Extended to February 18, 2020

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A F	or the	2018 calendar year, or tax year beginning AP	R 1, 2018 and	ending N	IAR 31, 2019					
B c	heck if oplicable:	C Name of organization Center for Climate and 1	Energy		D Employer identifi	cation number				
	Address		- 31							
	Name change	Doing business as C2ES				892252				
	Initial return	Number and street (or P.O. box if mail is not delive		Room/suite	E Telephone numbe					
	Final return/	3100 Clarendon Blvd, Su	ite 800		(703) 516-4146					
	termin- ated Amende	City or town, state or province, country, and ZI	P or foreign postal code		G Gross receipts \$	5,435,877.				
	return Applica	ALITHGUOH, VA ZZZUL			H(a) Is this a group re					
	tion pending	F Name and address of principal officer: NODE	rt Perciasepe			s? Yes X No				
		same as C above	4		H(b) Are all subordinates in					
			(insert no.) 4947(a)(1)	or 527	1 '	list. (see instructions)				
		e: NWW.C2ES.ORG Organization: X Corporation Trust Asso	ociation Other	1. 1/2	H(c) Group exemption					
		organization: X Corporation Trust Asso Summary	ociation Other	L Year	of formation: 1990	M State of legal domicile: DE				
		Briefly describe the organization's mission or most si	anificant activities: TO ac	dvance	strong nol	icy and				
e		action to reduce greenhouse								
Activities & Governance	_	Check this box if the organization disconti								
veri		lumber of voting members of the governing body (P	•		1	14				
Ğ		lumber of independent voting members of the gove				13				
∞ ∞		otal number of individuals employed in calendar year				23				
ţį		otal number of volunteers (estimate if necessary)				13				
ξį		otal unrelated business revenue from Part VIII, colu				0.				
Ā		let unrelated business taxable income from Form 99				31,200.				
		tet uniciated business taxable moome nom i om oc	70 1, 11110 00		Prior Year	Current Year				
	8 (Contributions and grants (Part VIII, line 1h)			3,939,653.	4,613,055.				
Jue					616,112.	713,214.				
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, a			972.	13,838.				
Be		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9			29,520.	89,260.				
		otal revenue - add lines 8 through 11 (must equal Pa			4,586,257.	5,429,367.				
		Grants and similar amounts paid (Part IX, column (A)			0.	0.				
			paid to or for members (Part IX, column (A), line 4)							
		Salaries, other compensation, employee benefits (Pa			0. 2,572,337.	2,785,326.				
Expenses		Professional fundraising fees (Part IX, column (A), line			0.	0.				
ben	b T	otal fundraising expenses (Part IX, column (D), line 2	₂₅₎ ▶ 207,53	33.						
Ě		Other expenses (Part IX, column (A), lines 11a-11d, 1			1,744,501.	2,046,426.				
		otal expenses. Add lines 13-17 (must equal Part IX,			4,316,838.	4,831,752.				
	19 F	Revenue less expenses. Subtract line 18 from line 12			269,419.	597,615.				
or				Ве	ginning of Current Year	End of Year				
sets	20 T	otal assets (Part X, line 16)			2,515,679.	3,637,369.				
ASS	21 T	otal liabilities (Part X, line 26)			1,033,851.	1,557,926.				
Net Assets or Fund Balances	22 N	let assets or fund balances. Subtract line 21 from lir	ne 20		1,481,828.	2,079,443.				
	rt II	Signature Block								
	-	ies of perjury, I declare that I have examined this return, in				y knowledge and belief, it is				
true,	correct	and complete. Declaration of preparer (other than officer)	is based on all information of wh	ich preparer	has any knowledge.					
		Signature of officer			Data					
Sign		, ,			Date					
Her	e	Robert Perciasepe, Press	ident							
		Type or print name and title			Data Jakot F	DTIN				
р		** ' '	Preparer's signature] '	Date Check C	PTIN				
Paid		Oonald Miller	nrr D A		self-employ					
Prep		Firm's name Hertzbach & Compan			Firm's EIN ▶	52-1158459				
Use	UIIIY	Firm's address 1530 Wilson Blvd,			Di / 7	03 \ 351 6600				
		Arlington, VA 222			Phone no. (/	03) 351-6600				
May	the IR	S discuss this return with the preparer shown above	e? (see instructions)			X Yes No				

Check if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission: To advance strong policy and action to reduce greenho emissions, promote clean energy, and strengthen resil impacts. 2 Did the organization undertake any significant program services during the year which were not listed on to prior Form 990 or 990 E27 1 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 service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to revenue, if any, for each program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to revenue, if any, for each program service revenue, if any, for each program service reported. 4a (Cook) (Expenses 1, 2538, 315. Nothing grants of 8) Domestic Policy: CZES works with communities and busing the policy of the policy of the policy in the policy of the	Form	990 (2018) Solutions, Inc.	54-1892252	Page 2
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)	
TE TOTAL PROGRAM SERVICE EXPENSES F	4e	Total program service expenses ► 4,090,412.		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
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			
	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,	ا		
•	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? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
•	Schedule D, Part III	├ ゜		122
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?			x
	If "Yes," complete Schedule D, Part IV	9		
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.			
а	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
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	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		Х
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	
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		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		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	_		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	_ ``		<u></u>
.5		18		x
19	1c and 8a? If "Yes," complete Schedule G, Part II	10		
13		19		x
20-	complete Schedule G, Part III	20a		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		 ^
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			x
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		

Center for Climate and Energy
Form 990 (2018) Solutions, Inc.

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		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	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes."			
	complete Schedule L. Part II	26		х
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	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,	200		
·	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	25		
30		30		х
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	-30		
01		31		X
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	,	32		х
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34		34		х
25.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
b		35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
50	, , , , , , , , , , , , , , , , , , , ,	36		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31		
38		38	Х	
Pai	Note. All Form 990 filers are required to complete Schedule O † V Statements Regarding Other IRS Filings and Tax Compliance	30	- 43	
	Check if Schedule O contains a response or note to any line in this Part V			
	·		Yes	No
1.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		162	140
	Enter the number reported in Box 3 of Form 1090. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
U		1c	Х	
	(gambling) winnings to prize winners?	_ 10		(2010)

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Center for Climate and Energy
Form 990 (2018) Solutions, Inc.

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

	to a compliance (continued)				Vaa	Na			
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	I	1		Yes	No			
Zu	filed for the calendar year ending with or within the year covered by this return	2a	23						
h	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	х				
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e -file (see instructions								
За	Did the averagination have unrelated hydrogen areas in a second of \$1,000 an areas during the years.	,		За		Х			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule C			3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other a								
	financial account in a foreign country (such as a bank account, securities account, or other financial a		-	4a		Х			
b	If "Yes," enter the name of the foreign country:								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	ccoun	ts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?		5b		Х			
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	ınization solicit						
	any contributions that were not tax deductible as charitable contributions?			6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or	gifts						
	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a	X				
				7b	Х				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•		- .		v			
	to file Form 8282?	ı	Ι	7с		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	+2	70		Х			
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7e 7f		X			
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g					
	h If the organization received a contribution of qualified intellectual property, and the organization file a Form 1098-C?								
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?									
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b					
10	Section 501(c)(7) organizations. Enter:								
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							
11	Section 501(c)(12) organizations. Enter:		1						
а	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							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	I	, 	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(a)(20) qualified paper of the alth incurance issuers.	12b	l						
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			13a					
u	Note. See the instructions for additional information the organization must report on Schedule O.			100					
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							
С	Enter the amount of reserves on hand	13c							
				14a		Х			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner								
	excess parachute payment(s) during the year?			15		X			
	If "Yes," see instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incor	ne?	16		X			
	If "Yes," complete Form 4720, Schedule O.			Г-	990	(2018)			
				⊢∩rm	シンひ	(ZUJX)			

Form 990 (2018)

54-1892252 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 14 **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. 13 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 Х 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶VA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Another's website X Own website X Upon request ___ Other (explain in Schedule O) 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. State the name, address, and telephone number of the person who possesses the organization's books and records

Melena Nelson - 703-516-4146

3100 Clarendon Blvd, Suite 800, Arlington,

orm 990 (2018) Solutions,

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, 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.

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

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

(A)	(B)	(C)			Juli	(D)	(E)	(F)		
Name and Title	Average	Position (do not check more than one			than o		Reportable	Estimated		
	hours per week		box, unless person is both an officer and a director/trustee)					compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	r direc				peq		organization	(W-2/1099-MISC)	from the
	related	stee o	rustee		- 03	oensat		(W-2/1099-MISC)		organization
	organizations	ıal tru	onal t		ploye	ee com				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Robert Perciasepe	37.50	=	╘	0	<u>×</u>	Τ ω	4			
President		Х		Х				285,304.	0.	9,662.
(2) John Schmitz	1.00									
Director		Х						0.	0.	0.
(3) Theodore Roosevelt, IV	1.00									
Chair		Х						0.	0.	0.
(4) Frank Loy	1.00									
Director		Х						0.	0.	0.
(5) Leslie Carothers	1.00									
Director		Х						0.	0.	0.
(6) Ann Klee	1.00									
Director		Х						0.	0.	0.
(7) Jeffrey Williams	1.00]								
Director		Х						0.	0.	0.
(8) Kathleen Merrigan	1.00									
Director		Х						0.	0.	0.
(9) Trammel Crow	1.00	1							_	_
Director		Х						0.	0.	0.
(10) Cari Boyce	1.00	1							_	
Director		Х						0.	0.	0.
(11) Chuck Barlow	1.00	J							_	
Director		Х						0.	0.	0.
(12) David Hone	1.00	l								
Director	1 00	Х						0.	0.	0.
(13) James McGinnis	1.00	l							•	•
Director	1 00	Х						0.	0.	0.
(14) Brenda Mallory	1.00								•	•
Director	25 50	Х						0.	0.	0.
(15) Elliot Diringer	37.50	4			7.7			064 770	0	24 545
Executive Vice President	27 50				Х			264,770.	0.	34,545.
(16) Janet Peace	37.50	1			v			227 726	_	22 502
VP, Markets & Business Str	27 50	<u> </u>			Х			227,726.	0.	33,583.
(17) Brian Kelly Director of Development	37.50	1				x		121,960.	0.	1 527
832007 12-31-18	L	<u> </u>		l		Δ.	<u> </u>	121,300.	0.	4,527. Form 990 (2018)

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Form **990** (2018)

Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	st C		s (continued)				
(A) Name and title	(B) Average hours per week	box	not c	Posi heck i	more rson i	than of the state	n an	(D) Reportable compensation from	(E) Reportable compensatio from related	on	Esti amo	(F) mate ount o ther	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatior (W-2/1099-MIS		orga	m the nizati relate	e on ed
(18) John Gerlach Senior Communication Manager	37.50					х		125,192.		0.	12	, 02	21.
								1 004 050			0.4	2.	20
1b Sub-total c Total from continuation sheets to Part V							>	1,024,952.		0.		, 33	0.
d Total (add lines 1b and 1c) Total number of individuals (including but r							o re	1,024,952. eceived more than \$100,	000 of reportable	<u>0.</u>	94	, 33	<u> </u>
compensation from the organization											Ι,	Yes	5 No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s								highest compensated er			3		Х
4 For any individual listed on line 1a, is the standard related organizations greater than \$15											4	х	
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes." con	accrue comper	ısati	on fr	om	any	unre	elate	ed organization or individ	lual for services		5		Х
Section B. Independent Contractors 1 Complete this table for your five highest co	•									20200	tion from	<u> </u>	
the organization. Report compensation for	'-	-						the organization's tax y		Jensa			
(A) Name and business								(B) Description of s	ervices	C	(C) Compens		1
The Markham Group, LLC, 2 Suite 600, Washington, DO		t	NW	,				Consulting			136	, 83	35.
2 Total number of independent contractors (i	•	ot lir	nited	d to t			ted	above) who received mo	ore than				
\$100,000 of compensation from the organi	zation					L					Form 9	90 (2	2018)

Form 990 (2018) Solutio
Part VIII Statement of Revenue

		Check if Schedule O cont	aine a reenonee	or note to any lin	e in this Part VIII			
		Check if Schedule O conti	airis a response	or note to any iii	(A)	(B)	(C)	(D)
					Total revenue	Related or	Unrelated	l Revenué excluded
						exempt function	business	from tax under sections
						revenue	revenue	sections 512 - 514
ıts	1 a	Federated campaigns	1a					
rar	b	Membership dues	1b	989,500.				
e, E	С	Fundraising events	1c					
ifts		Related organizations						
nig.		Government grants (contributi		516,933.				
Contributions, Gifts, Grants and Other Similar Amounts		All other contributions, gifts, gran	, 	,				
e ţi	•	similar amounts not included above		106,622.				
들	~		,	01 000				
o d	_	Noncash contributions included in lines			4,613,055.			
O a	n	Total. Add lines 1a-1f						
		G		Business Code		F07 167		
Se		Sponorship		900099	527,167.	527,167.		
<u>₹</u> 9	b	Registration		900099	186,047.	186,047.		<u> </u>
Program Service Revenue	С							
ar eve	d							
go H	е							
Ā	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f			713,214.			
	3	Investment income (including			-			
		other similar amounts)			20,348.			20,348.
	4	Income from investment of tax			,			1
	5	Royalties						
	3	noyanes	(i) Real	(ii) Personal				
	•	0	70,908.	(II) Personal				
		Gross rents	0.					
		Less: rental expenses						
		Rental income or (loss)	70,908.		70.000	TO 000		
		, ,			70,908.	70,908.		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses	47.	6,463.				
	С	Gain or (loss)	-47.	6,463. -6,463.				
	d	Net gain or (loss)			-6,510.	-6,463.		-47.
		Gross income from fundraising						
nue		including \$	of					
ě		contributions reported on line						
Other Revenu		Part IV, line 18	•					
Þe	h	Less: direct expenses						
ŏ		Net income or (loss) from fund						
		Gross income from gaming ac	-					
	9 а							
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam	-	······				
	10 a	Gross sales of inventory, less						
		and allowances						
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenue	e	Business Code				
	11 a	Miscellaneous I	ncome	900099	18,352.	18,352.		
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d			18,352.			
	12	Total revenue See instructions		······	5 429 367	796 011.	0.	20.301.

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	r organizations must con	nplete column (A).	
	Check if Schedule O contains a respons	7.5.3			<u>X</u>
	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 domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			440 000	
	trustees, and key employees	897,297.	749,392.	118,333.	29,572
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	1,532,034.	1,154,864.	249,596.	127,574
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	49,969.	49,969.		
9	Other employee benefits	154,297.	101,859.	37,758.	14,680
10	Payroll taxes	151,729.	125,070.	19,196.	7,463
11	Fees for services (non-employees):				
а	Management				
b	Legal	4,699.	793.	3,859.	47 388
	Accounting	19,636.	6,500.	12,748.	388
	Lobbying				
е					
f	Investment management fees				
g					
	column (A) amount, list line 11g expenses on Sch O.)	588,796.	576,073.	12,130.	593
12	Advertising and promotion	8,000.	8,000.		
13	Office expenses	48,054.	42,172.	4,307.	1,575
14	Information technology	48,868.	45,503.	2,423.	1,575 942
15	Royalties	-			
16	Occupancy	415,004.	355,027.	43,214.	16,763
17	Travel	211,742.	203,542.	4,893.	3,307
 18	Payments of travel or entertainment expenses	,	, .	,	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	412,452.	397,586.	14,009.	857
20	Interest	,	,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,720.	3,891.	597.	232
23		10,803.	6,016.	4,428.	359
24	Other expenses. Itemize expenses not covered	20,0001	0,0201	2,2201	333
2 -1	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.) Cost-share Reimbursemen	158,080.	158,080.		
	D. J. 1 J	44,462.	40,863.	2,586.	1,013
b	December of Contract of the co	38,473.	37,431.	750.	292
C	0.1	30,585.	26,031.	2,798.	1,756
d		2,052.	1,750.	182.	1,756
	All other expenses	4,831,752.	4,090,412.		207,533
<u>25</u>	Total functional expenses. Add lines 1 through 24e	4,031,/34.	4,030,414.	533,807.	407,533
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)				Earm 990 (201

Form **990** (2018)

Pai	LA	balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			198,733.	1	160,135.
	2	Savings and temporary cash investments			1,964,391.	2	1,967,272.
	3	Pledges and grants receivable, net			13,852.	3	726.
	4	Accounts receivable, net		232,133.	4	1,274,762.	
	5	Loans and other receivables from current and for	fficers, directors,				
		trustees, key employees, and highest compensa	ated em	ployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali	rsons (as defined under				
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
ţ		employees' beneficiary organizations (see instr).	ete Part II of Sch L		6		
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			71,585.	9	42,742.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	117,300.			
	b	Less: accumulated depreciation	10b	7,056.	6,463.	10c	110,244.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 3	11			12	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		28,522.	15	81,488.	
	16	Total assets. Add lines 1 through 15 (must equ	2,515,679.	16	3,637,369.		
	17	Accounts payable and accrued expenses	281,777.	17	694,335.		
	18	Grants payable			18		
	19	Deferred revenue			560,750.	19	592,000.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
S	22	Loans and other payables to current and former	officer	s, directors, trustees,			
Ě		key employees, highest compensated employee	,				
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	10.00
	24	Unsecured notes and loans payable to unrelated	d third p	parties		24	10,862.
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	3 17-24)	. Complete Part X of	101 204		060 500
		Schedule D			191,324.	25	260,729. 1,557,926.
	26	Total liabilities. Add lines 17 through 25			1,033,851.	26	1,557,926.
		Organizations that follow SFAS 117 (ASC 958		k here ▶ 🔼 and			
es		complete lines 27 through 29, and lines 33 an			F24 F14		470 554
anc	27	Unrestricted net assets			534,514.	27	479,554.
Bala	28	Temporarily restricted net assets		·····	947,314.	28	1,599,889.
힏	29					29	
Ξ		Organizations that do not follow SFAS 117 (A	3), check here 🕨 📖				
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			1 401 000	32	0.050.440
Z	33	Total net assets or fund balances			1,481,828.	33	2,079,443.
	34	Total liabilities and net assets/fund balances .			2,515,679.	34	3,637,369.

LOIII	1990 (2016) SOLUCIONS, INC.	<u> </u>	107223	4	Pag	e '2
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,4			
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,8			
3	Revenue less expenses. Subtract line 2 from line 1	3			,61	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,4	81	,82	28.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain 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 33,					
_	column (B))	10	2,0	<u>79</u>	, 44	<u>13.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
				Y	es	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	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				τ,	
	review, or compilation of its financial statements and selection of an independent accountant?			c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	-				37
	Act and OMB Circular A-133?			а	_	<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ed aud	I .			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3	b		

SCHEDULE A

(Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047

2018
Open to Public

Inspection

Center for Climate and Energy **Employer identification number** Name of the organization 54-1892252 Solutions Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Center for Climate and Energy Schedule A (Form 990 or 990-EZ) 2018 Solutions, Inc. Part III Support Schedule for Organization Company Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and			. ,	. ,		.,
·	membership fees received. (Do not						
	include any "unusual grants.")	3117408.	3413721.	3948526.	3939653.	4613055.	19032363.
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	3117408.	3413721.	3948526.	3939653.	4613055.	19032363.
	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)						5224789.
6	Public support. Subtract line 5 from line 4.						13807574.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	3117408.	3413721.	3948526.	3939653.	4613055.	19032363.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	3,133.	1,411.	1,006.	972.	20,348.	26,870.
9	Net income from unrelated business	,	•	•		•	,
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						19059233.
	Gross receipts from related activities,	etc. (see instructio	ns)			12	
	First five years. If the Form 990 is for						
	organization, check this box and stop						
Sec	ction C. Computation of Public		centage				,
14	Public support percentage for 2018 (li	ne 6, column (f) div	vided by line 11, co	olumn (f))		14	72.45 %
	Public support percentage from 2017					15	73.81 %
	33 1/3% support test - 2018. If the o					ore, check this box	x and
	stop here. The organization qualifies a						
b	33 1/3% support test - 2017. If the o						
	and stop here. The organization quali	-					
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact	_					
	meets the "facts-and-circumstances" t				=	-	
b	10% -facts-and-circumstances test						
-	more, and if the organization meets th	_					
	organization meets the "facts-and-circ				-		ightharpoons
18	Private foundation. If the organization		-	•			······································
	to roaniaation in the organization			., ,	,		

Schedule A (Form 990 or 990-EZ) 2018

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	, , , , , , , , , , , , , , , , , , , ,					
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 performed, 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 business 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						
7	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ı	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.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income (less section 511 taxes) from businesses						
	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 VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First five years. If the Form 990 is for	•		*	•	. , . ,	
<u>C-</u>	check this box and stop here						>
	ction C. Computation of Publi		<u>_</u>			T I	
	Public support percentage for 2018 (I					15	<u>%</u>
16	Public support percentage from 2017					16	%
	ction D. Computation of Inves			40		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	<u>%</u>
19	a 33 1/3% support tests - 2018. If the						. .
ı	more than 33 1/3%, check this box ar 33 1/3% support tests - 2017. If the						
	line 18 is not more than 33 1/3%, che	ck this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	orted organization	
20	Private foundation If the organization	n did not chock a	hay on line 14 10	or 10h chock th	nic how and coo inc	etructions	ightharpoonup

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	За		
	3b		
	- CL		
	3с		
	40		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	7		
	8		
	9a		
	9b		
	9c		
	30		
	10a		
	10b		
- 0	90 or 90	n_E7\	2012

Par	T IV Supporting Organizations (continued)			
	•		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1		
Seci	tion D. All Type III Supporting Organizations		V	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	_		
-	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)	<u> </u>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	OL		
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If "Ves " describe in Part VI the role played by the organization in this regard	3b		

Pai	Type III Non-Functionally integrated 509(a)(3) Supporting	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	Nov. 20, 1970 (explain in F	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must c	omplete Sec	ctions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly integrate	d Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions).

Par	t V	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - E	Distributions		,	Current Year
1	Amoun	ts paid to supported organizations to accomplish exer	mpt purposes		
2	Amoun	ts paid to perform activity that directly furthers exemp	t purposes of supported		
	organiz	ations, in excess of income from activity			
3	Adminis	strative expenses paid to accomplish exempt purpose	s of supported organizations	3	
4	Amoun	ts paid to acquire exempt-use assets			
5	Qualifie	d set-aside amounts (prior IRS approval required)			
6	Other d	istributions (describe in Part VI). See instructions.			
7	Total a	nnual distributions. Add lines 1 through 6.			
8	Distribu	tions to attentive supported organizations to which th	e organization is responsive		
	(provide	e details in Part VI). See instructions.			
9		table amount for 2018 from Section C, line 6			
10	Line 8 a	amount divided by line 9 amount			
Secti	ion E - D	Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distribu	table amount for 2018 from Section C, line 6			
2	Underd	istributions, if any, for years prior to 2018 (reason-			
	able ca	use required- explain in Part VI). See instructions.			
3	Excess	distributions carryover, if any, to 2018			
a	From 2	013			
b	From 2	014			
С	From 2	015			
d	From 2	016			
е	From 2	017			
f	Total o	f lines 3a through e			
g	Applied	to underdistributions of prior years			
h	Applied	to 2018 distributable amount			
i_		er from 2013 not applied (see instructions)			
j_		der. Subtract lines 3g, 3h, and 3i from 3f.			
4		itions for 2018 from Section D,			
	line 7:	\$			
		to underdistributions of prior years			
		to 2018 distributable amount			
		der. Subtract lines 4a and 4b from 4.			
5		ing underdistributions for years prior to 2018, if			
	•	btract lines 3g and 4a from line 2. For result greater			
6		ro, explain in Part VI. See instructions.			
0		ing underdistributions for 2018. Subtract lines 3h from line 1. For result greater than zero, explain in			
		, ,			
7		See instructions. distributions carryover to 2019. Add lines 3j			
•	and 4c.	- 1			
8		own of line 7:			
		from 2014			
		from 2015			
		from 2016			
		from 2017			
		from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Center for Climate and Energy

Schedule A	(Form 990 or 990-EZ) 2018 So	utions,	Inc.	52	54-1892252 Page 8
Part VI	Supplemental Information Part IV, Section A, lines 1, 2, 3b,	n. Provide the 3c, 4b, 4c, 5a, and 3; Part IV,	e explanations require 6, 9a, 9b, 9c, 11a, 1 Section E, lines 1c, 2	1b, and 11c; Part IV, Section B, a, 2b, 3a, and 3b; Part V, line 1	e 17a or 17b; Part III, line 12; , lines 1 and 2; Part IV, Section C, ; Part V, Section B, line 1e; Part V,
	(See Instructions.)				

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

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

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

rax) (see separate instructions), then				
 Section 501(c)(4), (5), or (6) organization Center 		Enonerr	Emr	oloyer identification number
	for Climate and	Energy	Emi	54-1892252
Part I-A Complete if the or	ons, Inc. ganization is exempt und	ler section 501(c)	or is a section 527 or	rganization
Turt 171 Complete ii ale or	gamzation is exempt and	101 00011011 001(0)	01 10 4 00011011 021 01	gamzatiom
1 Provide a description of the organi	ization's direct and indirect politic	cal campaign activities i	in Part IV	
2 Political campaign activity expend	•		>	¢
3 Volunteer hours for political campa				Ψ
Volunteer riedro for political earnipe	aigh douvidos			
Part I-B Complete if the or	ganization is exempt und	ler section 501(c)(3).	
1 Enter the amount of any excise tax	c incurred by the organization un	der section 4955	>	\$
2 Enter the amount of any excise tax	c incurred by organization manag	gers under section 4955		\$
3 If the organization incurred a section	on 4955 tax, did it file Form 4720) for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.				- \(0\)
Part I-C Complete if the or	·		<u> </u>	,, ,
1 Enter the amount directly expende				\$
2 Enter the amount of the filing orga				
exempt function activities				\$
3 Total exempt function expenditure			,	•
line 17b				
4 Did the filing organization file Form				
5 Enter the names, addresses and e made payments. For each organiz			•	• •
contributions received that were p	·			•
political action committee (PAC). It			•	no oogregatou tana or a
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
(a) Namo	(5) / (44) 655	(0) 2.111	filing organization's	contributions received and
			funds. If none, enter -0-	
				delivered to a separate political organization.
				If none, enter -0
	1	1	1	1

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

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Part II-A Complete if the org section 501(h)).	janization is exen	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under
A Check ▶ ☐ if the filing organiza	ation belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and share	re of excess lobbying e	expenditures).			
B Check ▶ ☐ if the filing organiza	ation checked box A ar	nd "limited control" pro	visions apply.		
	its on Lobbying Exper ditures" means amou	nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influ	uence a legislative bod	ly (direct lobbying)		2,725.	
c Total lobbying expenditures (add li	nes 1a and 1b)			2,725.	
d Other exempt purpose expenditure	es			4,758,710.	
e Total exempt purpose expenditure	es (add lines 1c and 1d)		4,761,435.	
f Lobbying nontaxable amount. Enter	er the amount from the	e following table in both	n columns.	388,072.	
If the amount on line 1e, column (a) o	or (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	0,000 \$100,00	00 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	,000,000 \$225,00	00 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (en	nter 25% of line 1f)			97,018.	
h Subtract line 1g from line 1a. If zer	o or less, enter -0			0.	
i Subtract line 1f from line 1c. If zero	o or less, enter -0			0.	
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organiza	tion file Form 4720	_	
reporting section 4911 tax for this	year?				Yes No
(Some organizations t	hat made a section 50	eraging Period Under 01(h) election do not l ate instructions for lin	nave to complete all o	of the five columns be	low.
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	362,283.	347,967.	366,343.	388,072.	1,464,665.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,196,998.
c Total lobbying expenditures	5,831.	1,945.	6,332.	2,725.	16,833.
d Grassroots nontaxable amount	90,571.	86,992.	91,586.	97,018.	366,167.
e Grassroots ceiling amount (150% of line 2d, column (e))					549,251.
	I	1	i		

Schedule C (Form 990 or 990-EZ) 2018

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)).

501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(5).	he filing organization attempt to influence foreign, national, state, or iding any attempt to influence public opinion on a legislative matter gh the use of: ment (include compensation in expenses reported on lines 1c through 1i)? \$? he gislators, or the public? shed or broadcast statements? hizations for lobbying purposes? higislators, their staffs, government officials, or a legislative body? ns, seminars, conventions, speeches, lectures, or any similar means? he 1 cause the organization to be not described in section 501(c)(3)? hount of any tax incurred under section 4912 hount of any tax incurred by organization managers under section 4912 hount of any tax incurred by organization managers under section 4912 hount of any tax incurred by organization managers under section 4912 hount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(5), or section (90% or more) dues received nondeductible by members?	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? d Mailings to their organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, idil tille Form 4720 for this year? art III—A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 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? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 2 Did the organization agree to carry over lobbying expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 5 Day over from last year 5 Carryover from last year 6 Carryover from last year 7 Dues, assessments and similar amounts from members 9 Dues, assessments and similar amounts from members 1 Dues, assessments and similar amounts from members 2 Description 162(e) and if either (a) BOTH Part IIII—A, lines	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. 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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Center for Climate and Energy Solutions, Inc.

Employer identification number 54-1892252

Pai			Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Bener daviesa lands	(b) I and and emer deseants
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advised	funde
•	are the organization's property, subject to the organization's e	-	
6	Did the organization inform all grantees, donors, and donor ad		
Ū	for charitable purposes and not for the benefit of the donor or		
Pai			
1	Purpose(s) of conservation easements held by the organization		,
•	Preservation of land for public use (e.g., recreation or ed		cally important land area
	Protection of natural habitat	Preservation of a certific	·
	Preservation of open space	1 reservation of a certific	d historie structure
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of	a conservation easement on the last
_	day of the tax year.	ed conservation contribution in the form of	Held at the End of the Tax Year
a	Total number of conservation easements		
b			a.
	Number of conservation easements on a certified historic structure.		***
	Number of conservation easements included in (c) acquired af		
u	listed in the National Register	•	2d
3	Number of conservation easements modified, transferred, rele		
Ū	year >	assa, extinguished, or terminated by the or	gamzation daming 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		
·	violations, and enforcement of the conservation easements it I		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h		
_	>		
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcing conservation	n easements during the year
	▶ \$		
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)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	•	
	conservation easements.		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue statemer	t and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi	bition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	C 958), to report in its revenue statement ar	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
			. .
2	If the organization received or held works of art, historical trea		ain, provide
	the following amounts required to be reported under SFAS 11		
а	Revenue included on Form 990, Part VIII, line 1		• \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2018

832051 10-29-18

8 Solutions, In	C
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Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?		t III Organizations Maintaining C	ollections of Art	t, Histo	rical Tre	asures, or	Other	Sim	ilar Asse	ets (conti	nued)	ago
a Public exhibition d Loan or exchange programs b Scholarly research e Other	3	Using the organization's acquisition, accession	on, and other records	s, check	any of the f	ollowing that	are a sig	gnifica	nt use of it	s collection	items	3
b Scholarly research e Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assests to be sold to raise funder starter than to be maintained as part of the organization solection? Yes No Part W Scrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, Line 21. Is its the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?		(check all that apply):										
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parl XIII. 5 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? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1c	а	Public exhibition d Loan or exchange programs										
4 Provide a description of the organization scollections and explain how they further the organization's exempt purpose in Part XIII. 5 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 answered "Yes" on Form 990, Part N, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	b											
5 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? Escorow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part N, line 9, or reported an amount on Form 990, Part X, line 21. Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is is the organization and part XIII and complete the following table: Is is the organization and part XIII and complete the following table: Is is graphing balance	С	Preservation for future generations										
to be sold to raise funds rather than to be maintained as part of the organization's collection?	4	Provide a description of the organization's co	llections and explain	how the	ey further th	ne organizatio	n's exem	npt pu	rpose in Pa	art XIII.		
Eart Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets										
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?												No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Par			ete if the	organizatio	n answered "	Yes" on	Form	990, Part I	V, line 9, or		
on Form 990, Part X? Yes No No No F'Yes, "explain the arrangement in Part XIII and complete the following table: Amount Amo			· ·									
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	1a											٦
d Additions during the year e Distributions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?									l	Yes		_ No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (f) Three years back (e) Four years back (f) Three years back (f)	р	if "Yes," explain the arrangement in Part XIII	and complete the fol	lowing ta	abie:					Λ		
d Additions during the year e Distributions during the year 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2b If the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2c If the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2c If the organization answered "Yes" on Form 990, Part IV, line 10. Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Fo	_	Designing helence						<u> </u>	<u> </u>	Amour	Ι	
e Distributions during the year f felding balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b if "Ves," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (for the years back) (e) Four years back (for the years back) (for the years b	ا							. —				
f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes	u											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the explanation has been provided on Part XIII. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % c Temporarily restricted endowment % c Temporarily restricted endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3 Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization shasis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements 9, 5,32, 1,99, 9,333.	f											
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (al)) held as: a Board designated or quasi-endowment ▶										Ves		No
Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Call Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back		-							۱ ۱]
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years (
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment		·							ree vears ba	ck (e) Fou	r vears	back
b Contributions	1a	Beginning of year balance	,		,			.,				
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶												
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	С											
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	d											
and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	е											
g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶												
g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	f											
a Board designated or quasi-endowment ▶	g											
b Permanent endowment	2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g	, column (a)) held as:						
Temporarily restricted endowment ▶	а	Board designated or quasi-endowment		_%								
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements 9,532. 199. 9,333.	b	Permanent endowment	%									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other depreciation 1a Land b Buildings C Leasehold improvements 9 , 532 • 199 • 9 , 333 •	С	Temporarily restricted endowment ▶	%									
by: (i) unrelated organizations 3a(i) unrelated organizations 3a(ii) related organizations 3a(ii) related organizations 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) (c) Accumulated depreciation (d) Book value basis (investment) basis (other) 0		The percentages on lines 2a, 2b, and 2c should equal 100%.										
(ii) unrelated organizations (iii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements 3a(ii) 3a(ii) (b) Cost or Other (c) Accumulated depreciation (d) Book value 1 1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	3а	Are there endowment funds not in the posses	ssion of the organiza	tion that	are held ar	nd administere	ed for the	e orga	anization			
(ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements 3a(ii) 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land b Buildings c Leasehold improvements		-									Yes	No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements 9,532. 199. 9,333.		(i) unrelated organizations										
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value b Buildings c Leasehold improvements 9,532. 199. 9,333.												
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements 9,532. 199. 9,333.	b									3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Description of property (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value Buildings Leasehold improvements 9,532. 199. 9,333.	4 Do:			wment fu	ınds.							
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land b Buildings c Leasehold improvements 9,532. 199. 9,333.	Pai						5		_			
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements 9,532. 199. 9,333.												
b Buildings c Leasehold improvements		Description of property				I .			II.	(d) Boo	k valu	e
c Leasehold improvements 9,532. 199. 9,333.	1a	Land										
c Leasehold improvements 9,532. 199. 9,333.	_	Buildings										
d Equipment 107,768. 6,857. 100,911.	С											
	d	Equipment			10	7,768.		6	,857.	10	0,9	<u> 11.</u>
e Other			•									
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colum	n (B), line 1	0c.)			▶	11	υ,2	44.

Schedule D (Form 990) 2018

Solutions, Inc.

Complete if the organization answered "Yes" ((a) Description of security or category (including name of security)	(b) Book value		n: Cost or end-of-year market value
	(S) DOOR VAILE	(S) Motriod of Valuation	Cook of one of your market value
Oleranti tratat a suituitatamenta			
Other			
(A)			
(X)			
(C)			
(C) (D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11c See Form 990 Part Y	line 13
(a) Description of investment	(b) Book value		n: Cost or end-of-year market value
(1)	(,	(-,	······································
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11d. See Form 990. Part X	line 15
-	Description	mio i ra. eee i emi eee, rait X,	(b) Book value
(1)			.,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990. Part X, col. (B) line	. 15 \		N
Part X Other Liabilities.	: 13.)		
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11e or 11f See Form 990 F	Part X line 25
(a) Description of liability		(b) Book value	arry, me zo.
()			
(1) Endoral income taxes			
(1) Federal income taxes	able	213 440.1	
(2) Deferred Compensation Paya	able	213,440.	
(2) Deferred Compensation Paya (3) Deferred Rent	able	213,440.	
(2) Deferred Compensation Pays (3) Deferred Rent (4)	able		
(2) Deferred Compensation Paya (3) Deferred Rent (4)	able		
(2) Deferred Compensation Paya (3) Deferred Rent (4) (5) (6)	able		
(2) Deferred Compensation Paya (3) Deferred Rent (4) (5) (6) (7)	able		
(2) Deferred Compensation Paya (3) Deferred Rent (4) (5) (6) (7) (8)	able		
(2) Deferred Compensation Pays (3) Deferred Rent (4) (5) (6) (7) (8) (9)		47,289.	
(2) Deferred Compensation Paya (3) Deferred Rent (4) (5) (6) (7) (8)	25.)	260,729.	

	t XI Reconciliation of Revenue per Audited Financial Statement	ts With	Revenue per Re	turn.	rago
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	5,359,050.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	591.		
е	Add lines 2a through 2d			2e	591.
3	Subtract line 2e from line 1			3	5,358,459.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	70 000		
b	Other (Describe in Part XIII.)	4b	70,908.		70 000
C	Add lines 4a and 4b			4c	70,908. 5,429,367.
5 Pai	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)rt XII Reconciliation of Expenses per Audited Financial Statemer	nte Wit	h Fynansas nar B	5 Paturi	5,429,30/•
Га		ILS WILL	ii Expelises pei h	eturi	
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				4,761,435.
1	Total expenses and losses per audited financial statements			1	4,701,433.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا مو ا			
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
C	Other losses	2c 2d	591.		
d	Other (Describe in Part XIII.) Add lines 2a through 2d			20	591.
e o				2e 3	4,760,844.
3 4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:			3	4,700,044.
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a		4a 4b	70,908.		
b				4c	70,908.
с 5				5	4,831,752.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)rt XIII Supplemental Information.			3	4,031,732.
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	/ lines 1k	and 2h: Part V line 4:	· Dart \	/ line 2: Part YI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition			, rait /	N, IIIIe Z, Fait XI,
111162	20 and 40, and Part All, lines 20 and 40. Also complete this part to provide any addition	Jilai IIIIOI	mation.		
Pai	rt XI, Line 2d - Other Adjustments:				
	· · · · · · · · · · · · · · · · · · ·				
In-	-Kind Contributions				591.
Pai	rt XI, Line 4b - Other Adjustments:				
Suk	otenant income Broken out to Rental Income				70,908.
Par	rt XII, Line 2d - Other Adjustments:				
<u>In-</u>	-Kind Expenses				591.
<u>Par</u>	rt XII, Line 4b - Other Adjustments:				
					= 0 000
Sul	otenant income Broken out to Rental Income				70,908.
93205	1 10 20 19			Schoo	lule D (Form 990) 2018

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

2018

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Questions Regarding Compensation

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

Center for Climate and Energy
Solutions, Inc.

Employer identification number 54-1892252

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

832111 10-26-18

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Schedule J (Form 990) 2018

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

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

54-1892252

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 benefits		(E) Total of columns	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	berients	(B)(i)-(D)	reported as deferred on prior Form 990	
(1) Robert Perciasepe	(i)	285,304.	0.	0.	8,250.	1,412.		0.	
President	(ii)	0.	0.	0.	0.	0.		0.	
(2) Elliot Diringer	(i)	264,770.	0.	0.	8,289.	26,256.		0.	
Executive Vice President	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) Janet Peace	(i)	227,726.	0.	0.	7,119.	26,464.		0.	
VP, Markets & Business Str	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

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.

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Center for Climate and Energy Solutions, Inc.

Employer identification number 54-1892252

Form 990, Part I, Line 1, Description of Organization Mission: strengthen resilience to climate impacts.

Form 990, Part III, Line 4a, Program Service Accomplishments: readiness. We held a national workshop in Baltimore training cities on prioritizing resilience strategies to meet their communities' unique needs and to align with their equity goals. We also created near-term policy recommendations for how the U.S. can jumpstart the decarbonization of our economy.

Form 990, Part III, Line 4b, Program Service Accomplishments: Capture, Utilization and Storage to help generate proposals for actions for the 2019 G20 Summit in Osaka. We were honored to once again rank as one of the world's top environmental think tanks in the University of Pennsylvania's Global Go To Think Tank Index.

Form 990, Part III, Line 4c, Program Service Accomplishments: policy, resilience, climate risk disclosure, and carbon neutrality. We helped launch the Renewable Thermal Collaborative to help companies expand the use of renewable energy to meet their thermal needs. also launched our Climate Innovation 2050 initiative, working with companies to analyze potential scenarios and identify roadblocks and ways to accelerate decarbonization in key sectors across the U.S. economy. The overarching goal of the Climate Innovation 2050 program is to develop pathways to decarbonizing the economy by mid-century that

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businesses support and work toward.

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization Center for Climate and Energy **Employer identification number** 54-1892252 Solutions, Inc. Form 990, Part VI, Section B, line 11b: A copy of the 990 is reviewed by the President and Board of Directors and is signed by the President. Form 990, Part VI, Section B, Line 12c: The organization monitors compliance by asking the board and all of the employees to complete conflict of interest forms. No conflicts were reported so no enforcement was needed. Form 990, Part VI, Section B, Line 15a: The organization's top management official's compensation is determined by the compensation committee of the board. The compensation of other officers or key employees of the organization is determined by the organization's top management official. Form 990, Part VI, Section C, Line 19: The organization makes its governing documents, conflict of interest policy, as well as 3 years of financial statements, annual reports and tax returns available on its website c2es.org and by mail upon request. The organization's 990 is also available on various external websites such as GuideStar. Form 990, Part IX, Line 11g, Other Fees: Consulting/Authors: 542,115.

Management and general expenses

Program service expenses

Name of the organization	Center for Solutions,		Energy		Employer identification number 54-1892252
Fundraising ex	rpenses				0.
Total expenses	3				542,115.
Miscellaneous	Services:				
Program service	e expenses				33,958.
Management and	l general exp	penses			12,130.
Fundraising ex	rpenses				593.
Total expenses	3				46,681.
Total Other Fe	es on Form	990, Part IX	I, line 11g, Co	1 A	588,796.
Form 990, Part	XII, Line	2c:			
The organizati	on has not o	changed eith	er its oversig	ht proc	ess or
selection prod	ess during	the tax year	•		

Forn	990-T	E	Exempt Organization Bus			Tax Return	ıļ	OMB No. 1545-0687			
			(and proxy tax under section 6033(e))								
		For ca	For calendar year 2018 or other tax year beginning APR 1, 2018 and ending MAR 31, 2019								
	Triment of the Treasury all Revenue Service										
A [Check box if address changed)	(Emp	loyer identification number ployees' trust, see uctions,)						
ВЕ	xempt under section	Print	Center for Climate and Solutions, Inc.				5	4-1892252			
X	501(c)(3)										
	408(e) 220(e)	1									
-	408A530(a) City or town, state or province, country, and ZIP or foreign postal code										
	529(a) Arlington, VA 22201 Book value of all assets F Group exemption number (See instructions)										
C at	ok value of all assets end of year		the state of the s	<u> </u>	501(a) true		Carrina	Otherstenet			
H Fr	ter the number of the	rnaniza	G Check organization type X 501(c) corp tion's unrelated trades or businesses.			- Harrison and and		Other trust			
	de or business here		tion's unrelated trades of businesses.			ibe the only (or first) ur one, complete Parts I-V.					
			ce at the end of the previous sentence, complete Pa	rts Lann							
	siness, then complete			ito i uno	in, complete a conce	Tale IVI Tol Cacil Radition	a) Huuc	. o.			
-			oration a subsidiary in an affiliated group or a paren	ıt-subsid	fiary controlled group	? ▶ [7 Y	es No			
			ifying number of the parent corporation.		, , ,	300000000000000000000000000000000000000	_				
J T			Melena Nelson		Tele	ephone number 🕨 7	03-	516-4146			
Pa	rt I Unrelated	i Trac	le or Business Income		(A) Income	(B) Expenses	3	(C) Net			
1 a	Gross receipts or sale	s									
b	Less returns and allow		c Balance ▶	1c							
2	Cost of goods sold (S	chedule	A, line 7)	2							
3	Gross profit. Subtract	line 2 fr	om line 1c	3							
4a	Capital gain net incom	e (attac	h Schedule D)	4a							
b	Net gain (loss) (Form	4/9/, P	art II, line 17) (attach Form 4797)	4b							
С 5	Income (loce) from a	nartnere	sts hip or an S corporation (attach statement)	4c 5							
6			strip of an 3 corporation (attach statement)	6							
7	Unrelated debt-finance	ed incon	ne (Schedule E)	7							
8			nd rents from a controlled organization (Schedule F)	8							
9			in 501(c)(7), (9), or (17) organization (Schedule G)	9							
10			me (Schedule I)	10							
11			J)	11							
12	Other income (See ins	truction	s; attach schedule)	12							
13	Total, Combine lines	3 throu	gh 12	13		•					
Pa	rt II Deduction	ns No	t Taken Elsewhere (See instructions fo	r limitat	tions on deduction	s.)					
							_				
14			ectors, and trustees (Schedule K)				14				
15 16	Repairs and maintens	ance		********	0010011011110110110110111		15				
17							17				
18	Interest (attach sched	dule) (se	ee instructions)				18	7			
19	Taxes and licenses						19				
20	Charitable contribution	ns (See	instructions for limitation rules)				20				
21	Depreciation (attach I	orm 45	62)		21						
22	Less depreciation cla	imed on	Schedule A and elsewhere on return		22a		22b				
23	Depletion	((11(11(1)					23				
24	Contributions to defe	rred cor	npensation plans				24				
25	Employee benefit pro	grams	Andrea IV				25	500			
26 27	Excess exempt expen	ses (Sc	hedule I)		*****************	0	26				
27 28	Other deductions (att	sis (SCI	nedule J)	*****			27				
28 29	Total deductions Ac	aum SCN Id linee	edule) 14 through 28				28	0.			
30			icome before net operating loss deduction. Subtract				30	0.			
31			oss arising in tax years beginning on or after Januar				31				
32	585 W. Tek N	000	come. Subtract line 31 from line 30	• .	• •		32	0.			
82370			work Reduction Act Notice, see instructions.					Form 990-T (2018)			

Form 990-T	Center for Climate (2018) Solutions, Inc.	e and Energy		54-189	2252	Page .
Part I		able Income				
33	Total of unrelated business taxable income comp	uted from all unrelated trades or b	usinesses (see instructions)	71-01717121212121212	33	0.
34	Amounts paid for disallowed fringes				34	
35	Deduction for net operating loss arising in tax year	ars beginning before January 1, 20	18 (see instructions)	000000000000000000000000000000000000000	35	
36	Total of unrelated business taxable income before					
	lines 33 and 34				36	
37	Specific deduction (Generally \$1,000, but see line				37	1,000.
38	Unrelated business taxable income. Subtract li					
•	225 B 20 C				38	0.
Part I	V Tax Computation		***************************************			
39	Organizations Taxable as Corporations. Multipl	ly line 38 by 21% (0.21)		D	39	0.
40	Trusts Taxable at Trust Rates. See instructions					
-10	Tax rate schedule or Schedule D (I	•			40	
41	Proxy tax. See instructions				41	
42	Alternative minimum tax (trusts only)				42	
43	Tax on Noncompliant Facility Income. See instr	ructions			43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, v	whichever apolies			44	0.
Part \		Williams of applies				
	Foreign tax credit (corporations attach Form 111	8° trusts attach Form 1116)	45a			
			20000000000000000000000000000000000000			
	Other credits (see instructions) General business credit. Attach Form 3800				181	
C	Credit for prior year minimum toy (attach Form 9	2001 or 9027)	454			
0	Credit for prior year minimum tax (attach Form 8				45e	
	Total credits. Add lines 45a through 45d				46	0.
46	Subtract line 45e from line 44 Other taxes. Check if from: Form 4255	Form 9611	Form BOCC Othor	(-ttbab-ab-la)	47	
47						0.
48	Total tax. Add lines 46 and 47 (see instructions)				48	0.
49	2018 net 965 tax liability paid from Form 965-A		Tentament of the Section of the Contract of th		49	
	Payments: A 2017 overpayment credited to 2018		Manager and the Control of the Contr			
	2018 estimated tax payments					
C	Tax deposited with Form 8868		50c		155	
	Foreign organizations: Tax paid or withheld at so		000000000000000000000000000000000000000			
	Backup withholding (see instructions)					
	Credit for small employer health insurance premi		50f			
g	Other credits, adjustments, and payments:	Form 2439		C	1000	
	Form 4136 X	Other 6,552.	Total 50g	6,552.		6 550
51	Total payments. Add lines 50a through 50g		see Statement	1	51	6,552.
52	Estimated tax penalty (see instructions). Check if	Form 2220 is attached 🕨 📖			52	
53	Tax due. If line 51 is less than the total of lines 4				53	6 550
54	Overpayment. If line 51 is larger than the total o		ıt overpaid		54	6,552
55	Enter the amount of line 54 you want: Credited t			efunded >	55	6,552.
Part \						
56	At any time during the 2018 calendar year, did th					Yes No
	over a financial account (bank, securities, or other	•				100
	FinCEN Form 114, Report of Foreign Bank and Fi	nancial Accounts. If "Yes," enter the	e name of the foreign country			
	here 🕨					
57	During the tax year, did the organization receive	a distribution from, or was it the gi	rantor of, or transferor to, a fo	reign trust?		200
	If "Yes," see instructions for other forms the orga	inization may have to file.				F-IO
58	Enter the amount of tax-exempt interest received					
	Under penalties of perjury, declare that I have examin correct, and complete Declaration of preparer (other the	ned this return, including accompanying s	chedules and statements, and to the	e best of my knowle	dge and belief, it	is true,
Sign	contain, and commenter becaration of preparer (other to	11		The same of the sa	lay the IBS discu	ss this return with
Here	1 orchand	03/11/20 L	President		e preparer show	
	Signature of officer	Date t Tit		in	structions)?	Yes No
-	Print/Type preparer's name	Preparer's signature	Date	Check	if PTIN	

Here	Signature of officer	Date Pres	ident		preparer shown below (see tructions)? X Yes N
Paid	Print/Type preparer's name	Preparer's signature Den Mille Cha	Date 2/24/20	Check if self- employed	PTIN POOC 41 006
Prepare	Firm's name ► Hertzbach &	V		Firm's EIN ►	P00641906 52-1158459
	Firm's address Arlington	Phone no. (703) 351-6600		

Form **990-T** (2018)

823711 01-09-19

Form 990-T Other Credits and Payments	Statement 1
Description	Amount
TAX PAYMENT PRIOR TO REPEAL OF SECTION 512(A)(7)	6,552.
Total included on Form 990-T, Page 2, Part V, line 50g	6,552.

Explanation of Changes to Income and Modifications

Line 34 of the original 2018 Form 990T has been changed to \$0 due to the repeal of Section 512(a)(7) for qualified transportation fringe benefits.