

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

- ▶ Do not enter Social Security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2019

Open to Public Inspection

A For the **2019** calendar year, or tax year beginning , **2019**, and ending , **20**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization AMERICA ' S POWER			D Employer identification number 52-1799853
	Doing Business As			E Telephone number (202) 459-4800
	Number and street (or P.O. box if mail is not delivered to street address) 4601 N. FAIRFAX DRIVE		Room/suite 1050	G Gross receipts \$ 4,552,939.
	City or town, state or province, country, and ZIP or foreign postal code ARLINGTON, VA 22203			
F Name and address of principal officer: MICHELLE BLOODWORTH 4601 N. FAIRFAX DR, STE 1050, ARLINGTON, VA 22203			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			J Website: WWW.AMERICASPOWER.ORG	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1992	M State of legal domicile: DC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>ADVOCATES FOR POLICIES THAT PROMOTE ENVIRONMENTAL IMPROVEMENT, ECONOMIC GROWTH, AND RELIABLE ENERGY SUPPLIES.</u>				
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
	3 Number of voting members of the governing body (Part VI, line 1a)	3	27.		
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	27.		
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	3.		
	6 Total number of volunteers (estimate if necessary)	6	27.		
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.		
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.			
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	0.	Current Year	0.
	9 Program service revenue (Part VIII, line 2g)	4,716,700.	4,464,000.		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	28,257.	88,939.		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,625.	0.		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,746,582.	4,552,939.		
	COPY FOR PUBLIC INSPECTION				
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.		
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,565,455.	1,656,912.		
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.		
	b Total fundraising expenses (Part IX, column (D), line 25)	0.			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,529,577.	2,518,862.		
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,095,032.	4,175,774.			
19 Revenue less expenses. Subtract line 18 from line 12	651,550.	377,165.			
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	6,327,598.	End of Year	7,059,432.
	21 Total liabilities (Part X, line 26)	606,170.	960,839.		
	22 Net assets or fund balances. Subtract line 21 from line 20	5,721,428.	6,098,593.		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer MICHELLE BLOODWORTH		Date
	Type or print name and title PRESIDENT/CEO		
Paid Preparer Use Only	Print/Type preparer's name MARC BERGER	Preparer's signature <i>Marc Berger</i>	Date 11/13/2020
	Firm's name BDO USA, LLP	Firm's EIN 13-5381590	Check <input type="checkbox"/> if self-employed
	Firm's address 8401 GREENSBORO DRIVE, #800 MCLEAN, VA 22102	Phone no. 703-893-0600	PTIN P01871563

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

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2019)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

ATTACHMENT 1

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

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)

STATE AFFAIRS: STATE OFFICIALS AND ORGANIZATIONS ENGAGE IN PUBLIC POLICY ACTIVITIES THAT AFFECT THE COAL FLEET. AMERICA'S POWER REPRESENTS THE COAL FLEET BEFORE STATE OFFICIALS AND PUBLIC POLICY GROUPS. THE MAIN FOCUS OF STATE ACTIVITIES IS TO EDUCATE ELECTED AND APPOINTED STATE OFFICIALS REGARDING THE IMPORTANCE OF COAL-FUELED ELECTRICITY.

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

COMMUNICATIONS: AMERICA'S POWER PROVIDES INFORMATION AND ANALYSIS TO EDUCATE THE PUBLIC AND MEDIA THROUGH VARIOUS PLATFORMS, INCLUDING EARNED AND DIGITAL MEDIA, REGARDING THE IMPORTANCE OF THE COAL FLEET, ITS ENVIRONMENTAL PERFORMANCE, AND THE ROLE IT PLAYS IN ENSURING A RESILIENT AND RELIABLE ELECTRICITY GRID. AMERICA'S POWER OUTREACH INVOLVES BOTH NATIONAL AND REGIONAL ACTIVITIES.

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

ENVIRONMENTAL: AMERICA'S POWER ADVOCATES FOR POLICIES THAT PROMOTE ENVIRONMENTAL IMPROVEMENT AND THAT TAKE INTO ACCOUNT THE NEED FOR COAL-FUELED ELECTRICITY.

4d Other program services (Describe on Schedule O.)

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

4e Total program service expenses

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee reporting, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (27), 1b (27), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHELLE BLOODWORTH CEO & PRESIDENT	50.00 0.			X			701,026.	0.	35,276.	
(2) PAUL BAILEY CHIEF POLICY OFFICER	50.00 0.			X			579,228.	0.	25,495.	
(3) JEFFREY BLOCZYNSKI VP, RESEARCH AND ANALYSIS	50.00 0.					X	251,781.	0.	15,020.	
(4) JOSEPH W. CRAFT, III DIRECTOR	1.00 0.	X					0.	0.	0.	
(5) NICHOLAS K. AKINS DIRECTOR	1.00 0.	X					0.	0.	0.	
(6) DAVID TUDOR DIRECTOR	1.00 0.	X					0.	0.	0.	
(7) ROBERT BERRY DIRECTOR	1.00 0.	X					0.	0.	0.	
(8) STEVAN BOBB DIRECTOR	1.00 0.	X					0.	0.	0.	
(9) PATRICK O'LOUGHLIN DIRECTOR	1.00 0.	X					0.	0.	0.	
(10) JIM STARR DIRECTOR	1.00 0.	X					0.	0.	0.	
(11) SCOTT SEWELL DIRECTOR	1.00 0.	X					0.	0.	0.	
(12) JIMMY BROCK DIRECTOR	1.00 0.	X					0.	0.	0.	
(13) MATT RICKETTS DIRECTOR	1.00 0.	X					0.	0.	0.	
(14) JAMES M. FOOTE DIRECTOR	1.00 0.	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) MIKE TRACY ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(16) JOSH HELBIG ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(17) FRANK CALANDRA, JR. ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(18) DOUG BLOM ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(19) ROBERT MURRAY ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(20) KEVIN CRAIG ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(21) JAMES SQUIRES ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(22) MIKE SMITH ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(23) KEMAL WILLIAMSON ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(24) GARY SMITH ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
(25) DON GASTON ----- DIRECTOR	1.00 ----- 0.	X					0.	0.	0.	
1b Sub-total							1,532,035.	0.	75,791.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,532,035.	0.	75,791.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶ 3**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶ 5**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) CLIFF FOREST ----- DIRECTOR	1.00 ----- 0.	X						0.	0.	0.
(27) CHRISTPHER WOMACK ----- DIRECTOR	1.00 ----- 0.	X						0.	0.	0.
(28) LANCE FRITZ ----- DIRECTOR	1.00 ----- 0.	X						0.	0.	0.
(29) MERI SANDLIN ----- DIRECTOR	1.00 ----- 0.	X						0.	0.	0.
(30) STEVEN CHANCELLOR ----- DIRECTOR	1.00 ----- 0.	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 3

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions) . .	1e						
	f All other contributions, gifts, grants, and similar amounts not included above .	1f						
	g Noncash contributions included in lines 1a-1f.	1g	\$					
	h Total. Add lines 1a-1f				0.			
	Program Service Revenue	2a MEMBER DUES	Business Code					
		900099		4,464,000.	4,464,000.			
b								
c								
d								
e								
f All other program service revenue								
g Total. Add lines 2a-2f					4,464,000.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts).			88,939.			88,939.	
	4 Income from investment of tax-exempt bond proceeds .			0.				
	5 Royalties			0.				
	6a Gross rents	6a	(i) Real	(ii) Personal				
	b Less: rental expenses	6b						
	c Rental income or (loss)	6c						
	d Net rental income or (loss)				0.			
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses . .	7b						
	c Gain or (loss)	7c						
	d Net gain or (loss)				0.			
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a			0.				
				0.				
				0.				
b Less: direct expenses	8b							
c Net income or (loss) from fundraising events.				0.				
9a Gross income from gaming activities. See Part IV, line 19	9a			0.				
				0.				
				0.				
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities.				0.				
10a Gross sales of inventory, less returns and allowances	10a			0.				
				0.				
				0.				
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory.				0.				
Miscellaneous Revenue	11a _____	Business Code						
	b _____							
	c _____							
	d All other revenue							
	e Total. Add lines 11a-11d				0.			
	12 Total revenue. See instructions				4,552,939.	4,464,000.	88,939.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	1,341,025.			
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.			
7 Other salaries and wages	245,401.			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	15,000.			
9 Other employee benefits	20.			
10 Payroll taxes	55,466.			
11 Fees for services (nonemployees):				
a Management	0.			
b Legal	134,333.			
c Accounting	131,279.			
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	0.			
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0.			
12 Advertising and promotion	0.			
13 Office expenses	98,136.			
14 Information technology	73,907.			
15 Royalties	0.			
16 Occupancy	91,684.			
17 Travel	146,421.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	32,888.			
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	1,051.			
23 Insurance	34,424.			
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.)				
a ENVIRONMENTAL	613,213.			
b WHOLESALE MARKET REFORMS	324,149.			
c COMMUNICATIONS PROGRAMS	340,821.			
d STATE AFFAIRS	224,916.			
e All other expenses _____	271,640.			
25 Total functional expenses. Add lines 1 through 24e	4,175,774.			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	0.	1	0.
	2 Savings and temporary cash investments	6,263,798.	2	6,833,897.
	3 Pledges and grants receivable, net	0.	3	0.
	4 Accounts receivable, net.	418.	4	175,000.
	5 Loans and other receivables from 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	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	54,402.	9	39,385.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 26,064.		
	b Less: accumulated depreciation	10b 22,414.	1,480.	10c 3,650.
	11 Investments - publicly traded securities.	0.	11	0.
	12 Investments - other securities. See Part IV, line 11	0.	12	0.
	13 Investments - program-related. See Part IV, line 11.	0.	13	0.
	14 Intangible assets	0.	14	0.
	15 Other assets. See Part IV, line 11	7,500.	15	7,500.
16 Total assets. Add lines 1 through 15 (must equal line 33)	6,327,598.	16	7,059,432.	
Liabilities	17 Accounts payable and accrued expenses	169,948.	17	311,354.
	18 Grants payable	0.	18	0.
	19 Deferred revenue.	300,000.	19	527,000.
	20 Tax-exempt bond liabilities.	0.	20	0.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	0.
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties.	0.	24	0.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	136,222.	25	122,485.
	26 Total liabilities. Add lines 17 through 25.	606,170.	26	960,839.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	5,721,428.	27	6,098,593.
	28 Net assets with donor restrictions.	0.	28	0.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund.		30	
	31 Retained earnings, endowment, accumulated income, or other funds.		31	
32 Total net assets or fund balances	5,721,428.	32	6,098,593.	
33 Total liabilities and net assets/fund balances	6,327,598.	33	7,059,432.	

Part 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	4,552,939.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,175,774.
3	Revenue less expenses. Subtract line 2 from line 1	3	377,165.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,721,428.
5	Net unrealized gains (losses) on investments	5	0.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
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	6,098,593.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

2019

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization AMERICA'S POWER	Employer identification number 52-1799853
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2019

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

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		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.		
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)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? <input type="checkbox"/> Yes <input type="checkbox"/> 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)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; a Volunteers?; b Paid staff or management...; c Media advertisements?; d Mailings to members...; e Publications...; f Grants to other organizations...; g Direct contact with legislators...; h Rallies, demonstrations...; i Other activities?; j Total. Add lines 1c through 1i...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; b If "Yes," enter the amount of any tax incurred under section 4912...; c If "Yes," enter the amount of any tax incurred by organization managers under section 4912...; d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?...

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 3 columns: Question, Yes, No. Rows include: 1 Dues, assessments and similar amounts from members...; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).; a Current year...; b Carryover from last year...; c Total...; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues...; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover...; 5 Taxable amount of lobbying and political expenditures (see instructions)...

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.

Blank lines for providing supplemental information as required by the instructions.

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

AMERICA ' S POWER

Employer identification number

52-1799853

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Line number, Description, Held at the End of the Tax Year. Includes rows for purpose(s) of easements, total number, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Line number, Description, Amount. Includes rows for art/historical treasures held for public service and amounts for revenue and assets.

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

Schedule D (Form 990) 2019

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ _____ %
 - b** Permanent endowment ▶ _____ %
 - c** Term endowment ▶ _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		26,064.	22,414.	3,650.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				3,650.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) . ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED EMPLOYEE BENEFITS	122,485.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	122,485.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	4,552,939.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	4,552,939.
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	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 12.</i>)		5	4,552,939.

Part XII Reconciliation of Expenses per Audited Financial Statements 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	4,175,774.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	4,175,774.
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	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 18.</i>)		5	4,175,774.

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.

SEE PAGE 5

Part XIII Supplemental Information (continued)

SCHEDULE D PART X, LINE 2:

AMERICA'S POWER RECOGNIZES AND MEASURES ITS UNRECOGNIZED TAX BENEFITS IN ACCORDANCE WITH FASB ASC 740, INCOME TAXES. UNDER THIS GUIDANCE, AMERICA'S POWER ASSESSES THE LIKELIHOOD, BASED ON THEIR TECHNICAL MERIT, THAT TAX POSITIONS WILL BE SUSTAINED UPON EXAMINATION BASED ON THE FACTS, CIRCUMSTANCES AND INFORMATION AVAILABLE AT THE END OF EACH PERIOD. THE MEASUREMENTS OF UNRECOGNIZED TAX BENEFITS IS ADJUSTED WHEN NEW INFORMATION IS AVAILABLE, OR WHEN THE EVENT OCCURS THAT REQUIRES A CHANGE. USING THIS GUIDANCE, MANAGEMENT BELIEVES THAT AMERICA'S POWER HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFIED FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS AS OF DECEMBER 31, 2019 AND 2018.

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT OF AN ORGANIZATION TO EVALUATE INCOME TAX POSITIONS TAKEN BY THE ORGANIZATION AND RECOGNIZE AN INCOME TAX LIABILITY IF THE ORGANIZATION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE. MANAGEMENT HAS EVALUATED THE INCOME POSITIONS TAKEN BY AMERICA'S POWER AND CONCLUDED THAT AS OF DECEMBER 31, 2019 AND 2018, THERE WERE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

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

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

▶ Attach to Form 990.

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

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICA'S POWER

Employer identification number

52-1799853

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a** **4b** **4c**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. **7**

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. **8**

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2019

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MICHELLE BLOODWORTH CEO & PRESIDENT	(i)	498,631.	202,395.	0.	25,250.	10,026.	736,302.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 PAUL BAILEY CHIEF POLICY OFFICER	(i)	444,228.	135,000.	0.	22,000.	3,495.	604,723.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 JEFFREY BLOCZYNSKI VP, RESEARCH AND ANALYSIS	(i)	166,667.	85,114.	0.	15,000.	20.	266,801.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

AMERICA'S POWER

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Employer identification number

52-1799853

FORM 990, PART III, LINE 4D:

WHOLESALE ELECTRICITY MARKET REFORMS: AMERICA'S POWER PROMOTES REFORMS TO
MARKET POLICIES THAT VALUE THE ATTRIBUTES OF THE COAL FLEET.

FORM 990, PART VI, SECTION A, LINE 1:

PURSUANT TO THE D.C. NONPROFIT CORPORATION ACT, THE EXECUTIVE COMMITTEE
SERVES AS THE DESIGNATED BODY TO PERFORM THE FUNCTIONS OF THE BOARD OF
DIRECTORS. THE BOARD OF DIRECTORS SERVES AS A CONVENING BODY FOR THE
MEMBER TO DISCUSS POLICY ISSUES.

FORM 990 PART VI, SECTION A, LINE 6:

TIERS OF MEMBERS ARE AS FOLLOWS:

* EACH TIER ONE MEMBER SHALL BE ENTITLED TO DESIGNATE ONE MEMBER OF THE
BOARD OF DIRECTORS, ONE REPRESENTATIVE TO THE POLICY AND STRATEGY
COMMITTEE, AND ONE MEMBER OF THE EXECUTIVE COMMITTEE.

* EACH TIER TWO MEMBER SHALL BE ENTITLED TO DESIGNATE ONE MEMBER OF THE
BOARD OF DIRECTORS AND ONE REPRESENTATIVE TO THE POLICY AND STRATEGY
COMMITTEE.

* EACH TIER THREE MEMBER SHALL BE ENTITLED TO DESIGNATE ONE MEMBER OF THE
BOARD OF DIRECTORS.

* EACH ASSOCIATE MEMBER MAY DESIGNATE ONE INDIVIDUAL TO ATTEND SUCH
MEETINGS AS AUTHORIZED BY THE EXECUTIVE COMMITTEE, BUT SHALL HAVE NO
VOTING RIGHTS ON THE BOARD, EXECUTIVE COMMITTEE, OR THE POLICY AND
STRATEGY COMMITTEE.

Name of the organization AMERICA'S POWER	Employer identification number 52-1799853
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FORM 990, PART VI, SECTION A, LINE 7A:

EACH MEMBER COMPANY THAT IS ELIGIBLE TO APPOINT A DIRECTOR SELECTS ITS INDIVIDUAL REPRESENTATIVE TO SERVE ON THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED AND APPROVED BY MANAGEMENT AND BY LEGAL COUNSEL BEFORE FILING. THE FORM 990 IS SUBMITTED TO THE ENTIRE BOARD BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION DISTRIBUTES ITS CONFLICT OF INTEREST POLICY TO THE BOARD OF DIRECTORS ANNUALLY. AS PART OF THE POLICY, BOARD MEMBERS ARE REQUIRED TO DISCLOSE REAL OR POTENTIAL CONFLICTS. IF STAFF ARE MADE AWARE OF ANY SUCH CONFLICTS, THEY PREPARE A PLAN OF ACTION FOR THE BOARD'S CONSIDERATION (E.G. RECUSAL FROM PARTICIPATING IN ANY DELIBERATIONS OR DECISIONS RELEVANT TO THE DISCLOSURE). STAFF ARE SIMILARLY APPRISED OF THE POLICY AND THE PRESIDENT IS RESPONSIBLE FOR DETERMINING APPROPRIATE RESOLUTION, WITH INPUT FROM THE BOARD CHAIR AND VICE CHAIR AS APPROPRIATE UNDER THE BYLAWS.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION FOR PRESIDENT AND CEO:

IN REVIEWING AND APPROVING THE AMOUNT OF COMPENSATION FOR THE PRESIDENT AND CEO, THE EXECUTIVE COMMITTEE ANNUALLY FOLLOWS THE PROCEDURES REQUIRED BY THE COMPENSATION POLICY. AS DISCUSSED BELOW, THE COMPENSATION POLICY REQUIRES THE EXECUTIVE COMMITTEE TO: (1) APPROVE THE AMOUNT OF COMPENSATION PRIOR TO PAYMENT; (2) USE APPROPRIATE COMPARABILITY DATA WHEN

Name of the organization AMERICA'S POWER	Employer identification number 52-1799853
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MAKING ITS DETERMINATION; AND (3) CONCURRENTLY DOCUMENT ITS DECISIONS IN WRITING.

1) APPROVAL PRIOR TO COMPENSATION PAYMENT. ANY CHANGES IN COMPENSATION OR AWARD OF BONUS COMPENSATION DETERMINED UNDER THE AUSPICES OF THE EXECUTIVE COMMITTEE MUST BE APPROVED BY THE EXECUTIVE COMMITTEE IN ADVANCE OF ANY SUCH PAYMENT BEING MADE.

2) COMPARABILITY DATA. WHEN THE EXECUTIVE COMMITTEE IS CONSIDERING COMPENSATION TO THE PRESIDENT AND CEO, IT MUST RELY ON COMPARABILITY DATA THAT DEMONSTRATES THE FAIR MARKET VALUE OF THE COMPENSATION IN QUESTION. FOR EXAMPLE, WHEN DEVELOPING OR EVALUATING COMPENSATION PACKAGES, THE EXECUTIVE COMMITTEE MUST SECURE OR REVIEW DATA THAT DOCUMENTS COMPENSATION LEVELS FOR SIMILARLY QUALIFIED INDIVIDUALS IN LIKE POSITIONS AT LIKE ORGANIZATIONS. DATA MAY INCLUDE THE FOLLOWING:

- A. EXPERT COMPENSATION STUDIES BY INDEPENDENT FIRMS;
- B. WRITTEN JOB OFFERS FOR POSITIONS AT SIMILAR ORGANIZATIONS;
- C. DOCUMENTED INFORMATION ABOUT SIMILAR POSITIONS AT BOTH NONPROFIT AND FOR-PROFIT ORGANIZATIONS; AND
- D. INFORMATION OBTAINED FROM THE IRS FORM 990 FILINGS OF SIMILAR ORGANIZATIONS.

3) CONCURRENT DOCUMENTATION. THE EXECUTIVE COMMITTEE MUST DOCUMENT, WITHIN 30 DAYS OF THE EXECUTIVE COMMITTEE'S DETERMINATION, HOW IT REACHED ITS DECISIONS, INCLUDING THE DATA ON WHICH IT RELIED. WRITTEN OR ELECTRONIC RECORDS OF THE EXECUTIVE COMMITTEE (SUCH AS MEETING MINUTES)

Name of the organization AMERICA'S POWER	Employer identification number 52-1799853
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MUST NOTE:

- A. THE TERMS OF THE COMPENSATION AND THE DATE SUCH COMPENSATION DECISIONS WERE MADE;
- B. THE MEMBERS OF THE EXECUTIVE COMMITTEE WHO WERE PRESENT DURING DEBATE ON THE COMPENSATION THAT WAS ULTIMATELY APPROVED AND THOSE WHO VOTED IN THIS REGARD;
- C. THE COMPARABILITY DATA OBTAINED AND RELIED UPON, AND HOW THE DATA WERE OBTAINED; AND
- D. ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF THE COMPENSATION BY ANYONE WHO HAD A CONFLICT OF INTEREST WITH RESPECT TO THE DECISION ON THE COMPENSATION.

THE COMPENSATION PROCESS DESCRIBED WAS UNDERTAKEN IN DECEMBER 2016 TO SET COMPENSATION FOR 2019.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION COMPLIES WITH THE PUBLIC INSPECTION REQUIREMENTS OF INTERNAL REVENUE CODE SECTION 6104 BY MAKING ITS FORM 1024, APPLICATION FOR RECOGNITION OF EXEMPTION UNDER SECTION 501(A), DETERMINATION LETTER FROM THE IRS, AND THE FORMS 990 FOR ITS THREE MOST RECENTLY COMPLETED PERIODS AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST. HOWEVER, AS SECTION 6104 DOES NOT REQUIRE ORGANIZATIONS EXEMPT UNDER SECTION 501(C)(6) TO DISCLOSE THEIR GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES, OR FINANCIAL STATEMENTS, THE ORGANIZATION HAS DECIDED NOT TO MAKE SUCH INFORMATION AVAILABLE TO THE GENERAL PUBLIC.

Name of the organization AMERICA'S POWER	Employer identification number 52-1799853
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FORM 990, PART XII, LINE 2C:

THE EXECUTIVE COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT, REVIEW AND COMPILATION OF ITS FINANCIAL STATEMENTS, AND THE SELECTION OF INDEPENDENT ACCOUNTANTS.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

AMERICA'S POWER IS THE ONLY NATIONAL TRADE ORGANIZATION WHOSE SOLE MISSION IS TO ADVOCATE AT THE FEDERAL AND STATE LEVELS ON BEHALF OF COAL-FUELED ELECTRICITY AND THE NATION'S COAL FLEET. TO CARRY OUT OUR MISSION, WE ENGAGE CONSTRUCTIVELY WITH ELECTED AND APPOINTED OFFICIALS, POLICYMAKERS, REGULATORS, STAKEHOLDERS, AND THE PUBLIC. OUR MEMBERSHIP IS COMPRISED OF MAJOR INDUSTRIES - ELECTRICITY GENERATORS, COAL PRODUCERS, RAILROADS, BARGE OPERATORS, AND EQUIPMENT MANUFACTURERS - INVOLVED IN GENERATING ELECTRICITY FROM COAL.

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
HUNTON ANDREWS KURTH 2200 PENNSYLVANIA AVE. NW WASHINGTON, DC 20037	LEGAL SERVICES	305,705.
DCI GROUP, LLC 1828 L. ST. NW #400 WASHINGTON, DC 20036	DIRECT CONTACT	276,050.
VAN NESS FELDMAN 1050 THOMAS JEFFERSON ST. NW WASHINGTON, DC 20007	LEGAL SERVICES	190,875.
VENABLE LLP 600 MASSACHUSETTS AVE. NW WASHINGTON, DC 20001	LEGAL SERVICES	121,039.

Name of the organization AMERICA'S POWER	Employer identification number 52-1799853
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ATTACHMENT 2 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
BDO USA, LLP 8401 GREENSBORO DR., SUITE 800 MCLEAN, VA 22102	ACCOUNTING	100,166.