Form	887	'9-T	Έ
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# IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning 7/01 , 2022, and ending 6/30 , 20 2023

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information.

2022

Department of the Treasury Internal Revenue Service Name of filer

NW ENERGY COALITION Name and title of officer or person subject to tax

EIN or SSN 91-1144122

Nancy Hirsh Coalition Director

#### Part I Type of Return and Return Information

and Form 5330 filers may enter doll 6a, 7a, 8a, 9a, or 10a below, and the 6b, 7b, 8b, 9b, or 10b, whichever is a line below. Do not complete more th		nter whole dollars only. If yo sing filed with this form was But, if you entered -0- on the	bu check the box on line blank, then leave line e return, then enter -0	ne <b>1a, 2a, 3a, 4a, 5a,</b> e <b>1b, 2b, 3b, 4b, 5b,</b> D- on the applicable
1a Form 990 check here	<b>b Total revenue,</b> if any (Form 990,	Part VIII, column (A), line	12) 1b	1,812,353.
2a Form 990-EZ check here	<b>b Total revenue,</b> if any (Form 990-			
3a Form 1120-POL check here	<b>b Total tax</b> (Form 1120-POL, line 2			
4a Form 990-PF check here	b Tax based on investment incom			
5a Form 8868 check here	b Balance due (Form 8868, line 3c			
6a Form 990-T check here	<b>b Total tax</b> (Form 990-T, Part III, li			
7a Form 4720 check here	<b>b Total tax</b> (Form 4720, Part III, lir			
8a Form 5227 check here	b FMV of assets at end of tax year			
9a Form 5330 check here	<b>b Tax due</b> (Form 5330, Part II, line	; 19)		
10a Form 8038-CP check here.	b Amount of credit payment reque	sted (Form 8038-CP, Part	III, line 22) <b>10b</b>	
Part II Declaration and Sign	nature Authorization of Officer	r or Person Subject to	Tax	
Under penalties of perjury, I declare that (name of entity)	at $X$ I am an officer of the above the 2022 electronic return and accom		son subject to tax with , (EIN)	
electronic return. I consent to allow IRS and to receive from the IRS (a) a processing the return or refund, and (c) initiate an electronic funds withdrawal ( of the federal taxes owed on this ret U.S. Treasury Financial Agent at 1-8 financial institutions involved in the inquiries and resolve issues related return and, if applicable, the consen	d complete. I further declare that the my intermediate service provider, trar an acknowledgement of receipt or rea the date of any refund. If applicable, I a (direct debit) entry to the financial institu urn, and the financial institution to de 888-353-4537 no later than 2 business processing of the electronic payment to the payment. I have selected a per t to electronic funds withdrawal.	nsmitter, or electronic return ason for rejection of the tran authorize the U.S. Treasury an tion account indicated in the t ebit the entry to this account s days prior to the payment of taxes to receive confider	n originator (ERO) to nsmission, <b>(b)</b> the rea- nd its designated Finan- tax preparation software t. To revoke a payme (settlement) date. I a ntial information nece:	send the return to the son for any delay in cial Agent to e for payment nt, I must contact the ilso authorize the ssary to answer
PIN: check one box only		ŗ		-
X lauthorize <u>Bembridge &amp;</u>		to enter my PIN	96500	as my signature
	ERO firm name		Enter five numbers, but do not enter all zeros	
	cally filed return. If I have indicated w as part of the IRS Fed/State program, I a reen.			
return. If I have indicated within t	o tax with respect to the entity, I will enter this return that a copy of the return is be enter my PIN on the return's disclosure	ing filed with a state agency(i	the tax year 2022 elec ies) regulating charities	tronically filed as part of
Signature of officer or person subject to tax			Date	
Part III Certification and A	Authentication			
ERO's EFIN/PIN. Enter your six-digit number (EFIN) followed by your five		916942 Do not ente		
	ry is my PIN, which is my signature on the requirements of <b>Pub.</b>			
ERO's signature Galen L. Kaw	vaguchi CPA	Date		
	ERO Must Retain This	s Form – See Instruct	ions	

Form	8868	

(Rev. January 2022) Department of the Treasury Internal Revenue Service

#### Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

► File a separate application for each return.

#### Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.* 

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

 Name of exempt organization or other filer, see instructions.
 Taxpayer identification number (TIN)

Type or print	NW ENERGY COALITION	91-1144122	. ,		
	NW ENERGI COALITION Number, street, and room or suite number. If a P.O. box, see instructions.	91-1144122			
File by the due date for	Number, sueet, and foom of suite number. If a f. O. box, see instructions.				
filing your					
return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
instructions.	Seattle, WA 98104				

Application Is For		Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

● The books are in the care of ► Nancy Hirsh 811 1st Ave #305 Seattle WA 98104	
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Telephone No.	►	206	621-	0094
		200	021-	0094

Fax No. ►

•	If the organization does not have an office or place of business in the United States, check this box
•	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group,
	check this box ► . If it is for part of the group, check this box ► and attach a list with the names and TINs of all members the extension is for.
-	1 I request an automatic 6-month extension of time until $5/15$ , 20 24 , to file the exempt organization return
	for the organization named above. The extension is for the organization's return for:

•	calendar	year	20	or

►	X tax year beginning	, 20	22_, and ending	_ <u>6/30</u> , 20	<u>23 _</u> ·
		1			

2	If the tax year entered in line 1 is for less than 12 months, check reason.	initial return	Filial retu	111
	Change in accounting period			

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$ 0	).
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3 b	\$ 0	).
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$ 0	).

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

Form	99	0
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For	m <b>9</b>	90										I	OMB No. 1545-0047
FUI						-		Exempt Fi					2022
Dan		t of the Tre		Unders	•••				• • •		•		Open to Public
Inter	nal Re	t of the Tre venue Serv	vice		Go to www.i	rs.gov/Form99	0 for instru	on this form as i Ictions and th	ne latest info	ormation			Inspection
Α	Fort	the 2022		year, or ta	x year begin	ning 7/(	)1	, 2022,	, and ending	<b>i</b> 6/			<b>20</b> 2023
В	Check	if applicat									D Employ	er ident	ification number
	A	Address cha			Y COALIT							1144	
	Ν	Name chan			t Avenue						E Telepho	ne num	ber
	h	nitial returr	, se	allie,	WA 9810	4					(20	6) 6	21-0094
	F	inal return∕te	erminated										
	A	Amended re							<u> </u>		G Gross r		=/===/===
	A	Application	pending F	Name and ad	Idress of principa	<sup>I officer:</sup> Nan	cy Hirs	sh		• •	a group retur		103 110
			Sa	me As (	<u>C Above</u>		-			lf "No,	l subordinates " attach a list	include See ins	d? Yes No
1		k-exempt s	tatus: X	501(c)(3)	501(c) (	) (ii	nsert no.)	4947(a)(1) or	527				
J	We	ebsite:		nwener	gy.org				ŀ	<b>H(c)</b> Group	exemption nu	umber	
ĸ		m of organ		Corporation	Trust	Association	Other	L	Year of formatio	n: 198	1 <b>M</b> s	State of I	egal domicile: WA
Pa	art I	Sur	mmary										
	1	Briefly	describe t	the organiz	ation's miss	ion or most	significant	activities: <u>The</u>	<u>e NW Ene</u>	<u>rgy C</u>	oaliti	<u>on a</u>	dvocates for
e													, we promote
าลท		ener	<u>gy err</u>	<u>iciency</u>	h and w		rogy, <u>c</u> o	onsumer p ation in	the Colu	<u>on, i</u>	Divor		energy
veri	2		this box					ations or disp					
ĝ	3							e 1a)				3	13
ిర	4							/ (Part VI, line				4	13
Activities & Governance	5							Part V, line 2a				5	11
žİVİ	6				•							6	1
Ă								ine 12				7a	0.
	b	net un	irelated bu	siness taxa	able income	from Form S	90-1, Part	I, line 11		1		7b	0.
	8	Contrik	outions on	d arapta (E	Port \/III line	16)					Prior Year	0.0	Current Year
ue	9 9										L,475,1	275.	<u>1,734,168.</u> 67,547.
Revenue	10	-				÷.						.7 <u>5</u> . 647.	10,638.
Re	11							and 11e)			1/0	, , , ,	10/000.
	12							column (A), li			L,481,9	922.	1,812,353.
	13	Grants	and simila	ar amounts	s paid (Part I	X, column (	A), lines 1-	3)			· · ·		· ·
	14	Benefi	ts paid to	or for mem	nbers (Part I)	K, column (A	A), line 4).						
s	15	Salarie	es, other co	ompensati	on, employe	e benefits (F	Part IX, colu	umn (A), lines	s 5-10)		730,6	589.	910,797.
	16a	Profes	sional fund	draising fee	es (Part IX, d	column (A),	line 11e)						
Expense	b	Total f	undraising	expenses	(Part IX, col	umn (D), lin	e 25)	1 -	76,038.				
ш	17						· · · · · · · · · · · · · · · · · · ·				446,7	36	598,880.
	18		•					(A), line 25)		1	L,177,4		1,509,677.
	19		•		-			· · · · · · · · · · · · · · · · · · ·			304,4		302,676.
r e	-									Beainni	ng of Curren		End of Year
Net Assets or Fund Balances	20	Total a	assets (Par	rt X, line 1	6)						L,528,6		1,793,926.
Ase Ba	21	Total I	iabilities (F	Part X, line	. 26)						313,2	221.	267,623.
Peter	22	Net as	sets or fur	nd balance:	s. Subtract li	ne 21 from l	line 20			1	L,215,4	73.	1,526,303.
Pa	art II	Sig	nature E	Block									, ,
Und	er pena	alties of pe	rjury, I declare	e that I have e	xamined this retu	urn, including ac	companying so	hedules and state	ements, and to the	ne best of n	ny knowledge	and beli	ef, it is true, correct, and
com	piete. I	Declaration	of preparer (	other than offi	cer) is based on	all information o	t which prepar	er has any knowle	edge.				
		0	nature of office	or						Date			
Sig	gn	-							~				
He	re		ancy Hi						Сс	baliti	ion Dir	ecto	)r
			nt/Type prepa			Preparer's sig	nature		Date			., 1	PTIN
-					wah 4 ODT			mak der			Check		
Pa								guchi CPA	4		self-employe	ed	P01740922
	epar e Oi		m's name	-	ridge & i						Firm's EIN	07	1005050
03		Firi	m's address		15th Ave		303				Firm's EIN		-1335358 -323-7103
				Seall	le, WA 🖞	γυττζ					Phone no.	200.	JZJ-1IUJ

May	the I	IRS	discuss	this	returr	n with	the	preparer	show	/n abo	oveî	? Se	e i	instructions	Х	Yes
DAA	-	-												•		-

BAA For Paperwork Reduction Act Notice, see the separate instructions.

No

Form	990 (2022) NW ENERGY COALITION	91-1144122	Page <b>2</b>
Par			
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	Х
1	Briefly describe the organization's mission:		
	See Schedule 0		
2	Did the organization undertake any significant program services during the year which were not listed on the	ne prior	
2	Form 990 or 990-EZ?	· —	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any progra	m services? Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program	services, as measured by	expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloc and revenue, if any, for each program service reported.	cations to others, the total e	expenses,
4a	(Code: ) (Expenses \$ 1,034,733. including grants of \$	) (Revenue \$	)
	POLICY: The Coalition engages in in-depth policy analysis and	advocacy on a wi	de
	range of energy policy and regulatory issues at the utility,	state, regional a	nd
	federal level. NWEC convenes disparate voices and perspective	s to engage in di	alogue,
	come to a common understanding and move forward with shared s		
	advances utility and government energy efficiency and renewab		
	reduce climate pollution and create an equitable clean energy		
	energy codes and standards, low-income and equity-focused energy		
	and utility scale renewable energy, and power market and tran		
	Policy work analyzes regulatory issues including rate design,		
	models, electrification of transportation and decarbonization		
	energy system impacts of changes to hydroelectric dams in the	<u>Columbia River b</u>	asin
-			
4b	(Code:) (Expenses \$ 112,255. including grants of \$	) (Revenue \$	)
	COMMUNICATIONS: The organization issues regular communication		
	releases, fact sheets and newsletters. These communications penergy and climate policy developments affecting individual N		
	region as a whole, including information on energy efficiency		
	consumer/low-income issues, and protection of fish and wildli		
	power system. More in-depth analyses are presented via white p		
	publications.	<u>Supers and Speera</u>	±
4c	(Code: ) (Expenses \$ 93,839. including grants of \$	) (Revenue \$	)
	OUTREACH: The Coalition convenes its members and the wider convenes	mmunity to engage	in
	dialogue on clean energy and climate policy developments affe		
	Northwest states and the region as a whole, including informa		
	efficiency, renewable energy, consumer/low-income issues, dec	<u>arbonization of t</u>	he
	energy sector, and protection of fish and wildlife imperiled		
	This is done through state caucus meetings, full member meeting	<u>ngs, webinars, an</u>	d
	conferences.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue	e \$	)
4e	Total program service expenses1,240,827.		
BAA	TEEA0102L 09/01/22	Forr	m <b>990</b> (2022)

Form 990 (2022) NW ENERGY COALITION

Par	t IV Checklist of Required Schedules			
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 X	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3		Х
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	Х	
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? <i>If "Yes," complete Schedule C, Part III</i>	5		Х
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? <i>If "Yes," complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		х
	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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	Х	
	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
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? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c		Х
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	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		Х
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		Х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х
BAA	• • • •		990	(2022)

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Form 990 (2022) NW ENERGY COALITION

Part IV

23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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		Х
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? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			

					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	10			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eporta	able gaming			
	(gambling) winnings to prize winners?			1c	Х	
	TEE 4010/U 09/01/22				000 /	2022

22

Checklist of Required Schedules (continued)

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.

No

Х

Yes

Form	990 (2022) NW ENERGY COALITION 91-114412	2	F	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
	ments, filed for the calendar year ending with or within the year covered by this return 2a 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	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		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
	services provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7c		х
Ь	Form 8282?			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7g		<b> </b>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	[	T
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		Х
17	<b>Section 501(c)(21) organizations.</b> Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			
BAA	TEEA0105L 09/01/22	Form	99 <b>0</b>	(2022)

Form 990 (2	2022) NW ENERGY COALITION
Part VI	Governance, Management, and Disclosure. For each

**Governance, Management, and Disclosure.** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Check if Schedule O contains a response or note to any line in this Part VI. Х

500	tion A. doverning body and management				Vac	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	13		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations					
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors, trustees, or key employees to a management company or other person	ne dire	ct supervision	3		Х
4	Did the organization make any significant changes to its governing documents					
	since the prior Form 990 was filed?			4		Х
5	Did the organization become aware during the year of a significant diversion of the organiza	tion's	assets?	5		Х
6	Did the organization have members or stockholders?See.Schedule.O			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a members of the governing body?SeeSchedule.0			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) me stockholders, or persons other than the governing body?	mbers	' See Sch O	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken the following:	during	the year by			
	The governing body?			8a	Х	L
b	Each committee with authority to act on behalf of the governing body?			8b	Х	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i> .			9		Х
Sec	tion B. Policies (This Section B requests information about policies not req	uirea	l by the Internal Re	eveni		ode.)
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, operations are consistent with the organization's exempt purposes?			10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		ee Schedule O			
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that to conflicts?		-	12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If " Schedule O how this was done</i>	Yes," (	lescribe on	12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approv persons, comparability data, and contemporaneous substantiation of the deliberation and de					
	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organizationSee . Schedule0.			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar taxable entity during the year?			16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu participation in joint venture arrangements under applicable federal tax law, and take steps organization's exempt status with respect to such arrangements?	to safe	eguard the	16b		
Sec	tion C. Disclosure					
	List the states with which a copy of this Form 990 is required to be filed None					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable available for public inspection. Indicate how you made these available. Check all that apply.	), 990	, and 990-T (section 50	01(c)(3	)s onl	ly)
	X         Own website         X         Another's website         X         Upon request         X         Other		olain on Schedule O) S		Sch.	0
	Describe on Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest p the public during the tax year. See Schedule 0			ble to		
20	State the name, address, and telephone number of the person who possesses the organizat		books and records.			
	Nancy Hirsh 811 1st Ave #305 Seattle WA 98104 206 621-009	4				

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	Schedule	O. See	e instructions.
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Form 990 (2022) NW ENERGY COALITION	91-1144122	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highes Independent Contractors	st Compensated Employee	es, and
Check if Schedule O contains a response or note to any line in this Part VII		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compens	ated Employees	
a Complete this table for all persons required to be listed. Report compensation for the calendar year endin organization's tax year.	ng with or within the	
• List all of the organization's <b>current</b> officers, directors, trustees (whether individuals or organization) compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	ations), regardless of amount of	

• List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

				(C)	)					
(A) Name and title	<b>(B)</b> Average hours	ge is both an officer and a Rep s director/trustee) compen-		<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of other				
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) NANCY HIRSH	40									
Executive Dir.	0			Х				80,000.	0.	0.
(2) SHANNA BROWNSTEIN	1									
Chair	0	Х		Х				0.	0.	0.
(3) HANNAH CRUZ	1									
Vice Chair	0	Х		Х				0.	0.	0.
(4) CHUCK MAGRAW	1									
Treasurer	0	Х		Х				0.	0.	0.
(5) JOSEPH BOGAARD	1									
Secretary	0	Х						0.	0.	0.
(6) ERIC MAZZI	1									
BC Caucus Rep.	0	Х						0.	0.	0.
(7) BONNIE FRYE HEMPHILL	1									
WA Caucus Rep.	0	Х						0.	0.	0.
(8) JEFF_FOX	1									
Montana Caucus	0	Х						0.	0.	0.
(9) NIC NELSON	1									
Idaho Caucus Rp	0	Х						0.	0.	0.
(10) DAVID McCAUGHEY	0									
Director	0	Х						0.	0.	0.
(11) PETER MOSTOW	1									
Director	0	Х						0.	0.	0.
(12) MEGAN OWEN	1									
Director	0	Х						0.	0.	0.
(13) JAIMES VALDEZ	1									
Director	0	Х						0.	0.	0.
(14) DAVID BURCHFIELD	1									
Director	0	Х						0.	0.	0.
BAA	TEEA0	107L	09/01	/22						Form <b>990</b> (2022)

#### Form 990 (2022) NW ENERGY COALITION

	990 (2022) NW ENERGY COALITION				_				91-114412	
Pa	t VII Section A. Officers, Directors, Tru		Key	Em		-	es, ar	d Highest Con	npensated Emp	oyees (continued)
	(A) Name and title	(B) Average hours per week	box	, unles cer and	s per 1 a di	tion more rson is irector	than one s both a r/trustee	Reportable compensation from	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
		(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	T the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099-NEC)	compensation from the organization and related organizations
(15)										
(16)										
(17)										
(18)										
(19)										
(20)		 								
(21)										
(22)										
(23)										
(24)										
(25)					_					
1b	Subtotal	<u> </u>	 					80,000.	0.	0.
	Total from continuation sheets to Part VII, Secti								0.	0.
	Total (add lines 1b and 1c).							/	<u>0.</u>	0.
2	Total number of individuals (including but not limited from the organization 0	to those	listed	above	e) w	no re	eceive	a more than \$100,0	JU of reportable comp	bensation
3	Did the organization list any <b>former</b> officer, direc on line 1a? If "Yes, "complete Schedule J for suc	tor, truste th individu	ee, ke ual	ey en	nplo	yee,	, or hiç	ghest compensated	d employee	Yes         No           3         χ
4	For any individual listed on line 1a, is the sum of the organization and related organizations greater such individual	er than \$1	150,00	) ? OC	f "Y	'es,"	сотр	lete Schedule J fo	r	. 4 X
5	Did any person listed on line 1a receive or accru for services rendered to the organization? If "Ye									
Sec	ion B. Independent Contractors									
1	Complete this table for your five highest compen compensation from the organization. Report comper	isated ind	lepen the c	dent alend	con ar y	tract ear e	tors th ending	at received more t with or within the o	han \$100,000 of rganization's tax year	
	(A) Name and business add	ress						<b>(B</b> Description	) of services	<b>(C)</b> Compensation
2	Total number of independent contractors (including l \$100,000 of compensation from the organization		nited to	o thos	se lis	sted	above	) who received more	e than	

# Form 990 (2022) NW ENERGY COALITION Part VIII Statement of Revenue

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		Check if Schedule			a resp	oonse or note to an	v line in this Part VI	<u>III</u>		[
							<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from ta under sections 512-514
ų ų	1a	Federated campaigr	าร		1a					
and Other Similar Amounts	b	Membership dues			1b	143,900.				
a da c		Fundraising events.			1c					
lar,		Related organization			1d					
ù ji		Government grants (contr			1e					
and Other Similar Amounts	t	All other contributions, gi similar amounts not inclu			1f	1,590,268.				
₫ <del>5</del>	q	Noncash contributions inc				1,390,200.				
		lines 1a-1f			1g					
	h	Total. Add lines 1a-	1t		 T	Business Code	1,734,168.			
une	2-	D		<b>D</b>	-	Business Code	F2 025	F2 025		
Program Service Revenue	Za h	<u>Program Serv</u>	<u>1C</u> €	<u>e Reve</u> i	<u>nue</u>		53,025.	53,025.		
Se H	и С	<u>Conference</u> <u>R</u>					11,070.	11,070.		
ŠŽ	d d	<u>Reimbursemen</u>	<u>LS</u>				3,452.	3,452.		
20	e	'								
Iran	f	All other program se	ervic	e revenu	e					
Š.		Total. Add lines 2a-					67,547.			
	3	Investment income (in					01,041.			
	J	other similar amoun	its).				10,638.			10,638
	4	Income from investr	ment	t of tax-e	xempt	t bond proceeds				
	5	Royalties								
	_			(i) Re	eal	(ii) Personal				
		-	6a							
			6b							
		Rental income or (loss)								
		Net rental income o ר	r (10:	(i) Secu		(ii) Other				
	7a	Gross amount from sales of assets		(I) Secu	inties					
	_	other than inventory	7a							
	b	Less: cost or other basis and sales expenses	7b							
	с		7c							
		Net gain or (loss).	-							
a)		Gross income from fundra								
ž	u	(not including \$	aronig	9 010110						
eve		of contributions reported	on lir	ne 1c <b>)</b> .						
Ť		See Part IV, line 18			88	a				
Other Revenue		Less: direct expense			8	-				
5	С	Net income or (loss)	) fro	m fundra	ising e	events				
	9a	Gross income from gamin	ng act	ivities.						
		See Part IV, line 19.			98					
		Less: direct expense			<b>9</b>	-				
		Net income or (loss)				viues				
	1 <b>0</b> a	Gross sales of inventory, returns and allowances.	less .		10	a				
		Less: cost of goods			10					
		Net income or (loss)								
			,			Business Code				
đ	11a									
Ž	11a b c d	,								
Š	с									
Revenue	d	All other revenue		<u> </u>						
	е	Total. Add lines 11a	<u>a-1</u> 1c	<u>d</u>	• • • • • • • •					
	12	Total revenue. See	instr	ructions.			1,812,353.	67,547.	0.	10,638

	Check if Schedule O contains a	response or note to any (A)	(B)	(C)	X
Do 1 6b, 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	80,000.	36,800.	16,000.	27,200.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	676,711.	530,733.	52,104.	93,874.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	91,891.	69,018.	8,224.	14,649.
10	Payroll taxes	62,195.	46,655.	5,613.	9,927.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0\$ch. (Advertising and promotion	) 263,514.	254,115.	2,744.	6,655.
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	66,568.	49,626.	5,955.	10,987
17	Travel	13,058.	12,125.	1.	932
	Payments of travel or entertainment expenses for any federal, state, or local public officials.	13,030.	12,123.		
19	Conferences, conventions, and meetings	7,130.	7,055.	1.	74.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,085.	814.	98.	173.
23		378.	284.	34.	60.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Member and Ally Support	208,550.	208,550.		
	Bank & Merchant Fees	11,298.	3,879.	240.	7,179.
	Telephone and Web	8,660.	6,526.	768.	1,366
	Equipment_Rent/Maintenance	6,464.	4,848.	582.	1,034
e	All other expenses	12,175.	9,799.	448.	1,928
25	Total functional expenses. Add lines 1 through 24e	1,509,677.	1,240,827.	92,812.	176,038
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)				

Form 990 (2022) NW ENERGY COALITION

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

 nd 501(c)(4) organizations must complete an communication of the second sec

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## Form 990 (2022) NW ENERGY COALITION

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Part X Balance Sheet

		Balance Sheet Check if Schedule O contains a response or note to	o any line	e in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing			9,006.	1	23,591.
	2	Savings and temporary cash investments			867,175.	2	1,288,884.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			250,000.	4	51,136.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	er office I contribu rsons	r, director, Itor, or 35%		5	
	6	Loans and other receivables from other disgualified p				-	
	Ŭ	section 4958(f)(1)), and persons described in section	•			6	
	7	Notes and loans receivable, net				7	
2	8	Inventories for sale or use	_		8		
Assets	9	Prepaid expenses and deferred charges			16,221.	9	21,996.
As	-		1 1		10,221.	-	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	9,635.			
		Less: accumulated depreciation.		9,635.	1,085.	10c	
	11	Investments – publicly traded securities			130,667.	11	204,806.
	12	Investments – other securities. See Part IV, line 11		-	100/0011	12	201/0001
	13	Investments – program-related. See Part IV, line 11.		-		13	
	14	Intangible assets.		-		14	
	15	Other assets. See Part IV, line 11		254,540.	15	203,513.	
	16	Total assets. Add lines 1 through 15 (must equal line		-	1,528,694.	16	1,793,926.
					_,,		_,,
	17	Accounts payable and accrued expenses		55,306.	17	58,703.	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
ies	21	Escrow or custodial account liability. Complete Part I		21			
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe		22			
	23	Secured mortgages and notes payable to unrelated th	nird partie	es		23	
	24	Unsecured notes and loans payable to unrelated third	parties.			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to rela plete Pa	ted third parties, rt X of Schedule D.	257,915.	25	208,920.
	26	Total liabilities. Add lines 17 through 25	<u></u> .		313,221.	26	267,623.
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	•	X			
ala	27	Net assets without donor restrictions		_	509,643.	27	1,147,610.
B	28	Net assets with donor restrictions		· · · · · · · · · · · · · · · · · · ·	705,830.	28	378,693.
Func		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here				
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equipm	nent fund	L		30	
SS	31	Retained earnings, endowment, accumulated income,	, or other	funds		31	
it A	32	Total net assets or fund balances			1,215,473.	32	1,526,303.
<u>e</u>	33	Total liabilities and net assets/fund balances			1,528,694.	33	1,793,926.

		11441	22	Pa	age <b>12</b>
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,8	312,	<u>353.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	509,	677.
3	Revenue less expenses. Subtract line 2 from line 1	3		302,	676.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,2	215,	473.
5	Net unrealized gains (losses) on investments	5		8,	154.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,	526,	303.
Par	t XII Financial Statements and Reporting		,		
	Check if Schedule O contains a response or note to any line in this Part XII				П
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<b>2</b> a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?		<b>2</b> c		х
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 09/01/22		For	n <b>990</b>	(2022)

SCHEDULE A (Form 990)

## 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. OMB No. 1545-0047

Attach to Form 990 or Form 990-EZ.								Open to Public		
Depart Interna	ment of the Treasury I Revenue Service	G	o to www.irs.gov/For	m990 for instructions a	nd the l	atest in	formation.	Inspection		
Name	of the organization						Employer identifica	ation number		
	ENERGY COAL			·			91-114412			
Par				For lines 1 through 12,				ctions.		
1 ne c	Ĕ-	•		For lines 1 through 12, nurches described in sec		2	,			
2				ach Schedule E (Form		5/1/7/	<i></i>			
3				ization described in sec		)(b)(1)(A	.)(iii).			
4		earch organiza	tion operated in conju	unction with a hospital o	describe	d in sec	tion 170(b)(1)(A)(iii). E	nter the hospital's		
5				ge or university owned				escribed in		
6	A federal, stat	te, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(v).			
7	X An organization in section 170	n that normally r <b>(b)(1)(A)(vi).</b> (	eceives a substantial p Complete Part II.)	part of its support from a	governm	ental uni	t or from the general pul	plic described		
8	A community	trust described	in section 170(b)(1)(	A)(vi). (Complete Part I	l.)					
9	An agricultural research organization described in <b>section 170(b)(1)(A)(ix)</b> operated in conjunction with a land-grant college or or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:									
10	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
11	An organizatio	on organized a	nd operated exclusive	ely to test for public safe	ety. See	section	509(a)(4).			
12	or more public	cly supported o	rganizations describe	ely for the benefit of, to d in <b>section 509(a)(1)</b> of upporting organization	or sectio	n 509(a)	(2). See section 509(a	ut the purposes of one <b>)(3).</b> Check the box on		
а	Type I. A suppo organization(s)		on operated, supervise gularly appoint or elect	d, or controlled by its sup a majority of the directo				the supported on. <b>You must</b>		
b	management o	porting organiz f the supporting <b>e Part IV, Sect</b>	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organizat	having control or ion(s). <b>You</b>		
С				ion operated in connectio	n with, ar	nd functio	onally integrated with, its	supported		
d	Type III non-fu	nctionally integ	rated. A supporting org	anization operated in cor must satisfy a distribu <b>s A and D, and Part V.</b>	nection	with its s	supported organization(s)	) that is not		
e	Check this box	x if the organiz	ation received a writt	en determination from f supporting organization	the IRS I	that it is	a Type I, Type II, Typ	e III functionally		
f	•	51	, ,							
g	Provide the follow	ving informatio	n about the supported	d organization(s).						
	(i) Name of supported or	ganization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is organizat in your ge docun	ion listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support

	tion A. I ublic Support									
Cale begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,047,890.	1,154,972.	783,237.	1,475,100.	1,734,168.	6,195,367.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.			
4	Total. Add lines 1 through 3	1,047,890.	1,154,972.	783,237.	1,475,100.	1,734,168.	6,195,367.			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,701,210.			
6	Public support. Subtract line 5 from line 4						3,494,157.			
Sec	tion B. Total Support	Γ			ſ					
Cale begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> 2022	<b>(f)</b> Total			
7	Amounts from line 4	1,047,890.	1,154,972.	783,237.	1,475,100.	1,734,168.	6,195,367.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,313.	4,383.	3,995.	4,547.	10,638.	27,876.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.			
11	Total support. Add lines 7 through 10						6,223,243.			
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.			
13	First 5 years. If the Form 990 is organization, check this box and	for the organization	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)				
	tion C. Computation of Pu									
	Public support percentage for 20						56.15%			
	Public support percentage from					L	48.55%			
16a	<b>33-1/3% support test–2022.</b> If t and <b>stop here.</b> The organization	he organization di qualifies as a pul	id not check the b plicly supported or	ox on line 13, an rganization	d line 14 is 33-1/3	3% or more, check	κ this box			
b	<b>33-1/3% support test–2021.</b> If the and <b>stop here.</b> The organization	ne organization die 9 qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a rganization	a, and line 15 is 3	3-1/3% or more, o	check this box			
17a	<b>7a 10%-facts-and-circumstances test—2022.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization									
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances te	nd-circumstances est. The organizat	test, check this l ion qualifies as a	box and stop here publicly supporte	e. Explain in Part d organization	VI how the			
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions									

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees	- · · ·					
	received. (Do not include						
_	any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						
3	Gross receipts from activities						
3	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 furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1,						
	2, and 3 received from disgualified persons.						
h	Amounts included on lines 2						
U	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						
<u> </u>	7c from line 6.)						
		( ) 0010	4.2.0010	( ) 0000	(1) 0001	( ) 0000	(0 T
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	<b>(f)</b> Total
-	Amounts from line 6						
TUa	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from						
h	similar sources						
D	Unrelated business taxable income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975	-					
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of						
	capital assets (Explain in						
	Part VI.).						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is	for the organizati	n's first. second.	third, fourth. or t	fifth tax vear as a	section 501(c)(3)	
	organization, check this box and	stop here					
Sec	tion C. Computation of Pu	blic Support F	Percentage				
	Public support percentage for 20		•••••••				010
	Public support percentage from					16	olo
Sec	tion D. Computation of Inv	estment Inco	ne Percentage	e			
17	Investment income percentage f	or 2022 (line 10c,	column (f), divid	ed by line 13, col	umn (f))	17	00
18	Investment income percentage f	rom <b>2021</b> Schedu	lle A, Part III, line	17			010
19a	33-1/3% support tests-2022. If f	the organization o	lid not check the l	box on line 14, a	nd line 15 is more	than 33-1/3%, an	d line 17 🗖
	is not more than 33-1/3%, check						
b	<b>33-1/3% support tests</b> -2021. If the line 18 is not more than 33-1/3%	the organization of the or	lid not check a bo	ox on line 14 or li	ne 19a, and line 1	b is more than 33	-1/3%, and
20	Private foundation. If the organi		•				
20	i invate iounuation. It the organit			1 <del>4</del> , 19a, 01 190, 0	LITELK IIIS DUX dIIL		

#### Page 4

 Part IV
 Supporting Organizations

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

### Section A. All Supporting Organizations

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

Par	Part IV Supporting Organizations (continue	d)		
			Yes	No
11	1 Has the organization accepted a gift or contribution	from any of the following persons?		
а	<ul> <li>a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?</li> </ul>			
	the governing body of a supported organization?			
b	<b>b</b> A family member of a person described on line 11a	above? 11b		
С	${\bf c}$ A 35% controlled entity of a person described on line 11a or 11b	above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI.</b> 11c		

#### Section B. Type I Supporting Organizations

Schedule A (Form 990) 2022

1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization (s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

NW ENERGY COALITION

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.* 

#### Section C. Type II Supporting Organizations

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 1

#### Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played			
	in this regard.	3		
-				

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
  - a The organization satisfied the Activities Test. Complete line 2 below.
  - **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
  - c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

#### 2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

2a

2b

3a

No

Yes

91-1144122

Page 5

Yes

1

2

No

Part V  Page 6

1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No ns mus	v. 20, 1970 (explain ir t complete Sections A	n Part VI). <b>See</b> through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
ä	Average monthly value of securities	1a		
ł	Average monthly cash balances	1b		
C	: Fair market value of other non-exempt-use assets	1c		
C	<b>1 Total</b> (add lines 1a, 1b, and 1c)	1d		
e	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
_				

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

Schedule A (Form 990) 2022

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Section D – Distributions C						
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		1		
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	2		
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in <b>Part VI</b> )		5		
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the organizati in <b>Part VI</b> ). See instructions.	on is responsive (provide	details	8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount			10		
	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2022	ns	(iii) Distributable Amount for 2022	
	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required – <i>explain in Part VI</i> ). See instructions.					
3	Excess distributions carryover, if any, to 2022					
a	From 2017					
k	P From 2018					
	<b>c</b> From 2019					
	From 2020					
	e From 2021					
	f Total of lines 3a through 3e					
ç	Applied to underdistributions of prior years					
ŀ	Applied to 2022 distributable amount					
	i Carryover from 2017 not applied (see instructions)					
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D, line 7: \$					
a	Applied to underdistributions of prior years					
Ł	Applied to 2022 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j and 4c.					
8	Breakdown of line 7:					
a	Excess from 2018					
	Excess from 2019					
C	Excess from 2020					
C	Excess from 2021					
e	Excess from 2022					

BAA

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022	NW ENERGY COALITION	91-1144122	Page 8
B, lines 1 and 2 3a, and 3b; Par	tal Information. Provide the explanations required t IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 t V, line 1; Part V, Section B, line 1e; Part V, Section E 6. Also complete this part for any additional informatic	and 3; Part IV, Section E, lines 1c, 2a, 2b, ), lines 5, 6, and 8; and Part V, Section E,	

#### Schedule B (Form 990)

Department of the Treasury

Internal Revenue Service	
Name of the organization	

## PUBLIC DISCLOSURE COPY Schedule of Contributors

OMB No. 1545-0047

Atta	ch to Form	990 or	Form	990-PF.	
Go to www.ir	s.gov/Forn	1990 for	the la	atest inform	nation.

990-PF. test information.		2022
	Employer iden	tification number
	91-1144	122

NW	ENERGY	COALITION
Oraz	nization tv	ne (check one).

5	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

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

#### General Rule

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

#### Special Rules

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

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

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

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

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

Schedule B (Form 990) (2022)	1	2	Page <b>2</b>
Name of organization	Employer identification numbe	er	
NW ENERGY COALITION	91-1144122		

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	-
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>330,000</u> .	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>55,000.</u>	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>82,000</u> .	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$218,000.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$40,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>		\$ <u>50,000.</u>	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)	2	2	Page <b>2</b>
Name of organization	Employer identification number	er	
NW ENERGY COALITION	91-1144122		

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>		\$ <u>500,000</u> .	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person        Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person       Payroll       Noncash       (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person       Payroll       Noncash       (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)	1	1	Page <b>3</b>
Name of organization	Employer	identification n	umber
NW ENERGY COALITION	91-11	44122	

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (b) Description of noncash property given (a) No. from Part I (c) FMV (or estimate) (See instructions.) (d) Date received N/A (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from (b) Description of noncash property given (d) Date received (c) FMV (or estimate) Part I (See instructions.) (a) No. from (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (See instructions.) Part I Ś

TEEA0703L 07/22/22

BAA

Schedule B (Form 990) (2022)

	B (Form 990) (2022)		<u>1</u> 1 Page <b>4</b>						
Name of orga	anization RGY COALITION		Employer identification number 91-1144122						
Part III		to contributions to sugget							
Fartin			ations described in section 501(c)(7), (8), ontributor. Complete columns (a) through (e) and						
	the following line entry. For organizations of	completing Part III, enter the total of	f <i>exclusively</i> religious, charitable, etc.,						
	contributions of \$1,000 or less for the year.	(Enter this information once. See i							
	Use duplicate copies of Part III if additional	space is needed.	1						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
	N/A								
		(e) Transfer of gift							
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
	L								
			+						
			+						
	(a) Transfor of gift								
	(e) Transfer of gift								
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee						
	L								
	L								
(a) No.									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
			+						
			+						
	(e) Transfer of gift								
	Transferee's name, addres	ss. and ZIP + 4	Relationship of transferor to transferee						
			····· • • · · · · · · · · · · · · · · ·						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
	<b> </b>								
		(e) Transfer of gift							
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee						
	<b> </b>								
BAA		TEEA0704L 07/22/22	Schedule B (Form 990) (2022)						

SCHEDULE	С
(Form 990)	

## **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

2022 Open to Public Inspection

• 5	Section 501(c)(3) organization	on Form 990, Part IV, line 3, or Form 990-EZ, s: Complete Parts I-A and B. Do not comp tion 501(c)(3)) organizations: Complete Pa	lete Part I-C.				
	• Section 527 organizations: Complete Part I-A only.						
		on Form 990, Part IV, line 4, or Form 990-EZ,					
		that have filed Form 5768 (election under sect					
	Section 501(c)(3) organization Part II-A.	is that have NOT filed Form 5768 (election	under section 501(h)	)): Complete Part II-B. D	o not complete		
If the (Pro:	e organization answered "Yes xy Tax) (See separate instruc	•	(See separate instru	ictions) or Form 990-EZ	, Part V, line 35c		
-	Section 501(c)(4), (5), or (6) of organization	organizations: Complete Part III.		Employer identifica	ation number		
	5						
	ENERGY COALITION	rganization is exempt under secti	on 501(c) or is a	91-114412			
	Provide a description of the	organization's direct and indirect political on of "political campaign activities."					
2	Political campaign activity ex	xpenditures. See instructions		\$			
3	Volunteer hours for political	campaign activities. See instructions					
Par	t I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).				
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	\$	0.		
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	\$	0.		
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No		
<b>4</b> a	Was a correction made?				🗌 Yes 🗌 No		
	If "Yes," describe in Part IV.						
Par	t I-C Complete if the o	rganization is exempt under secti	on 501(c) . excer	ot section 501(c)(3).			
1		pended by the filing organization for section					
2	Enter the amount of the filin	g organization's funds contributed to other	organizations for se	ction			
3	Total exempt function expen line 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	\$			
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No		
5	amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the a is received that were promptly and directly de al action committee (PAC). If additional spi	livered to a separate r	olitical organization, such	as a separate		
	<b>(a)</b> Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		
(1)							
(2)							
(3)							
(4)							
(5)							
(6) RAA	For Panerwork Peduction Act	Notice, see the Instructions for Form 990 or	990.F7	Schor	lule C (Form 990) 2022		
DAA	i of i apermork neduction Act	monee, see the instructions for Form 330 Of	550- <b>LL</b> .	Julieu	and 6 (i 0inii 330) 2022		

Scheo	dule C (Form 990) 2022 NW ENERGY C	COALITION	91-11441	L22 Page <b>2</b>
Pa	rt II-A Complete if the organizatio section 501(h)).	n is exempt under section 501(c)(3) and	filed Form 5768 (ele	ction under
Α	Check if the filing organization below	gs to an affiliated group (and list in Part IV each affiliat	ed group member's name,	
	address, EIN, expenses, an	d share of excess lobbying expenditures).		
В	Check if the filing organization check	ed box A and "limited control" provisions apply.		
	Limits on Lobby (The term "expenditures" me	ving Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence pu	blic opinion (grassroots lobbying)		
b	Total lobbying expenditures to influence a	legislative body (direct lobbying)	46,042.	
с	Total lobbying expenditures (add lines 1a a	and 1b)	46,042.	0.
d	Other exempt purpose expenditures		1,463,635.	
е	Total exempt purpose expenditures (add lin	nes 1c and 1d)	1,509,677.	0.
f	Lobbying nontaxable amount. Enter the an columns.	nount from the following table in both	225,484.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25%	of line 1f)	56,371.	0.
h	Subtract line 1g from line 1a. If zero or les	s, enter -0	0.	0.
i	Subtract line 1f from line 1c. If zero or less	s, enter -0	0.	0.
j		line 1h or line 1i, did the organization file Form 4720 r		Yes No

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

	Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	<b>(d)</b> 2022	<b>(e)</b> Total	
2a Lobbying nontaxable amount	179,855.	187,926.	192,743.	225,484.	786,008.	
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column (e))</li> </ul>					1,179,012.	
c Total lobbying expenditures	19,468.	44,853.		46,042.	110,363.	
<b>d</b> Grassroots nontaxable amount	44,964.	46,982.	48,186.	56,371.	196,503.	
e Grassroots ceiling amount (150% of line 2d, column (e))					294,755.	
f Grassroots lobbying expenditures					0.	

Schedule C (Form 990) 2022

Part II-B Complete if the organization is exempt under section 501(c)(3) and (election under section 501(h)).	has NOT file	d Form	5768		
	(1	a)	(k	<b>)</b>	
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amo	ount	
<ol> <li>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or refere through the use of:</li> <li>a Volunteers?</li> </ol>					
<ul> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through c Media advertisements?</li> </ul>	,				
<ul> <li>d Mailings to members, legislators, or the public?</li> <li>e Publications, or published or broadcast statements?</li> </ul>					
f Grants to other organizations for lobbying purposes?					
<ul> <li>g Direct contact with legislators, their staffs, government officials, or a legislative body?</li> <li>h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li> </ul>					
<ul> <li>i Other activities?</li> <li>j Total. Add lines 1c through 1i.</li> <li>2 Did the activities in line 1 across the arrangements to be not departicular 501(2)(2)?</li> </ul>					_
<ul> <li>2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?</li> <li>b If "Yes," enter the amount of any tax incurred under section 4912</li> </ul>					
<ul><li>c If "Yes," enter the amount of any tax incurred by organization managers under section 4912</li><li>d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?</li></ul>		-			
Part III-A Complete if the organization is exempt under section 501(c)(4), sec section 501(c)(6).	ction 501(c)(5)	, or			
1 Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	No
<ul> <li>2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>3 Did the organization agree to carry over lobbying and political campaign activity expenditure</li> </ul>					
Part III-B Complete if the organization is exempt under section 501(c)(4), sec (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."	ction 501(c)(5)	, or se	ction 50	)1(c)	
1 Dues, assessments and similar amounts from members.		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts o expenses for which the section 527(f) tax was paid).	of political				
<ul><li>a Current year.</li><li>b Carryover from last year.</li></ul>		2a 2b			
c Total		2c			
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e)		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exponent of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditures next year?.	kcess political	4			
5 Taxable amount of lobbying and political expenditures. See instructions		5			·
Part IV Supplemental Information					

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

91-1144122

Page 3

Schedule C (Form 990) 2022

NW ENERGY COALITION

SCHEDULE D Supplemental Financial Statements				OMB No. 1545	-0047			
	(Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.						202	2
Depar Intern	rtment of the Treasury al Revenue Service	Go to www.irs.	Attach to Form 990. gov/Form990 for instructions and	the latest information	on.		Open to Pr Inspection	
Name	e of the organization				E	mployer ident	tification numb	
	ENERGY COAL					1-11441	L22	
Pa			nor Advised Funds or Othe	r Similar Funds	or Acc	ounts.		
	Complete	if the organization answered	"Yes" on Form 990, Part IV, line 6.					
	<b>T</b> . <b>i</b> . <b>i</b> . <b>i</b> . <b>i</b> . <b>i</b> . <b>i</b> .		(a) Donor advised fund	S	(b) Fun	ds and oth	er accounts	
1		end of year						
2 3		ntributions to (during year)						
3 4		at end of year						
5		2	L nor advisors in writing that the ass	ets held in donor ad	lvised fu	nds		
~	are the organizati	ion's property, subject to the	organization's exclusive legal con	trol?		Y	′es	No
6	for charitable pur impermissible pri	poses and not for the benefit	ors, and donor advisors in writing the donor or donor advisor, or	for any other purpos	se confe	rring	′es	No
Pa		vation Easements. if the organization answered	"Yes" on Form 990, Part IV, line 7.					
1	Purpose(s) of cor	nservation easements held by	y the organization (check all that a	ipply).				
	Preservation o	of land for public use (for exam	ple, recreation or education)	Preservation of a	historic	ally import	ant land are	a
	Protection of	natural habitat		Preservation of a	certified	1 historic s	tructure	
		of open space						
2	Complete lines 2a last day of the tax	through 2d if the organization I x year.	held a qualified conservation contribu	tion in the form of a c				
	<b>-</b>				-	d at the En	nd of the Ta	x Year
					-			
	0	2	ments.		-			
			fied historic structure included in (		C			
	historic structure	listed in the National Registe	in (c) acquired after July 25, 2006		d	<u> </u>		
3	tax year	ation easements modified, trar	nsferred, released, extinguished, or te	erminated by the organ	nization (	juring the		
4	Number of states	where property subject to co	onservation easement is located					
5			egarding the periodic monitoring, in not it holds?				′es	No
6	Staff and volunteer	r hours devoted to monitoring,	inspecting, handling of violations, and	d enforcing conservati	ion easer	nents durin	g the year	
7	Amount of expense	es incurred in monitoring, inspe	ecting, handling of violations, and enf	orcing conservation ea	asement	s during the	e year	
8			n line 2(d) above satisfy the requir					No
9	In Part XIII, desci include, if applica conservation ease	able, the text of the footnote	ports conservation easements in its to the organization's financial state	s revenue and exper ements that describe	nse state es the or	ment and ganization	balance she 's accountir	et, and ig for
Pa			Ilections of Art, Historical T "Yes" on Form 990, Part IV, line 8.	reasures, or Oth	her Sin	ıilar Ass	ets.	
1;	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in i Id for public exhibition, education, al statements that describes these	or research in furthe	nt and ba erance o	alance she f public se	et works of rvice, provi	art, de in
I	historical treasures	s, or other similar assets held for	r FASB ASC 958, to report in its re or public exhibition, education, or res	earch in furtherance o	of public :	service, pro	wide the	
	(i) Revenue inclu	uded on Form 990, Part VIII,	line 1			\$ <u> </u>		
2	If the organization amounts required	received or held works of art, h I to be reported under FASB	historical treasures, or other similar a ASC 958 relating to these items:	ssets for financial gair	n, provid	e the follow	ving	

<b>b</b> Assets included in Form 990, Part X		
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA3301L 07/06/22	Sch

a Revenue included on Form 990, Part VIII, line 1.....

Schedule D (Form 990) 2022

. \$

\$

OMB No. 1545-0047

Schedule D (Form 990) 2022 NW ENERGY COA			91-114	-
Part III Organizations Maintaining Co	llections of Art, His	torical Treasures, o	r Other Similar As	ssets (continued)
<b>3</b> Using the organization's acquisition, accession, a items (check all that apply):	nd other records, check ar	ny of the following that mal	ke significant use of its	collection
a Public exhibition	d 🗌 Loan d	or exchange program		
<b>b</b> Scholarly research	e Other			
c Preservation for future generations				
4 Provide a description of the organization's collect Part XIII.				
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	receive donations of art intained as part of the or	, historical treasures, or ganization's collection?.	other similar assets	Yes
Part IV Escrow and Custodial Arrang reported an amount on Form 990, Part	ements. Complete if the X, line 21.	e organization answered "	'Yes" on Form 990, Par	t IV, line 9, or
1 a Is the organization an agent, trustee, custodia on Form 990, Part X?	an or other intermediary t	for contributions or other	assets not included	Yes No
${f b}$ If "Yes," explain the arrangement in Part XIII and				
				Amount
c Beginning balance				
d Additions during the year				
e Distributions during the year				
<ul><li>f Ending balance.</li><li>2 a Did the organization include an amount on Fo</li></ul>				
<b>b</b> If "Yes," explain the arrangement in Part XIII.			-	
		lation has been provided		••••••
Part V Endowment Funds. Complete if	he organization answered	"Yes" on Form 990, Part	IV, line 10.	
(a) Curren		(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance				
<b>b</b> Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses				
g End of year balance				
2 Provide the estimated percentage of the curre	ent year end balance (line	e 1g, column (a)) held as	s:	
<b>a</b> Board designated or quasi-endowment	00			
<b>b</b> Permanent endowment	5			
c Term endowment				
The percentages on lines 2a, 2b, and 2c should e	equal 100%.			
3 a Are there endowment funds not in the possession	n of the organization that a	re held and administered f	or the	Vec Ne
organization by: (i) Unrelated organizations				Yes No
(ii) Related organizations				. 3a(i) . 3a(ii)
<b>b</b> If "Yes" on line 3a(ii), are the related organization				3b
4 Describe in Part XIII the intended uses of the				
Part VI Land, Buildings, and Equipme				
Complete if the organization answered		V. line 11a. See Form 990	). Part X. line 10.	
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1 a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		9,635.	9,635.	0.
<b>e</b> Other				
Total. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X, c	olumn (B), line 10c.)		0.
			Schod	ulo D (Earm 000) 2022

Schedule D (Form 990) 2022

BAA

Part VII		Other Securities.	n Form 000 Port IV line	N/A	
(a) Deseri		ry (including name of security)	(b) Book value	11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end-o	f voor market value
					ii-yeai iiiaiket value
. ,					
(3) Other	field equity interests.				
(A)					
<u>(B)</u>			-		
<u>(C)</u>			-		
<u>(D)</u>			-		
<u>(E)</u>					
<u> </u>					
(G)			-		
(H)					
( )					
Total. (Colum	n (b) must equal Form 990,	Part X, column (B) line 12.)			
Part VIII	Investments -	Program Related.		N/A	
	Complete if the org	anization answered "Yes" of		11c. See Form 990, Part X, line 13.	- f
(1)	(a) Description of in	ivestment	(b) Book value	(c) Method of valuation: Cost or end	-or-year market value
(1)					
(2)					
(3)					
(4)					
(5) (6)					
(7)					
(8)					
(9)					
(10)					
· · ·	n (b) must equal Form 990.	Part X, column (B) line 13.)			
Part IX	Other Assets.				
	Complete if the org			11d. See Form 990, Part X, line 15.	
(1) Ones	ating loogo I	(a) De Right of Use Asse	escription		(b) Book value
(1) Oper (2)	atily lease i	AIGHT OF USE ASSE			203,513.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9) (10)					
	ump (b) must squal [	Form 000 Port V column	(D) line $15$		202 512
Part X	Other Liabilitie		<u>, В) III е тэ.)</u>		203,513.
FallA	Complete if the ora	anization answered "Yes" of	n Form 990. Part IV. line	11e or 11f. See Form 990, Part X, line 2	25.
1.			ription of liability	, ,	(b) Book value
	al income taxes				
		Lease Liability			53,361.
	se Liability N	Net of Current Po	rtion		155,559.
(4)					
(5) (6)					
(7)					
(8)					
(9)					
(10)					
(11)					
Total. (Colum	n (b) must equal Form 990,	Part X, column (B) line 25.)	·····		208,920.
				nancial statements that reports the organization's	

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

Schedule D (Form 990) 2022 NW ENERGY COALITION	91	-1144122	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statement	ts With Revenue per R	eturn.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1 Total revenue, gains, and other support per audited financial statements		1	1,821,357.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b> Net unrealized gains (losses) on investments	<b>2a</b> 8,154.		
<b>b</b> Donated services and use of facilities	<b>2b</b> 850.		
<b>c</b> Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines <b>2a</b> through <b>2d</b>		2 e	9,004.
3 Subtract line 2e from line 1		3	1,812,353.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines <b>4a</b> and <b>4b</b>		4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5	1,812,353.
Part XII Reconciliation of Expenses per Audited Financial Statemer	nts With Expenses per	Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1 Total expenses and losses per audited financial statements		1	1,510,527.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			, ,
a Donated services and use of facilities	<b>2</b> a 850.		
<b>b</b> Prior year adjustments			
c Other losses.	2c		
<b>d</b> Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d.		2 e	850.
3 Subtract line 2e from line 1.		3	1,509,677.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
<b>b</b> Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b		4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).		5	1,509,677.
Part XIII Supplemental Information.			

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

Department of the Treasury Internal Revenue Service

NW ENERGY COALITION

Name of the organization

OMB No. 1545-0047					
2022					
Open to Public Inspection					

Employer identification number
91-1144122

#### Form 990, Part III, Line 1 - Organization Mission

The NW Energy Coalition is an alliance of over 100 environmental, civic, and human service organizations, utilities, and businesses in Oregon, Washington, Idaho, Montana, and British Columbia, plus many individual members. The NW Energy Coalition advances clean, equitable, and affordable energy policies by leveraging our analytic expertise and convening a broad alliance of people and organizations.

#### Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

Coalition Member categories include Non-profit Members, Utility Members, For-Profit Members collectively referred to as organizational members. Representatives from organizational member groups are eligible to vote at membership meetings and at state/provincial caucus meetings.

Individuals are also welcome to join the Coalition. Individual members are eligible to vote at state/provincial caucus meetings only.

#### Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

The Coalition has a 15 member Board of Directors. Voting Organizational Members of the Coalition elect ten of those positions.

Each of the five state and provincial caucuses selects a Caucus Representative to serve on the Board, elected by the organizational and individual members of that caucus, to fill the remaining five seats.

The Board of Directors elects, from among its members, the officers of the Board. **Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders** Voting Organizational Members of the Coalition have the authority to:

Schedule O (Form 990) 2022	Page 2
Name of the organization	Employer identification number
NW ENERGY COALITION	91-1144122

#### Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders (continued)

approve or reject any organizational membership application

remove member organizations

•elect members of the Board, who are not elected by the caucuses

•approve any awards given in the name of the Coalition.

•adopt resolutions to guide the progress of the Coalition

#### Form 990, Part VI, Line 11b - Form 990 Review Process

Reviewed by Finance Committee before submitting to the Board of Directors.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Directors and key employees are required to report annually and any time a conflict arises.

#### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The salary schedule, devised by the Executive Director, is based on such factors as job description, level of responsibility, education and experience. Raises are determined by the Executive Director and are based on cost-of-living and merit. The Executive Director conducts annual performance evaluations with all staff.

The Chair of the Board reviews the work of the Executive Director on an annual basis.

No member of the Board of Directors receives compensation.

Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available For Public Inspection Available on Guide Star.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Available on request Name of the organization

NW ENERGY COALITION

Employer identification number

91-1144122

### Form 990, Part IX, Line 11g Other Fees For Services

		(A)	(B)	(C)	_(D)
		Total	Program Services	Management & General	Fund- raising
Contract Services Legal and Professional		214,920. 48,594.	212,472. 41,643.	242. 2,502.	2,206. 4,449.
	Total \$	263,514.	\$ 254,115.	\$ 2,744. \$	6,655.