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DLN: 93493226016744

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

2012

Open to Public Inspection

		2012 cal ipplicable	endar year, or tax year beginning 10-01-2012 , 2012, and ending C Name of organization	g 09-30	-2013	D Emplo	yer ider	ntification number
_	dress ch		ALLIANCE FOR SUSTAINABLE ENERGY LLC			26-19	39342	2
– Na	me cha	inge	Doing Business As				_	
Ini	tıal retu	ım	Number and street (or P O box if mail is not delivered to street address) Re	oom/suite	e	E Telepho	ne num	ber
Te	rmınate	ed	15013 DENVER WEST PARKWAY				275-3	
— Am	nended	return	City or town, state or country, and ZIP + 4 GOLDEN, CO 804013393			(303)	273 3	
Ap	plication	n pending	dolben, co do 1013333			G Gross r	eceipts \$	382,618,942
			F Name and address of principal officer DAN E ARVIZU		H(a) Is th		return	
			15013 DENVER WEST PARKWAY		атпп	ates?		Γ Yes Γ No
			GOLDEN,CO 804013393					ded?
	ıx-exem	npt status	▼ 501(c)(3)		If "N	o," attach	a lıst	(see instructions)
	ebsite	e: ► WW	/W ALLIANCEFORSUSTAINABLEENERGY ORG		H(c) Gro	up exempt	ion nur	mber ►
K For	m of or	manization	Corporation		Vear of fo	ormation 20	08 M	State of legal domicile DE
	rt I		mary		L rear or re	offination 20	00 14	State of legal dofficile DE
			escribe the organization's mission or most significant activities					
	!	O PERAT	TE THE NATIONAL RENEWABLE ENERGY LABORATORY TO DE	EVELOI	P ENERGY E	EFFICIEN.	TTECH	HNOLOGIES
Governance								
<u> </u>	:							
<u> </u>	2	Check th	nis box 🔭 if the organization discontinued its operations or disp	osed of	more than 2	25% of its	net as	sets
	3	Number	of voting members of the governing body (Part VI, line 1a)				з	15
e Vi	1		of independent voting members of the governing body (Part VI, III				4	15
Acumues &			mber of individuals employed in calendar year 2012 (Part V, line				5	1,845
<u>ş</u>			mber of volunteers (estimate if necessary)				6	14
•	7a -	Total un	related business revenue from Part VIII, column (C), line 12 .				7a	0
	ь	Net unre	lated business taxable income from Form 990-T, line 34				7b	0
					Pric	or Year		Current Year
a)	8		butions and grants (Part VIII, line 1h)			150,0		50,000
Ravenue	9		am service revenue (Part VIII, line 2g)			513,319,5		382,568,389
Ž.	10 11		tment income (Part VIII, column (A), lines 3, 4, and 7d) . . revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e				786 0	553
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A	-			╣	0
		12) .				513,470,3		382,618,942
	13		s and similar amounts paid (Part IX, column (A), lines 1-3).			150,0		50,000
	14		ts paid to or for members (Part IX, column (A), line 4)					0
\$	15	5-10)	es, other compensation, employee benefits (Part IX, column (A), l)	iines		191,989,	32	193,946,272
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)				0	0
ੜੇ	Ь	Total fu	ındraısıng expenses (Part IX, column (D), line 25) ▶					
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			315,644,9	88	184,326,836
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line			507,784,9		378,323,108
. 07	19	Reven	ue less expenses Subtract line 18 from line 12	• •		5,685,4		4,295,834
net Assets of Fend Balances						g of Curre Year	nt	End of Year
98. 98. 98.	20	Total	assets (Part X, line 16)			94,991,	205	81,307,496
2 E	21	Total	liabilities (Part X, line 26)			90,790,4	171	77,092,574
	22	_	ssets or fund balances Subtract line 21 from line 20			4,200,7	734	4,214,922
	rt II	_	ature Block					
ny k	nowled	dge and	perjury, I declare that I have examined this return, including acco belief, it is true, correct, and complete Declaration of preparer (o nowledge					
		****				014-08-13		
Sigr		Signa	ature of officer		D	ate		
Her	е		N BARWELL CHIEF FINANCIAL OFFICER or print name and title					
		<u> 17 - </u>	Print/Type preparer's name Preparer's signature	Da	te Ia	ack [.e	PTIN	
Paid	d	[DORI J EGGETT		self	eck if f-employed	P00645	
	u pare	۲ ۱	rim's name ► EKS&H LLLP		Firm	n's EIN 🟲 46	5-14970	33
	Pare On		rımı's address ► 7979 E TUFTS AVENUE SUITE 400		Pho	one no (303) 740-94	100
J 36	, 011	י אי						

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes 厂No

376,826,530

Total program service expenses ►

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	Checklist of Required Schedules (continued)			
	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		N o
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
	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		No
	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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		N o
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2012)

Pali				_
	Check if Schedule O contains a response to any question in this Part V	-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 413			110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
E	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Ea		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		No
		5b		INO
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			110
		-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	<u> </u>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	1 7	

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		e.)
			e Code Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a b	Did the organization have local chapters, branches, or affiliates?			No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 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, physical address, and telephone number of the person who possesses the books and records of the organization ►KAREN KEERAN 15013 DENVER WEST PARKWAY GOLDEN, CO (303) 275-3000

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h ar or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) DR MICHAEL F HELMSTETTER	1 00	х						0	0	0	
VICE CHAIR OF THE BOARD		^						Ŭ	9		
(2) DR RONALD D TOWNSEND	1 00	х						0	0	0	
VICE CHAIR OF THE BOARD				<u> </u>	L			<u> </u>	0		
(3) DR STANLEY BULL BOARD MEMBER	1 00	х						0	0	0	
(4) DR JEFFERSON TESTER	1 00										
•		х						0	0	0	
BOARD MEMBER (5) DR LARRY Z BROWN	1 00										
. ,	100	х						0	0	0	
BOARD MEMBER (6) MR RICHARD THOMAS FLEENER	1 00										
	100	x						0	0	0	
CHAIR OF THE BOARD (7) DR THOMAS M SACK	1 00				_						
	1 00	x						0	0	0	
BOARD MEMBER (8) MR BRETT BOSLEY	1.00										
(8) MR BRETT BUSLET	1 00	х						0	0	0	
BOARD MEMBER											
(9) MR LANNY BATTES	1 00	l x						0	0	0	
BOARD MEMBER											
(10) DR ERIK PEARSON	1 00	l x						0	0	0	
BOARD MEMBER									_	_	
(11) DR STEIN STURE	1 00	x						0	0	0	
BOARD MEMBER								Ĭ			
(12) DR WILLIAM FARLAND	1 00	×						0	0	0	
BOARD MEMBER								ĭ	0		
(13) DR JOHN POATE	1 00	×						0	0	0	
BOARD MEMBER				L	L		L		0		
(14) DR SALLY M BENSON	1 00	х						0	0	0	
BOARD MEMBER		^							0	0	
(15) DR MARIA ZUBER	1 00										
BOARD MEMBER		X						0	0	0	
(16) MR MARTIN CONGER	1 00	Ţ,,						_	_	_	
BOARD MEMBER		X						0	0	0	
(17) DR DAN ARVIZU	40 00										
PRESIDENT				Х				934,672	0	72,968	
										Form 990 (2012)	

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec (, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(18) MS BOBI GARRETT	40 00			x				391,613	0	96,078
SENIOR VICE PRESIDENT (19) DR DANA C CHRISTENSEN	40.00									
SENIOR VICE PRESIDENT	40 00			х				399,263	0	41,978
(20) MR STEVEN SILBERGLEID	40 00									
SECRETARY				X				255,347	0	114,604
(21) MS BARBARA STOKES	40 00			x				215,999	0	195,299
CHIEF FINANCIAL OFFICER				^				213,333		155,255
(22) MS KAREN STIVESON	40 00			х				91,562	0	114,929
ASSISTANT SECRETARY								,		,
(23) MR KENNETH POWERS	40 00			x				328,962	0	2,995
SENIOR VICE PRESIDENT										
(24) MR DALE GARDNER	40 00					x		311,593	0	106,818
ASSOCIATE LAB DIRECTOR	40.00			_						
(25) MR ROBERT HAWSEY ASSOCIATE LAB DIRECTOR	40 00					x		290,557	0	7,375
(26) MR BAILEY STULTS	40 00		-							
ASSOCIATE LAB DIRECTOR	10 00					х		285,855	0	97,206
(27) DR MICHAEL PACHECO	40 00									
VICE PRESIDENT						X		277,702	0	74,208
(28) MR GREGORY WILSON	40 00					,		210.000		26 520
CENTER DIRECTOR - NAT'L CENTER OF PHOTO						X		319,000	0	26,520
(29) MR WILLIAM GLOVER	40 00						х	191,765	0	38,372
SENIOR VICE PRESIDENT							^	151,703		30,372
(30) MS CATHERINE PORTO	40 00						x	211,284	0	17,455
SENIOR VICE PRESIDENT										,
1b Sub-Total										
c Total from continuation sheets to Pa						▶				
d Total (add lines 1b and 1c)		•				►		4,505,174	0	1,006,805
2 Total number of individuals (including	but not limited to	those	liste	d al	oove	e) who	rec	eived more than		

\$100,000 of reportable compensation from the organization $\blacktriangleright 568$

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

Section B. Independent Contractors

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

, , , , , , , , , , , , , , , , , , , ,		•
(A)	(B)	(C)
Name and business address	Description of services	Compensation
JE DUNN CONSTRUCTION COMPANY 1001 LOCUST STREET KANSAS CITY MO 64106	CONSTRUCTION	15,311,424
HEWLETT PACKARD 1501 PAGE MILL ROAD PALO ALTO CA 94304	INFORMATION TECHNOLOGY	6,016,179
ALLEGIANCE CONSULTING INC 2601 BLAKE STREET SUITE 110 DENVER CO 80205	CONSULTING	4,641,975
DENVER WEST OFFICE LEASING COMPANY LLC PO BOX 974911 DALLAS TX 75397	LEASING	3,919,369
ABB INC PO BOX 88868 CHICAGO IL 60695	AUTOMATION TECHNOLOGY	3,208,953
ABB INC PO BOX 88868 CHICAGO IL 60695	AUTOMATION TECHNOLOGY	3,208,953

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization >299

Part V	/ 	Statement of Revenue Check if Schedule O contains a response to any question	ın thıs Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
s s	1a	Federated campaigns 1a				
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership dues 1b				
Gr.	c	Fundraising events 1c				
fts, ir A	d	Related organizations 1d				
. Gi nila	e	Government grants (contributions) 1e				
ins, Sin						
utio Ier	f	All other contributions, gifts, grants, and similar amounts not included above 50,000				
rib Oth	g	Noncash contributions included in lines 1a-1f \$	j			
Cont and	h		50,000			
C			,			
::Ie	22	Business Code	202 500 200	202 560 200		
wer	2a b	DOE CONTRACT 541700	382,568,389	382,568,389		
A 품	_					
Ŋ.	C d					
Se	e e					
ranı	f	All other program service revenue				
Program Serwce Revenue	'					
Ь	g	Total. Add lines 2a-2f	382,568,389			
	3	Investment income (including dividends, interest, and other similar amounts)	553			553
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents				
	Ь	Less rental expenses				
	C	Rental income or (loss)				
	d	Net rental income or (loss)				
		(I) Securities (II) O ther				
	7a	Gross amount from sales of				
		assets other than inventory				
	Ь	Less cost or other basis and				
	c	sales expenses Gain or (loss)				
	d	Net gain or (loss)				
ດ່າ	8a	Gross income from fundraising events (not including				
Other Revenue		\$				
}e∨		of contributions reported on line 1c) See Part IV, line 18				
¥.		а				
'th	Ь	Less direct expenses b				
0	C	Net income or (loss) from fundraising events				
	94	Gross income from gaming activities See Part IV, line 19				
		a				
	Ь	Less direct expenses b				
	С	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances .				
		a				
		Less cost of goods sold b Net income or (loss) from sales of inventory b				
	├ -	Net income or (loss) from sales of inventory				
	11a	secilaricous revenue Business code				
	ь					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d				
	12	Total revenue Con Instructions				
	**	Total revenue. See Instructions	382,618,942	382,568,389	1	553

	Check if Schedule O contains a response to any question in this Pa	rt IX		<u> </u>	
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	50,000	50,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,433,483	1,778,653	654,830	
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	155,315,536	155,313,601	1,935	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	8,802,109	8,802,109		
9	Other employee benefits	16,500,244	16,446,232	54,012	
0	Payroll taxes	10,894,900	10,894,900		
1	Fees for services (non-employees)				
а	Management				
b	Legal	615,072	615,072		
C	Accounting	111,895	111,895		
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
2	Advertising and promotion				
3	Office expenses	784,971	392,349	392,622	
ŀ	Information technology				
5	Royalties	125,283	125,283		
5	Occupancy	7,177,013	7,176,696	317	
7	Travel	6,027,206	6,008,606	18,600	
8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
•	Conferences, conventions, and meetings	2,344,994	2,344,994		
)	Interest	3,202	63	3,139	
L	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3	Insurance	68,120	68,120		
4	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	SUBCONTRACTS	99,911,206	99,701,636	209,570	
b	FACILITIES PROCUREMENT	20,575,882	20,575,882		
c	EQUIPMENT PROCUREMENT	17,991,823	17,991,823		
d	SUPPLIES-LAB, TOOLS, SA	5,626,461	5,626,461		
e	All other expenses	22,963,708	22,802,155	161,553	
5	Total functional expenses. Add lines 1 through 24e	378,323,108	376,826,530	1,496,578	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	2,734,244	1	2,339,426
	2	Savings and temporary cash investments	50,000	2	50,000
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	88,933,014	4	74,907,788
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
Assets	_	Notes and leave resourchies not		7	
₹ S	7	Notes and loans receivable, net			
	8	Inventories for sale or use	2,277,576	8	2,726,076
	9 10a	Prepaid expenses and deferred charges	2,211,510	9	2,720,070
	١.	Part VI of Schedule D 10a			
	b	Less accumulated depreciation		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	996,371	15	1,284,206
	16	Total assets. Add lines 1 through 15 (must equal line 34)	94,991,205	16	81,307,496
	17	Accounts payable and accrued expenses	80,971,738	17	67, 154, 164
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
<u>\$6</u>	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>, e</u>		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	9,818,733	25	9,938,410
	26	D	90,790,471		77.092.574
<u></u>	26	Total liabilities. Add lines 17 through 25	90,790,471	26	17,092,374
ğ		lines 27 through 29, and lines 33 and 34.	4.055.505		4.050.044
<u>8</u>	27	Unrestricted net assets	1,055,585	27	1,253,341
ă	28	Temporarily restricted net assets	3,145,149	28	2,961,581
Ĭ	29	Permanently restricted net assets		29	
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
ź	30	Capital stock or trust principal, or current funds		30	
Šφ	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	4,200,734	33	4,214,922
	34	Total liabilities and net assets/fund balances	94,991,205	34	81,307,496 Form 990 (2012)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)				
		1		382,6	18,942
2	Total expenses (must equal Part IX, column (A), line 25)	2		378,3	23,108
3	Revenue less expenses Subtract line 2 from line 1	3		4,2	95,834
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4.2	00,734
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		-4,2	81,646
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4,2	14,922
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	▼ Separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equire	3b		

Software ID: Software Version:

EIN: 26-1939342

Name: ALLIANCE FOR SUSTAINABLE ENERGY LLC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Indepe		ctors	,,		,	,,			 I	I
(A) Name and Title	(B) Average hours per week (list	dıre	than	o not one son i er an trus	box s bo d a tee)	th		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
DR MICHAEL F HELMSTETTER VICE CHAIR OF THE BOARD	1 00	х						0	0	0
DR RONALD D TOWNSEND VICE CHAIR OF THE BOARD	1 00	x						0	0	0
DR STANLEY BULL BOARD MEMBER	1 00	х						0	0	0
DR JEFFERSON TESTER BOARD MEMBER	1 00	х						0	0	0
DR LARRY Z BROWN BOARD MEMBER	1 00	х						0	0	0
MR RICHARD THOMAS FLEENER CHAIR OF THE BOARD	1 00	х						0	0	0
DR THOMAS M SACK BOARD MEMBER	1 00	х						0	0	0
MR BRETT BOSLEY BOARD MEMBER	1 00	х						0	0	0
MR LANNY BATTES BOARD MEMBER	1 00	х						0	0	0
DR ERIK PEARSON BOARD MEMBER	1 00	х						0	0	0
DR STEIN STURE BOARD MEMBER	1 00	х						0	0	0
DR WILLIAM FARLAND BOARD MEMBER	1 00	х						0	0	0
DR JOHN POATE BOARD MEMBER	1 00	х						0	0	0
DR SALLY M BENSON BOARD MEMBER	1 00	х						0	0	0
DR MARIA ZUBER BOARD MEMBER	1 00	х						0	0	0
MR MARTIN CONGER BOARD MEMBER	1 00	х						0	0	0
DR DAN ARVIZU PRESIDENT	40 00			х				934,672	0	72,968
MS BOBI GARRETT SENIOR VICE PRESIDENT	40 00			х				391,613	0	96,078
DR DANA C CHRISTENSEN SENIOR VICE PRESIDENT	40 00			х				399,263	0	41,978
MR STEVEN SILBERGLEID SECRETARY	40 00			х				255,347	0	114,604
MS BARBARA STOKES CHIEF FINANCIAL OFFICER	40 00			х				215,999	0	195,299
MS KAREN STIVESON ASSISTANT SECRETARY	40 00			х				91,562	0	114,929
MR KENNETH POWERS SENIOR VICE PRESIDENT	40 00			х				328,962	0	2,995
MR DALE GARDNER ASSOCIATE LAB DIRECTOR	40 00					х		311,593	0	106,818
MR ROBERT HAWSEY ASSOCIATE LAB DIRECTOR	40 00					х		290,557	0	7,375

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Indepen	naent contra	actors								
(A) Name and Title	(B) A verage hours per week (list	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former			related organizations
MR BAILEY STULTS ASSOCIATE LAB DIRECTOR	40 00					х		285,855	0	97,206
DR MICHAEL PACHECO VICE PRESIDENT	40 00					х		277,702	0	74,208
MR GREGORY WILSON CENTER DIRECTOR - NAT'L CENTER OF PHOTO	40 00					х		319,000	0	26,520
MR WILLIAM GLOVER SENIOR VICE PRESIDENT	40 00						х	191,765	0	38,372
MS CATHERINE PORTO SENIOR VICE PRESIDENT	40 00						х	211,284	0	17,455

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493226016744

OMB No 1545-0047

Employer identification number

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

ALLIANCE FOR SUSTAINABLE ENERGY LLC

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Inspection

									26-1939		
Pai				blic Charity Sta						ınstruction	S.
The o	rganı:			e foundation becaus							
1			•	on of churches, or a				section 170	(b)(1)(A)(i)		
2	Г	A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Sche	dule E)				
3	Γ	A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon desc	rıbed ın sect i	ion 170(b)(1)(A)(iii).		
4	Γ	A medi	cal researc	n organization operat	ted ın conjun	ction with	a hospital de	scribed in s	ection 170(b)(1)(A)(iii).	Enter the
_	_			ty, and state							
5	ļ	_	•	erated for the benefi	=	e or univers	sity owned or	operated by	y a governme	ntal unit des	cribed in
	_			A)(iv). (Complete P	•						
6	<u></u>			local government or							
7	✓	_		at normally receives		•	s support fro	m a governn	nental unit or	from the ge	neral public
8	\vdash			on 170(b)(1)(A)(vi). described in sectior		•	mplete Part	TT \			
9	<u>'</u>		-	at normally receives			-	-	abutions mo	mborchin for	s and gross
9	,										
				ities related to its ex							
				oss investment inco						ı tax) il olli t	Jusiliesses
10	_			janization after June							
10	_	_		ganized and operated							
11	ı			ganized and operated ly supported organiz							
			•	bes the type of supp				•		See Section	Jos(a)(S). Check
				b						Non-function	ally integrated
е	Γ	By che	cking this b	ox, I certify that the	organization	ıs not con	trolled direct	ly or indired	tly by one or	more disqua	alıfıed persons
				on managers and ot	her than one	or more pu	ablicly suppo	rted organız	ations descr	bed in secti	on 509(a)(1) or
_			1509(a)(2)	received a unitten d	a t a rm n a t . a n	from the T	DC that it is	Tuna I Tu	ma II ar Tun	a III aumman	ting organization
f			this box	received a written de	etermination	i iromi the 1	KS that it is a	aryper, ry	pe II, or Typ	e III Suppor	ting organization,
g				2006, has the organi	ızatıon acce	oted any gi	ft or contribu	tion from an	y of the		,
			ng persons?	,	·	, 5			,		
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	ner alone or	r together wit	h persons d	escribed in (··)	Yes No
		and (111) below, the	governing body of th	ie supported	organizati	on?			11	.g(i)
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				11	g(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)) above?			119	g(iii)
h		Provide	e the follown	ng information about	the support	ed organıza	ation(s)				
_) Nam		(ii) EIN	(iii) Type of	(iv) Is		(v) Did yo	•	(vi) I:		(vii) A mount of
	uppoi			organization	organizat		the organ		organiza		monetary
Or	ganiz	астоп		(described on lines 1- 9 above	col (i) lıs your gove		ın col (i) suppo		col (i) or		support
				or IRC section	docume	_	J Supp.	510	"" ""		
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	
						1		+		 	
								+			
 Total								+			
Total			I		1	1		1			1

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total beginning in) 🕨 1 Gifts, grants, contributions, and membership fees received (Do 343,762,083 443,938,808 532,886,272 513,469,579 382,618,389 2,216,675,131 not include any "unusual grants ") Tax revenues levied for the organization'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 343,762,083 443,938,808 532,886,272 513,469,579 382,618,389 2,216,675,131 Total. Add lines 1 through 3 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) Public support. Subtract line 5 2,216,675,131 from line 4 Section B. Total Support Calendar year (or fiscal year (d) 2011 (e) 2012 (a) 2008 **(b)** 2009 (c) 2010 (f) Total beginning in) 🟲 343,762,083 532,886,272 513,469,579 382,618,389 Amounts from line 4 443,938,808 2,216,675,131 Gross income from interest, dividends, payments received 36,548 on securities loans, rents, 10,279 8,520 16,410 786 553 rovalties and income from sımılar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 2,216,711,679 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage for 2011 Schedule A, Part II, line 14 15 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			12		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493226016744

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** ALLIANCE FOR SUSTAINABLE ENERGY LLC 26-1939342 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	▶	ıf the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, E	ĪN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals							
a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	0								
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	0								
С	Total lobbying expenditures (add lines 1a and 1	0									
d	Other exempt purpose expenditures	376,826,530									
e	Total exempt purpose expenditures (add lines 1	c and 1d)	376,826,530								
f	Lobbying nontaxable amount Enter the amount toolumns	from the following table in both	1,000,000								
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:									
	Not over \$500,000	20% of the amount on line 1e									
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000									
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000									
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000									
	Over \$17,000,000	\$1,000,000									
_											
3	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000								
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0								
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	0								
j	If there is an amount other than zero on either li	re is an amount other than zero on either line 1h or line 1i, did the organization file Form									

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

	Lobbying Expendi	tures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
_b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	51,850	50,000	0	0	101,850
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f	Grassroots lobbying expenditures					

	rt II-B Complete if the o		er section 501(c)(3) and has	NOT			Pa	age 🥃	
FC		election under section 501							
For e	each "Yes" response to lines 1a throu	ah 1. below provide in Part IV a deta	alled description of the lobbying	(a	a)		(b)		
activ		g , , ,		Yes	No	A	moun	ıt	
1 a		anization attempt to influence fore t to influence public opinion on a le							
b c	Paid staff or management (included Media advertisements?	le compensation in expenses repo	rted on lines 1c through 1i)?						
d	Mailings to members, legislators	, or the public?							
е	Publications, or published or bro	adcast statements?							
f	Grants to other organizations for	lobbying purposes?							
g	Direct contact with legislators, t	heir staffs, government officials, or	a legislative body?						
h		rs, conventions, speeches, lecture							
i	Other activities?								
j	Total Add lines 1c through 1i								
2a	_	the organization to be not describ-	ed in section 501(c)(3)?						
ь		tax incurred under section 4912	`			1			
С		tax incurred by organization mana	agers under section 4912						
d		a section 4912 tax, did it file Forr	-						
Par			er section 501(c)(4), section	501(c)(5), (r se	ctio	n	
	501(c)(6).								
					_		Yes	No	
1	Were substantially all (90% or n	nore) dues received nondeductible	by members?		L	1			
2	Did the organization make only ii	n-house lobbying expenditures of \$	52,000 or less?		L	2			
3	Did the organization agree to car	ry over lobbying and political expe	nditures from the prior year?			3			
Pa			er section 501(c)(4), section ! lines 1 and 2, are answered "						
	line 3, is answere				(5)			,	
1	Dues, assessments and similar	amounts from members		1					
2	Section 162(e) nondeductible lo expenses for which the section 5		do not include amounts of political						
а	Current year			2a					
Ь	Carryover from last year			2b					
C	Total			2c					
3		ection 6033(e)(1)(A) notices of no		3					
4		unt on line 2c exceeds the amount arryover to the reasonable estimat	t on line 3, what portion of the excess e of nondeductible lobbying and	4					
5	. , , , , , , , , , , , , , , , , , , ,	political expenditures (see instruc	tions)	5					
Р	art IV Supplemental Inf		•	1 1					
Со		criptions required for Part I-A, line	e 1 , Part I-B , line 4 , Part I-C , line 5 , Pa	rt II-A	(affilia	ed gr	oup li	st),	
	Identifier	Return Reference	Explana	tion					
PAR	T IV, SUPPLEMENTAL		THE GENERAL ISSUE AREA FOR	LOBBY	'ING IS	INC	REAS	ED.	
	ORMATION		APPROPRIATIONS IN THE FEDE SCIENTIFIC RESEARCH AND DE THROUGH APPROPRIATIONS A THE SPECIFIC LOBBYING ISSUE AND SENATE AUTHORIZATION BILLS FOR ENERGY AND WATER	RAL BUVELOF ND REF SINC AND A	JDGET MENT ORT L LUDE T PPROF OPME	FOR PROG ANGU HEH RIAT NT D	GRAM AGE OUSI IONS EFEN	1S E S	
		BILLS FOR ENERGY AND WAT AND RELATED AGENCIES, TF							

COMMERCE

DLN: 93493226016744

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

Open to Public Inspection

	me of the organization		Emp	loyer identification number
4LL	IANCE FOR SUSTAINABLE ENERGY LLC		26-	1939342
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.	inds	or Accounts. Complete if the
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		or adv	Yes No
•	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?			
'aı	rt III Conservation Easements. Complete if	the organization answered "Yes" to	Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education) Preservation of an Preservation of a c	ertıfıe	d historic structure
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	quaimed conservation contribution in tr	ie iorn	n of a conservation
		-		Held at the End of the Year
a	Total number of conservation easements	<u> </u>	2a	
b	Total acreage restricted by conservation easements		2b	
3	Number of conservation easements on a certified histo	` `	2c	
1	Number of conservation easements included in (c) acq historic structure listed in the National Register	juired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transferr	ed, released, extinguished, or terminated	d by th	ne organization during
	the tax year 🛌			
	Number of states where property subject to conservati	ion easement is located ►		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents o	luring the year
	Amount of expenses incurred in monitoring, inspecting \$ \blue{5}\$, and enforcing conservation easements	durın	g the year
	Does each conservation easement reported on line 2 (and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sect	tion 17	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financial ents	stater	nents that describes
a r	t III Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar Assets.
1	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reven ts held for public exhibition, education, o	rrese	arch in furtherance of public
o	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	16 (ASC 958), to report in its revenue s ts held for public exhibition, education, o	tatem	ent and balance sheet
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			▶ \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS		r finan	
a	Revenues included in Form 990, Part VIII, line 1			► \$
Ь	Assets included in Form 990, Part X			▶ \$

Part	111 Organizations Maintaining Co	<u>llections of Art</u>	<u>:, His</u>	stori	<u>cal Tı</u>	<u>easur</u>	<u>es, or O</u>	<u>ther</u>	Similar As	ssets (c	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other recor	ds, cl	heck	any of	the follo	wing that a	ire a s	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Г	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y furthe	er the or	ganızatıon	's exe	empt purpose	ın	
5	During the year, did the organization solicit o	or receive donations	s of ar	rt, his	torical	treasure	es or othei	rsımı	lar		
	assets to be sold to raise funds rather than t		•							│ Yes	┌ No
Par	Part IV, line 9, or reported an an						answere	d "Ye	es" to Form	990, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					itions or	other ass	ets n	ot	┌ Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XII	I and complete the	follo	wing	table		_				
								_	Aı	mount	
с	Beginning balance							1c			
d	Additions during the year						<u> </u>	1d			
е	Distributions during the year						F	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?	•						☐ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been pro	vided in P	art X	III		Γ
Pa	tt V Endowment Funds. Complete										
4_	Degraping of week belongs	(a)Current year	(Ь)Prior	year	b (c)Two	o years back	(d)⊤	hree years back	(e)Four y	ears back
1a 	Beginning of year balance							<u> </u>			
b	Contributions							 		 	
С	Net investment earnings, gains, and losses							<u> </u>			
d	Grants or scholarships										
е	Other expenditures for facilities										
f	and programs										
g g	End of year balance							 		 	
_	Provide the estimated percentage of the curr	cont year and halan	co (lur	20.10	colum	n (a)) ho	old ac	<u> </u>			
2	Board designated or guasi-endowment	ent year end baran	ce (iii	ic ry	, coluii	iii (a)) iie	iu as				
a	•										
b	Permanent endowment ►										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	atıon	that	are hel	d and ad	ministered	l for t	he	Yes	No
	(i) unrelated organizations								3a	(i) res	140
	(ii) related organizations									(ii)	
b	If "Yes" to 3a(II), are the related organization								3	ВЬ	
4	Describe in Part XIII the intended uses of th	ie organization's en	dowm	nent f	unds						
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	0, Pa				14-26	1	(-) A		Dan Incombra
	Description of property				a) Cost (asis (inve	estment)	(b) Cost or basis (oth		(c) Accumula depreciatioi		Book value
1a	Land										
b	Buildings		•								
С	Leasehold improvements										
d	Equipment										
	Other										
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part .	X, colι	ımn (B), line	10(c).)					0

(a) Description of security or category		
(a) Description of Security of Category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
)Financial derivatives		
C)Closely-held equity interests		
ther		
uilei		
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
art VIII Investments—Program Related.	See Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
otal. (Column (b) must equal Form 990, Part X, col (B) line 13)	P	
Part IX Other Assets. See Form 990, Part X		
(a) Des		(b) Book value
(a) Des	СПРСКИ	(b) Book value
Part X Other Liabilities. See Form 990, Part X (a) Description of liability	rt X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	
(a) Description of liability ederal income taxes	rt X, line 25.	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	
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Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	
	rt X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part (a) Description of liability ederal income taxes	rt X, line 25. (b) Book value	

Part	XI Reconciliation of Revenue per Audited Financial State	eme	ents	: Wi	th I	₹ev	enue	per	Re	turn
1	Total revenue, gains, and other support per audited financial statements							1	L	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12									
а	Net unrealized gains on investments	2 a	a							
b	Donated services and use of facilities	21	ь							
C	Recoveries of prior year grants	20	:							
d	Other (Describe in Part XIII)	20	ı							
e	Add lines 2a through 2d	-							e	
3	Subtract line 2e from line 1							3	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1									
а	Investment expenses not included on Form 990, Part VIII, line 7b .	48	a							
b	Other (Describe in Part XIII)	41	5							
c	Add lines 4a and 4b	_						□ 4	c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)						5	5	
Part	XII Reconciliation of Expenses per Audited Financial State	ten	ent	s W	ith	Ex	ens	es pe	er i	Return
1	Total expenses and losses per audited financial statements							1	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25									
а	Donated services and use of facilities	2	2a							
b	Prior year adjustments	2	b							
c	Other losses	2	2c							
d	Other (Describe in Part XIII)	2	2d							
e	Add lines 2a through 2d							2	e.	
3	Subtract line 2e from line 1							3	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:									
а	Investment expenses not included on Form 990, Part VIII, line 7b	4	la							
b	Other (Describe in Part XIII)	4	ŀЬ							
c	Add lines 4a and 4b							4	k	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	18) .						5	
	YIII Supplemental Information									

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE COMPANY ADOPTED GUIDANCE RELATED TO UNCERTAINTY IN INCOME TAXES ON JANUARY 1, 2009 AFTER EVALUATING THE TAX POSITIONS TAKEN, NONE ARE CONSIDERED TO BE UNCERTAIN, THEREFORE, NO AMOUNTS HAVE BEEN RECOGNIZED AS OF SEPTEMBER 30, 2013 OR 2012 IF INCURRED, INTEREST AND PENALTIES ASSOCIATED WITH TAX POSITIONS ARE RECORDED AS GENERAL AND ADMINISTRATIVE EXPENSE IN THE PERIOD ASSESSED NO INTEREST OR PENALTIES HAVE BEEN ASSESSED AS OF SEPTEMBER 30, 2013 OR 2012 TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION INCLUDE 2011 THROUGH 2013

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As Filed Data -

DLN: 93493226016744

Ctatament of

Statement of Activities Outside the United States

2012

OMB No 1545-0047

20

Department of the Treasury
Internal Revenue Service

SCHEDULE F

(Form 990)

Complete if the organization answered "Yes" to Form 990,
 Part IV, line 14b, 15, or 16.
 ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	of the organization				Employer ident	ification number
	ANCE FOR SUSTAINABLE ENER	RGY LLC			26-1939342	
Pa	rt I General Information "Yes" to Form 990, Pai			ne United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the cassistance, the grantees' eligible the grants or assistance?	jibility for the o	grants or assis	tance, and the selecti	on criteria used to awa	
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's pı	ocedures for monitori	ng the use of grant fu	nds outside
3	Activites per Region (The follow	ung Part I, line 3	table can be du	iplicated if additional spa	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	EUROPE	0	1	PRO GRAM SERVICES	SEE PART V	311,036
3a	Sub-total	0	1			311,036
b	Total from continuation sheets to Part I	0	0			0
c	Totals (add lines 3a and 3b)	0	1			311,036

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nur	mber of other or	ganizations or en	tities					

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
							appraisal, other)

Part IV Foreign Forms

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

Schedule F (Form 990) 2012

Part V Supplemental Information

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

Identifier	ReturnReference	Explanation
(E) SPECIFIC TYPES OF SERVICES IN REGION	REGION EUROPE	ONE ALLIANCE EMPLOYEE PROVIDED SERVICES TO THE UNITED NATIONS ENVIRONMENT PROGRAM'S ENERGY BRANCH FOR RENEWABLE ENERGY AND ENERGY EFFICIENCY ANALYSIS IN SUPPORT OF THE US DEPARTMENT OF ENERGY INTERNATIONAL AND STRATEGIC ANALYSIS PROGRAMS

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Schedule I (Form 990)

Department of the Treasury

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990 OMB No 1545-0047

2012

DLN: 93493226016744

Open to Public

Inspection Internal Revenue Service **Employer identification number** Name of the organization ALLIANCE FOR SUSTAINABLE ENERGY LLC 26-1939342 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (e) A mount of non-(a) Name and address of **(b)** EIN (c) IRC Code section (d) Amount of cash (f) Method of (g) Description of (h) Purpose of grant ıf applıcable valuation non-cash assistance organization or assistance grant cash or government assistance (book, FMV, appraisal, other) (1) SINODE SYSTEMS 46-2971717 50,000 **CLEAN ENERGY** 3440 S DEARBORN ST COMPANY START-113N **UP SUPPORT** CHICAGO, IL 60616 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
			1	1	

Part IV	Supplemental	Information
---------	--------------	-------------

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
	ORGANIZATIONS	ALLIANCE FOR SUSTAINABLE ENERGY, LLC INFREQUENTLY MAKES AWARDS OR DONATIONS ON A CASE BY CASE BASIS TO ORGANIZATIONS THAT HAVE A SIMILAR MISSION TO ALLIANCE MONITORING ACTIVITIES ARE BASED ON SPECIFIC REQUIREMENTS OF THE INDIVIDUAL AWARD

Schedule I (Form 990) 2012

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DLN: 93493226016744

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization ALLIANCE FOR SUSTAINABLE ENERGY LLC **Employer identification number**

26-1939342

Par	t I Questions Regarding Compensation				
			Yes	No	
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form				
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items				
	First-class or charter travel Housing allowance or residence for personal use				
	Travel for companions Payments for business use of personal residence Lay idempification and grees up payments. Health or social alluh duse or initiation feed				
	Tax idemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)				
b	If any of the boxes in 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 officers,				
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III				
	▼ Compensation committee ▼ Written employment contract				
	✓ Independent compensation consultant ✓ Compensation survey or study				
	Form 990 of other organizations Approval by the board or compensation committee				
4	During the year, did any person listed in 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		No	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo	
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III				
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of				
а	The organization?	5a		Νo	
b	Any related organization?	5b		Νo	
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of				
а	The organization?	6a		Νo	
b	Any related organization?	6b		Νo	
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was				
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe				
	ın Part III	8		Νo	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9			

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

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

Note. The sum of columns (B)(1)-(111) 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	d Title (B) Breakdown of W-2 and/or 1099-MISC compensation		(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2012

Part III Supplemental Information

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 26-1939342

Name: ALLIANCE FOR SUSTAINABLE ENERGY LLC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name	(B) Breakdowr	(B) Breakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
	(ı) 426,6 ıı)	99 0 177,792 0 0	330,181 0	42,776 0	30,192 0	1,007,640 0	0 0
	(1) 295,4	94,371 0 94,371	1,832 0	80,005 0	16,073 0	487,691 0	0 0
	302,3	96,079 0 0	884 0	26,062 0	15,916 0	441,241 0	0
	(ı) 205,2 ıı)	24 0 49,180 0	943 0	90,250 0	24,354 0	369,951 0	0
	(ı) 178,9 ıı)	36,292 0 0	792 0	181,298 0	14,001 0	411,298 0	0
	90,6	59 0 557 0 0	336 0	97,630 0	17,299 0	206,491 0	0 0
	(ı) 196,8 ıı)	78,755 0 78,755	53,375 0	0	2,995 0	331,957 0	0
	(1) 232,9	76 50,273 0 0	28,344 0	90,851 0	15,967 0	418,411 0	0
	(1) 240,8	38 0 49,203 0	516 0	5,789 0	1,586 0	297,932 0	0 0
	(ı) 227,5 ıı)	25 0 57,346 0 0	984 0	88,454 0	8,752 0	383,061 0	0
	(1) 220,5	59 0 55,125 0	2,018	43,656 0	30,552 0	351,910 0	0
	(ı) 204,6 ıı)	30,471 0 0	83,835 0	5,250 0	21,270 0	345,520 0	0
	(ı) 153,2 ıı)	33,698 0 0	4,784 0	31,236 0	7,136 0	230,137 0	0
MS CATHERINE PORTO ((1) 59,0	0 0 0		15,481 0	1,974 0	228,739 0	0

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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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization ALLIANCE FOR SUSTAINABLE ENERGY LLC	Employer identifi	cation number
	26-1939342	

ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	FORM 990, PART I, LINE 1	THE ALLIANCE MISSION IS TO OPERATE THE U.S. DEPARTMENT OF ENERGY'S NATIONAL RENEWABLE ENERGY LABORATORY TO DEVELOP RENEWABLE ENERGY AND ENERGY EFFICIENCY TECHNOLOGIES AND PRACTICES, ADVANCES RELATED TO SCIENCE AND ENGINEERING, AND TRANSFERS KNOWLEDGE AND INNOVATIONS TO ADDRESS THE NATION'S ENERGY AND ENVIRONMENTAL GOALS

Idontifios	Doturn	Evalenation
Identifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE	ON OCTOBER 1, 2008, THE ALLIANCE BESAM MANAGEMENT OF THE US DEPARTMENT OF ENERGY'S NATIONAL RENEWABLE ENERGY LABORATORY UNDER PRIME CONTRACT NO DE AC36-08-028308 THE NATIONAL RENEWABLE ENERGY LABORATORY (INSEL) IS THE NATIONS PRIMARY LABORATORY FOR RENEWABLE ENERGY AND ENERGY EFFICIENCY RESEARCH AND DEVELOPMENT (R8D). THE ALLIANCE FOR SUSTAINABLE ENERGY AND ENERGY EFFICIENCY RESEARCH AND DEVELOPMENT (R8D). THE ALLIANCE FOR SUSTAINABLE ENERGY (INRC.) DEVELOPS CLEAN BYERGY AND ENERGY EFFICIENCY TECHNOLOGIES, SYSTEMS, AND PRACTICES, ADVANCES RELATED SCIENCE AND ENGINEERING, AND INTEGRATES INNOVATIONS AND KNOWLEDGE TO A CHIEVE NATIONAL ENERGY GALS. RESEARCH, DEVELOPMENT, TESTING AND VALIDATION, SYSTEMS INTEGRATION AND ANALYSIS ARE PROVIDED WITHIN FIVE MAJOR PROGRAM AREAS ENERGY SYSTEMS INTEGRATION AND ANALYSIS ARE PROVIDED WITHIN FIVE MAJOR PROGRAM AREAS ENERGY SYSTEMS INTEGRATION RENEWABLE GENERATION, SUSTAINABLE TRANSPORTATION, BYERGY-SAVINS HOMES, BUILDINGS, AND MANIFACTURING, AND STRATEGIC PROGRAMS ALLIANCE STRATEGY FOR IMPACT PARTIFIESS EXTENSIVELY WITH SUPPLIERS AND USERS TO BRISK CLEAN ENERGY TECHNOLOGIES TO THE COMMERCIAL MARKET AND BYABLES THEM TO-SCALE WITHIN THE ATONS ENERGY INFRASTRUCTURE. THIS EFFORT SUPPORTS ENERGY SECURITY AND A UBBRANT ECONOMY WHILE ENSURING STEWARDSHIP OF THE ENVIRONMENT RENEWABLE ELECTRICITY GENERATION. TECHNOLOGIES INCLIDING SOLAR, WATER WIND, AND GEOTHERWAL THE ALLIANCE STRATEGY IS FOUNDED TO THE ADMINISTRATION OF THE

Identifier	Return Reference	Explanation
	SECTION B, LINE 11	THE ALLIANCE BOARD OF DIRECTORS HAVE ASSIGNED TO THE ALLIANCE FINANCE AND AUDIT COMMITTEE, THROUGH THE COMMITTEE CHARTER, THE RESPONSIBILITY TO REVIEW AND APPROVE THE FORM 990 THE RETURN IS PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO FILING

Identifier I	Return Reference	Explanation
P S	FORM 990, PART VI, BECTION B, LINE 12C	ALL ALLIANCE EMPLOYEES ARE REQUIRED TO ATTEND ETHICS TRAINING WHICH INCLUDES THE PROCESS FOR IDENTIFICATION AND DISCLOSURE OF CONFLICTS OF INTEREST EMPLOYEES ARE REQUIRED TO FILE A WRITTEN DISCLOSURE STATEMENT CONCERNING OUTSIDE SERVICES, AND/OR ACTUAL OR POTENTIAL CONFLICTS OF INTEREST BETWEEN THE EMPLOYEE'S WORK AND PERSONAL, FINANCIAL, OR BUSINESS INTEREST THE ALLIANCE CHIEF OPERATING OFFICER IS RESPONSIBLE FOR THE REVIEW AND APPROVAL FOR EMPLOYEE REQUESTS FOR APPROVAL OF OUTSIDE CONSULTING OR EMPLOY MENT EMPLOYEES WHOSE REGULAR RESPONSIBILITIES INVOLVE MANAGING OR EXECUTING LICENSE AGREEMENTS FOR INTELLECTUAL PROPERTY OR THE PREPARATION OR EXECUTION OF COOPERATIVE RESEARCH AND DEVELOPMENT AGREEMENTS (CRADAS) OR OTHER TECHNOLOGY TRANSFER OR TECHNOLOGY PARTNERSHIP ARRANGEMENTS MUST ANNUALLY OR UPON CHANGES IN RELEVANT PERSONAL OR FAMILY CIRCUMSTANCES OR THE NATURE OF WORK ASSIGNED, COMPLETE AN EMPLOYEE'S STATEMENT OF ECONOMIC INTEREST IF AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST EXISTS, THE EMPLOYEE CONSULTS WITH THE GENERAL COUNSEL OR DESIGNEE TO IDENTIFY AND IMPLEMENT MITIGATION OR AVOIDANCE ACTIONS, OR RECUSES SELF IF AN APPROPRIATE MITIGATION OR AVOIDANCE ACTION CANNOT BE IDENTIFIED ALL ALLIANCE OFFICERS AND BOARD OF DIRECTOR MEMBERS ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST DISCLOSURE UPON APPOINTMENT, AND AN ANNUAL CONFLICT OF INTEREST DISCLOSURE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	GOVERNANCE OF EXECUTIVE COMPENSATION IS CHARTERED THROUGH THE ALLIANCE HUMAN RESOURCE COMPENSATION COMMITTEE. EXTERNAL THIRD PARTY RESOURCES ARE RETAINED ON A BIENNIAL BASIS TO REVIEW ALL ELEMENTS OF EXECUTIVE REMUNERATION (BASE SALARY, ANNUAL INCENTIVES, RETIREMENT BENEFITS, HEALTH AND WELFARE BENEFITS AND EXECUTIVE PERQUISITES) TO INSURE COMPETITIVENESS OF ALL THE ELEMENTS OF CASH COMPENSATION RELATIVE TO THE MARKET FOR BOTH BASE COMPENSATION AND TOTAL COMPENSATION THERE ARE NO PERSONS SERVING ON THE COMPENSATION COMMITTEE WITH A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENTS CONTEMPORANEOUS DOCUMENTATION AND RECORDS ARE RETAINED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	ALLIANCE DOES MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	DISTRIBUTIONS -4,281,646