS IS DISCUSSED AND APPROVED BY THE CLEANTECH SAN DIEGO EXECUTIVE COMMITTEE. THE COMMITTEE CONSIDERS COMPARABILITY DATA AND COMPENSATION/SALARY STUDIES; FURTHER DUE DILIGENCE MAY INVOLVE REVIEW OF OTHER SIMILAR NON-PROFIT ORGANIZATIONS. |
| FORM 990, PART VI, SECTION C, LINE 19 | FINANCIAL STATEMENTS ARE ON OUR WEBSITE AND PUBLISHED IN OUR ANNUAL REPORT. OTHER DOCUMENTS ARE MADE AVAILABLE UPON REQUEST. |

## Additional Data

Return to Form

**Software ID:**

**Software Version:**

# SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

## Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
CLEANTECH SAN DIEGO ASSOCIATION

Employer identification number
26-1584423

**Part I** **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|---|---|---|---|---|---|
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**Part II** **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

| (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 | (g) Section 512(b)(13) controlled entity? Yes | No |
|---|---|---|---|---|---|---|---|
| **(1)** CLEANTECH EDUCATION FOUNDATION<br>PO BOX 178769<br><br>SAN DIEGO, CA 92177<br>26-1584449 | COMMUNITY OUTREACH AND EDUCATION FOR CLEANTECH INDUSTRY. | CA | 501(C)(3) | LINE 10 | | | No |
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**Part III** **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (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) Disproprtionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | Yes | No | | Yes | No | |
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**Part IV** **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | (i) Section 512(b)(13) controlled entity? | |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | Yes | No |
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**Part V** **Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

| | | Yes | No |
|---|---|---|---|
| **1** During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | | |
| **a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity | **1a** | | No |
| **b** Gift, grant, or capital contribution to related organization(s) | **1b** | | No |
| **c** Gift, grant, or capital contribution from related organization(s) | **1c** | | No |
| **d** Loans or loan guarantees to or for related organization(s) | **1d** | | No |
| **e** Loans or loan guarantees by related organization(s) | **1e** | | No |
| **f** Dividends from related organization(s) | **1f** | | No |
| **g** Sale of assets to related organization(s) | **1g** | | No |
| **h** Purchase of assets from related organization(s) | **1h** | | No |
| **i** Exchange of assets with related organization(s) | **1i** | | No |
| **j** Lease of facilities, equipment, or other assets to related organization(s) | **1j** | | No |
| **k** Lease of facilities, equipment, or other assets from related organization(s) | **1k** | | No |
| **l** Performance of services or membership or fundraising solicitations for related organization(s) | **1l** | | No |
| **m** Performance of services or membership or fundraising solicitations by related organization(s) | **1m** | | No |
| **n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | **1n** | Yes | |
| **o** Sharing of paid employees with related organization(s) | **1o** | Yes | |
| **p** Reimbursement paid to related organization(s) for expenses | **1p** | | No |
| **q** Reimbursement paid by related organization(s) for expenses | **1q** | Yes | |
| **r** Other transfer of cash or property to related organization(s) | **1r** | | No |
| **s** Other transfer of cash or property from related organization(s) | **1s** | | No |

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

| **(a)** Name of related organization | **(b)** Transaction type (a-s) | **(c)** Amount involved | **(d)** Method of determining amount involved |
|---|---|---|---|
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**Part VI** **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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.

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (e) Are all partners section 501(c)(3) organizations? | | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproprtionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Yes | No | | | Yes | No | | Yes | No | |
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## Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. (see instructions).

| Return Reference | Explanation |
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Schedule R (Form 990) 2020

## Additional Data

Return to Form

**Software ID:**

**Software Version:**