			** PUBLIC DISCLOSURE COPY Return of Organization Exempt Froi		me Tax	OMB No. 1545-0047
For	_ g	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code			2023
	-		Do not enter social security numbers on this form as it ma			Open to Public
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						Inspection
Α	For th	e 2023 calend	ar year, or tax year beginning $ m JUL1$, 2023 and endin	ng JUN	30, 2024	
Β	Check if applicat	Dile: C Name of	organization	DE	Employer identific	cation number
	Addr	ess MTDW	EST ENERGY EFFICIENCY ALLIANCE			
	Name	e <u> </u>	usiness as		36-435202	22
	Initia		and street (or P.O. box if mail is not delivered to street address) Room	n/suite E T	elephone number	
	Final returr	20 N	. WACKER DRIVE 130		312-587-8	
	termi ated	City or t	own, state or province, country, and ZIP or foreign postal code	GG	aross receipts \$	4,732,310.
	Amer		AGO, IL 60606	H(a)	Is this a group re	
	Appli tion pend		nd address of principal officer: PAIGE KNUTSEN		for subordinates	
	-	SAME	AS C ABOVE	 ` '	Are all subordinates inc	
		empt status:		527		list. See instructions
	Webs				Group exemption	
	-orm o art l		X Corporation Trust Association Other L	_ Year of form		State of legal domicile: IL
	1		e the organization's mission or most significant activities: TO ADVA	NCE AN		F FNFDCV
e	1		e the organization's mission or most significant activities: <u>10 ADVA</u> NCY IN THE MIDWEST REGION.	NCE AN	D FROMOIE	L ENERGI
Governance	2	Check this bo		more than '	25% of its not ass	ete
/err	3		ing members of the governing body (Part VI, line 1a)		1.1	31
ĝ	4		ependent voting members of the governing body (Part VI, line 1b)			31
ა ა	5		of individuals employed in calendar year 2023 (Part V, line 2a)			31
itie	6		of volunteers (estimate if necessary)			25
Activities &	7 a		d business revenue from Part VIII, column (C), line 12			0.
4	b		business taxable income from Form 990-T, Part I, line 11			0.
				Р	rior Year	Current Year
¢	8	Contributions	and grants (Part VIII, line 1h)	2,	747,630.	3,566,745.
ňué	9	Program servi	ce revenue (Part VIII, line 2g)		974,335.	1,008,808.
Revenue	10		come (Part VIII, column (A), lines 3, 4, and 7d)		29,268.	126,641.
Ξ	11	Other revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		41,133.	30,116.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		792,366.	4,732,310.
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
			to or for members (Part IX, column (A), line 4)		0.	0.
es	15		compensation, employee benefits (Part IX, column (A), lines 5-10)		465,345.	2,704,760.
ens	16a		undraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b		ng expenses (Part IX, column (D), line 25) 4 , 498.	-	140 100	2 520 250
	1		es (Part IX, column (A), lines 11a-11d, 11f-24e)		<u>140,109.</u> 605,454.	<u>2,529,258.</u> 5,234,018.
	18	-	s. Add lines 13-17 (must equal Part IX, column (A), line 25)		-813,088.	-501,708.
- 9	19	Revenue less	expenses. Subtract line 18 from line 12		g of Current Year	End of Year
sts o	20	Total assets (F	Part X lina 16)	1	,990,879.	4,334,115.
Net Assets or	20 21				346,674.	1,187,983.
Net /	22		(Part X, line 26) fund balances. Subtract line 21 from line 20		644,205.	3,146,132.
Pa	art II				,	-,,
			I declare that I have examined this return, including accompanying schedules and s	statements, ar	nd to the best of mv	knowledge and belief, it is
			Protocoline of a second s		, 	- /

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

Sign	Signature of officer			Date				
Here	PAIGE KNUTSEN, EXECUTIVE	DIRECTOR						
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN			
Paid	ARIANA N. JORDAN	ARIANA N. JORDAN	04/29		P01441395			
Preparer	Firm's name CBIZ ADVISORS, LL	С		Firm's EIN 88-2	1478669			
Use Only	Firm's address 9 PARKWAY NORTH,	SUITE 200						
	DEERFIELD, IL 600	15		Phone no. (847)) 282-6300			
May the IF	May the IRS discuss this return with the preparer shown above? See instructions 🛛 🚺 Yes 🗌 No							
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)							

Form	1 990 (2023) MIDWEST ENERGY EFFICIENCY ALLIANCE	36-4352022 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: <u>THE MIDWEST ENERGY EFFICIENCY ALLIANCE (MEEA) IS A COLLA</u>	
	NETWORK, PROMOTING ENERGY EFFICIENCY TO OPTIMIZE ENERGY	-
	REDUCE CONSUMPTION, CREATE JOBS AND DECREASE CARBON EMIS	SIONS IN ALL
	MIDWEST COMMUNITIES.	
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 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 program services? If "Yes," describe these changes on Schedule O.	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as	• •
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses, and
	revenue, if any, for each program service reported.	1 000 000
4a	(Code:) (Expenses \$ 3,196,605. including grants of \$) (Reven	
	PROMOTING ENERGY EFFICIENCY THROUGH EDUCATION AND COLLAB	
	MIDWEST STATES. PROMOTION OF BEST PRACTICES AND PROVISIO	
	ASSISTANCE FOR ADVANCEMENT OF EE WITHIN BUILDING CODES.	
	REGIONAL NAVIGATOR FOR THE 12 BUILDINGS UP PRIZE TEAMS I	N THE MIDWEST
	+ALASKA.	
4b	(Code:) (Expenses \$ including grants of \$) (Reven	ue\$)
4c	(Code:) (Expenses \$ including grants of \$) (Reven	iue\$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses3,196,605.	
		Form 990 (2023)
332002	2 12-21-23	

<u>Form 990 (</u>				EFFICIENCY	ALLIANCE
Part IV	Checklist of R	equired Sche	edules		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
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? If "Yes," complete Schedule C, Part 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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			37
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
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? If "Yes." complete Schedule I. Parts I and II	21		Х
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			77
-	Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
А	any tax-exempt bonds?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<u>24u</u>		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
2	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? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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? If			
	"Yes," complete Schedule L, Part IV	28a		<u> </u>
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			37
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			х
04	contributions? If "Yes," complete Schedule M	30		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> " <i>Yes</i> ," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> " <i>Yes</i> ." <i>complete</i>	31		
32		32		х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		- 23
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part 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
	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
_			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 34			
b		-		
с		4	х	
00005	(gambling) winnings to prize winners?	1 c		(2023)
JJ2004	\$ 12-21-23	FOLL	550	(2023)

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Form	990 (2023) MIDWEST ENERGY EFFICIENCY ALLIANCE 36-4352	022	P	age 5
Par	t 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 Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 31			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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		X
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		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			37
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		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
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		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.	-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a ⊾	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
100	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	100		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
ы 13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	104		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
2	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	14b		
15 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
-	excess parachute payment(s) during the year?	15		x
	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?	16		х
-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. 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.			
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Form 99	0 (2023)
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 MIDWEST
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 36-4352022
 Page

 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	
Section A. Governing Body and Management	

					162	NU
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	31			
	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 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	31			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was	filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point c	ne or			
	more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockhol	ders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	following:			
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched at	the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue (Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters,	affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes? \dots			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ before	e filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	′es," de	scribe			
	on Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva	l by inc	ependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45	v	
a	The organization's CEO, Executive Director, or top management official			15a	X X	
Ø	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			15b	Δ	
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	oont wi	th a			
108				16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat			104		
U	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evaluat	-	-			
	exempt status with respect to such arrangements?		0	16b		
Sec	tion C. Disclosure			100		
17	List the states with which a copy of this Form 990 is required to be filed IL					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990-	T (section 501(c)(3)s	only)	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.			y)		
	X Own website Another's website X Upon request Other (explain)	on Sci	nedule ())			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	financ	cial	
	statements available to the public during the tax year.		peney, and			
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	records			
	WILLIAM ANGELOS - 312-587-8390					
	20 N. WACKER DRIVE, SUITE 1301, CHICAGO, IL 60606					
332006	12-21-23			Form	990	(2023)

6

Dart VII	Compensation of Officers, Directors	Trustoos Kov Employees	Highest Componented
r art vii		s, musices, key Employees,	riighest compensated
	Employees, and Independent Contra	actors	

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 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.

(A)	(B)		(C) Position		(D) Reportable	(E) Reportable	(F) Estimated			
Name and the	Average hours per	box, u		ss per	rson i		an	compensation	compensation	amount of
	week		cer an	d a d	irecto	r/trus	tee)	from	from related	other
	(list any hours for	Individual trustee or director				5		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	tee or	Istee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	nal tri		loyee	eom pe		1099-NEC)		and related
	below	dividua	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BILL ANGELOS	line)	Ē	<u>ii</u>	Of	Æ	11 E	Fo			
DEPUTY DIRECTOR		1		х				156,219.	0.	12,493.
(2) JENNIFER RHODES	40.00							150/2151		12,1931
DIRECTOR OF MEMBERSHIP AND		1		х				150,856.	0.	12,328.
(3) MOLLY GRAHAM	40.00									
MSE DIRECTOR		1				x		132,920.	0.	11,744.
(4) ALISON LINDBURG	40.00									
BUILDING POLICY DIRECTOR						X		109,813.	0.	18,114.
(5) JASON LIECHTY	40.00									
POLICY DIRECTOR						X		110,266.	0.	10,424.
(6) PAIGE KNUTSEN - BOARD UNTIL	40.00									
09/23, THEN EXECUTIVE DIRECTOR				Х				43,432.	0.	3,602.
(7) E'LOIS THOMAS	2.00									
CHAIR		X		Х				0.	0.	0.
(8) CHRISTINA PAGNUSAT	2.00			37				0	0	0
VICE CHAIR (9) VINOTH KUMAR SEKAR	2.00	Х		Х				0.	0.	0.
TREASURER	2.00	х		x				0.	0.	0.
(10) CLIFF HAEFKE	2.00	^		~				0.	0.	0.
SECRETARY	2.00	х		х				0.	0.	0.
(11) BRANDON RENAUD	2.00								••	0 .
CHAIR - UNTIL 11/23		x		х				0.	0.	0.
(12) JOHN BOLADIAN	2.00									
DIRECTOR - UNTIL 12/23		х						0.	0.	0.
(13) SARA CONZEMIUS	2.00									
DIRECTOR - AS OF 7/23		Х						0.	0.	0.
(14) KEVIN DEMASTER	2.00									
DIRECTOR - UNTIL 1/24		Х						0.	0.	0.
(15) BRIAN DOYLE	2.00									
DIRECTOR		Х						0.	0.	0.
(16) CARLA FOSTER	2.00								•	•
DIRECTOR - AS OF 9/23	0.00	Х				<u> </u>		0.	0.	0.
(17) JULIA FRIEDMAN	2.00	77							0	•
DIRECTOR - AS OF 4/24		Х						0.	0.	0 . Form 990 (2023)

332007 12-21-23

Form 990 (2023)

14080429 150872 155019

2023.05070 MIDWEST ENERGY EFFICIENCY 155019_1

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Form 990 (2023) MIDWEST B	ENERGY E	EFF	ΊC	IE	NC	'Y	AI	LIANCE	36-435	20	22	Р	age 8
Part VII Section A. Officers, Directors, Trust	tees, Key Em	oloy	ees,	and	l Hig	ghes	st C	ompensated Employee	es (continued)				
(A)	(B)			(0	C)			(D)	(E)			(F)	
Name and title	Average	(do		Pos heck			200	Reportable	Reportable		Est	imate	ed
	hours per	box	, unle	ss per	rson i	s both	n an	compensation	compensation		am	ount	of
	week		cer ar T	nd a di	irecto	or/trus	tee)	from	from related		C	other	
	(list any	director						the	organizations		comp		
	hours for related	or di	ee			ated		organization	(W-2/1099-MISC/			m th	
	organizations	ustee	trust		96	upens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		•	nizat relat	
	below	dual ti	itiona		nploy	st cor	-				orgar		
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orgai	inzati	0110
(18) KATIE FRYE	2.00	_	-		Ť	1-0	_			-			
DIRECTOR		х						0.	0				0.
(19) ANTHONY FRYER	2.00									+			-
DIRECTOR		х						0.	0				Ο.
(20) THOMAS GLENDENING	2.00									+			•••
DIRECTOR - AS OF 5/24		х						0.	0				Ο.
(21) AMALIA HICKS	2.00								Ĭ	╧			
DIRECTOR		x						0.	0				0.
(22) CATUL KITI	2.00								Ĭ	╧			•••
DIRECTOR - UNTIL 5/24	2.00	x						0.					0.
(23) BRYAN MCDANIELS	2.00								, v				••
DIRECTOR	2.00	x						0.					0.
(24) TODD MCVICKER	2.00	23							Ĭ	-			••
DIRECTOR - AS OF 11/23	2.00	x						0.					0.
(25) JEN MILAZZO	2.00								, v				••
DIRECTOR - AS OF 5/24	2.00	x						0.					0.
(26) SARAH MOSKOWITZ	2.00	Δ						0.					0.
DIRECTOR - UNTIL 11/23	2.00	x						0.	0. 0.			0.	
dh. Cubtatal								703,506.			68	7	05.
1b Subtotal								0.			0	,,,	0.
c Total from continuation sheets to Part VI								703,506.			68,705.		
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but not address to the second s										•	0	,,,	0.5.
	or infined to th	ose	liste	u au	ove	9 WI	O TE	eceived more than \$100	,000 of reportable				5
compensation from the organization											•	Yes	No
		1					. I a : a				_	163	
3 Did the organization list any former officer,	,	,							5		•	v	
line 1a? If "Yes," complete Schedule J for su											3	X	
4 For any individual listed on line 1a, is the su												х	
and related organizations greater than \$150										· -	4	Δ	
5 Did any person listed on line 1a receive or a											-		v
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	<u>plete Schedule</u>	e J fo	or sı	ich r	oers	on				<u>. </u>	5		X
•									100.000 . (
1 Complete this table for your five highest con		•								Isatio	In trop	n	
the organization. Report compensation for t	ne calendar ye	eare	nair	ig w		or wi			rear.		(0)		
(A) (B) Name and business address NONE Description of services Co										Cor	(C) mpen	l satio	n

Total number of independent contractors (including but not limited to those listed above) who received more than 2 \$100,000 of compensation from the organization 0 SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2023)

	<u>ENERGY</u>									4044
Part VII Section A. Officers, Directors, (A)			yee			lighe	est (Compensated Employe	, ,	(E)
(A) Name and title	(B)			((ر. ition			(D) Reportable	(E)	(F) Estimated
Name and title	Average hours	(c)	neck				lv)	compensation	Reportable compensation	amount of
	per						y)	from	from related	other
	week					yee		the	organizations	compensation
	(list any	ector				old ma		organization	(W-2/1099-MISC)	from the
	hours for	or dir	ee			ated e		(W-2/1099-MISC)		organization
	related	ustee	trust		ee	upens				and related organizations
	organizations below	lual tr	tional		n plo y	st con	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) DENISE MUNOZ	2.00									
DIRECTOR		Х						0.	0.	0.
(28) CARL NELSON	2.00									
DIRECTOR		Х						0.	0.	0 .
(29) LISA OBEAR	2.00								•	~
DIRECTOR - UNTIL 7/23		X						0.	0.	0.
(30) ASHLEY PALLADINO	2.00	v							<u>^</u>	~
DIRECTOR (31) CRAIG REDMON	2.00	Х						0.	0.	0.
DIRECTOR - UNTIL 8/23	2.00	х						0.	0.	0
(32) CARL SAMUELSON	2.00	Λ						0.	0.	0
DIRECTOR	2.00	х						0.	0.	0
(33) THERESEA SCHMIDT	2.00									
DIRECTOR		х						0.	Ο.	0.
(34) JOLENE SHELL	2.00									
DIRECTOR		Х						0.	0.	0.
(35) CARMEN WELCH	2.00									
DIRECTOR - AS OF 1/24		Х						0.	0.	0.
(36) DAVID SIDDIQUI	2.00									
DIRECTOR - UNTIL 3/24		Х						0.	0.	0 .
(37) ANDRENIKA WHISENTON	2.00	37						0	0	0
DIRECTOR	2.00	X						0.	0.	0.
(38) EMILY WILBUR DIRECTOR	2.00	х						0.	0.	0 .
(39) WILLIAM WOREK	2.00	~						0.	0.	0
DIRECTOR	2.00	х						0.	0.	0
									••	
	1									
otal to Part VII, Section A, line 1c								1		

332201 04-01-23

		(2023) MIDWEST ENERGY	<u> EFFICI</u>	ENCY ALLIAN	ICE	36-4352	022 Page 9
Pa	rt VI						_
		Check if Schedule O contains a response or	r note to any lin		(B)	(0)	
			ľ	(A) Total revenue	(D) Related or exempt	(C) Unrelated	(D) Revenue excluded
				i otali fotolido		business revenue	from tax under
							sections 512 - 514
nts nts	1 a	a Federated campaigns 1a					
Gra	k		582,927.				
ts, (Am	C	c Fundraising events 1c					
Giff Iar	C	d Related organizations 1d					
ns, Simi	e		377,942.				
tior Sr	f	f All other contributions, gifts, grants, and					
ibu			505,876.				
Contributions, Gifts, Grants and Other Similar Amounts	ç	g Noncash contributions included in lines 1a-1f					
a Č	ł	h Total. Add lines 1a-1f		3,566,745.			
			Business Code	F 00 100	— ——		
Се	2 8		611710	780,130.	780,130.		
ervi	k	b TUITION INCOME	611710	206,919.	206,919.		
n Si ent	C	c PROGRAM SERVICE REVENU	611710	21,759.	21,759.		
ran 3ev	C	d					
Program Service Revenue	e	e					
Ч	f	f All other program service revenue		1 000 000			
		g Total. Add lines 2a-2f		1,008,808.			
	3	Investment income (including dividends, interes		126 641			176 641
		other similar amounts)		126,641.			126,641.
	4	Income from investment of tax-exempt bond pro	oceeds				
	5	Royalties	(ii) Personal				
	•		(II) Personal				
	6 6						
		b Less: rental expenses 6b c Rental income or (loss) 6c					
		A Net rental income or (loss) a Gross amount from sales of (i) Securities	(ii) Other				
	1 6	a closs annount norm sales of a sets other than inventory 7a					
		b Less: cost or other basis					
e	•	and sales expenses					
evenue		c Gain or (loss)					
		d Net gain or (loss)					
Other R		a Gross income from fundraising events (not					
Oth	0.	including \$ of	ľ				
0		contributions reported on line 1c). See	ľ				
		Part IV, line 18					
	ł	b Less: direct expenses 8b					
		c Net income or (loss) from fundraising events					
		a Gross income from gaming activities. See					
		Part IV, line 19 9a					
	k	b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities					
	10 a	a Gross sales of inventory, less returns	ľ				
		and allowances 10a					
	k	b Less: cost of goods sold 10b					
	C	c Net income or (loss) from sales of inventory					
Ś			Business Code	20.116			20.116
Miscellaneous Revenue	11 a	a MISCELLANEOUS	900003	30,116.			30,116.
lan	k	b					
Sev	C						
Mis		d All other revenue		20 116			
		e Total. Add lines 11a-11d		30,116. 4,732,310.	1 008 000	0	156,757.
	12	Total revenue. See instructions	<u></u>	±,/JZ,JIU.	µ,000,000.	U •	Form 990 (2023)
33200	9 12-2	.1-23					FUTH 330 (2023)

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MIDWEST ENERGY EFFICIENCY ALLIANCE Part IX Statement of Functional Expenses

Do	Check if Schedule O contains a respons	(A)	his Part IX (B) Program service	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	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 foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	100 600	02 106	202 255	1 067
_	trustees, and key employees	489,608.	93,186.	392,355.	4,067
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
_	persons described in section 4958(c)(3)(B)	1,709,576.	002 602	715 002	
7	Other salaries and wages	т,/09,3/0.	993,683.	715,893.	
8	Pension plan accruals and contributions (include	60 052	22 152	47 500	
~	section 401(k) and 403(b) employer contributions)	69,952. 269,703.	22,452. 158,256.	<u>47,500.</u> 111,293.	154
9	Other employee benefits	165,921.	82,986.	82,658.	277
0	Payroll taxes	105,941.	04,900.	04,030.	411
1	Fees for services (nonemployees):				
	Management	15,051.	8,549.	6,502.	
		58,134.	0,549.	58,134.	
	Accounting	J0,1J4.		50,154.	
-	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	392,306.	372,412.	19,894.	
	column (A), amount, list line 11g expenses on Sch 0.)	552,500.	5/2,412.	1,0,4.	
12	Advertising and promotion	85,874.	30,466.	55,408.	
3 4	Office expenses Information technology	131,038.	26,261.	104,777.	
4 5		151,050.	20,201.	104,777	
15 16	Royalties	248,739.	124,442.	124,297.	
10 17		181,094.	92,402.	88,692.	
	Travel Payments of travel or entertainment expenses	101,0040	52,102.	00,052.	
8	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	653,799.	557,888.	95,911.	
9					
20 21	Payments to affiliates				
2	Depreciation, depletion, and amortization	15,866.		15,866.	
3		45,810.	4,581.	41,229.	
.3 24	Other expenses. Itemize expenses not covered	10,010.	1,001.		
	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 0.)				
2	SUBCONTRACTORS	626,634.	583,830.	42,804.	
a b	DUES, LICENSES AND FEES	33,238.	22,281.	10,957.	
с С	SPONSORSHIP	22,930.	22,930.		
d	GIFTS AND GRANTS	11,406.		11,406.	
	All other expenses	7,339.		7,339.	
е 5	Total functional expenses. Add lines 1 through 24e	5,234,018.	3,196,605.	2,032,915.	4,498
ວ 6	Joint costs. Complete this line only if the organization	5,251,0104	5,150,005.		
U	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check hereif following SOP 98-2 (ASC 958-720)				

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332010 12-21-23

Form 990 (2023)

33

Form 990 (2023)

Total liabilities and net assets/fund balances

12 2023.05070 MIDWEST ENERGY EFFICIENCY 155019_1

4,990,879.

33

4,334,115. Form **990** (2023)

		Check if Schedule O contains a response or not	e to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,193,976.	1	1,902,700.
	2	Savings and temporary cash investments			2,551,840.	2	1,173,186.
	3	Pledges and grants receivable, net			10,000.	з	60,000.
	4	Accounts receivable, net			718,304.	4	835,137.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	l in sect	ion 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9				106,955.	9	56,186.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	828,536.			
	b	Less: accumulated depreciation	10b	792,015.	52,386.	10c	36,521.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		357,418.	15	270,385.	
	16	Total assets. Add lines 1 through 15 (must equa			4,990,879.	16	4,334,115.
	17	Accounts payable and accrued expenses			475,124.	17	491,341.
	18	Grants payable		18	0 - 1 0 0		
	19	Deferred revenue				19	27,103.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
-iab		controlled entity or family member of any of thes				22	
-	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	-		871 550	05	669 539
	00	of Schedule D		•••••••••••••••••••••••••••••••••••••••	871,550. 1,346,674.	25 26	669,539. 1,187,983.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, che		• X	1,540,074.	20	1,107,505.
S		and complete lines 27, 28, 32, and 33.	ck nere	; [1]			
nce	27				3,338,737.	27	2 964 311.
ala	28				305,468.	28	2,964,311. 181,821.
ЧE	20	Organizations that do not follow FASB ASC 9		ck here	505,1000	20	101/0210
Fun		and complete lines 29 through 33.	50, che				
o	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or eq				30	·
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc		ſ		31	· · · · · · · · · · · · · · · · · · ·
et /	32	Total net assets or fund balances		r	3,644,205.	32	3,146,132.
z	33	Total liabilities and net assets/fund balances		4,990,879.	33	4 334 115.	

Part XI Reconciliation of Net Assets Check If Schedule O contains a response or note to any line in this Part XI 1 1 Total expenses (must equal Part VIII, column (A), line 25) 2 5, 234, 018. 2 5, 234, 018. 3 -501, 708. 3 Revenue less expenses. Subtract line 2 from line 1 3 -501, 708. 4 3, 644, 205. 5 3, 644, 205. 5 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 3, 644, 205. 6 5 3, 635. 6 6 7 7 Investment expenses 7 8 9 0. 9 Other changes in net assets or fund balances (explain on Schedule O) 9 0. 0 1 Accounting method used to prepare the Form 990: Cast X Accrual Other 1 Accounting method used to prepare the Form 990: Cast X Accrual Other 1 Accounting method used to prepare the Form 990: Cast X Accrual Other In In In In In In In In		1990 (2023) MIDWEST ENERGY EFFICIENCY ALLIANCE	36-43	352022	Pag	_{ge} 12			
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		Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X			
	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit						
or audits, explain why on Schedule O and describe any steps taken to undergo such audits		or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					

Form **990** (2023)

Department of the Treasury Internal Revenue Service

(Form 990)

Total

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2023
Open to Public Inspection

Nan	ame of the organization Employer identification number											
		MIDW	EST ENERGY	EFFICIENCY A	LLIAN	NCE		3	6-4352022			
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructior	IS.				
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, cl	neck only (one box.)						
1		A church, convention of ch	urches, or associatio	on of churches described	in sectio	on 170(b)(1	I)(A)(i).					
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)							
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170)(b)(1)(A)(ii	ii).					
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	l in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,			
		city, and state:										
5		An organization operated for	or the benefit of a col	llege or university owned	or operate	ed by a go	overnmental u	nit describe	ed in			
		section 170(b)(1)(A)(iv). (0	Complete Part II.)									
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	X	An organization that norma	Ily receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general j	oublic described in			
		section 170(b)(1)(A)(vi). (C	omplete Part II.)									
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Parl	: II.)							
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(i	x) operate	ed in conju	inction with a	land-grant	college			
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	e or			
		university:										
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from			
		activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support f	rom gross investment			
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the org	ganization a	after June 30, 1975.			
		See section 509(a)(2). (Co	mplete Part III.)									
11		An organization organized a	and operated exclusi	ively to test for public sat	ety. See	section 50	09(a)(4).					
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or			
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section !	509(a)(2).	See section	509(a)(3). (Check the box on			
		lines 12a through 12d that	describes the type o	f supporting organizatior	and com	plete lines	12e, 12f, and	l 12g.				
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	ypically by	giving			
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or truste	es of the su	upporting			
		organization. You must o	complete Part IV, Se	ections A and B.								
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organizatio	n(s), by hav	ving			
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported			
		_ organization(s). You mus	t complete Part IV,	Sections A and C.								
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	lly integrate	ed with,			
		its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ections A,	D, and E.					
d		Type III non-functionally	integrated. A supp	porting organization oper	ated in cor	nnection w	vith its suppo	rted organiz	zation(s)			
		that is not functionally int	• •	e ,	•		•	an attentiv	/eness			
		requirement (see instruct		•								
е		Check this box if the orga					Туре I, Туре	II, Type III				
		functionally integrated, or		nally integrated supportir	ng organiz	ation.			[
		er the number of supported of	•									
g		vide the following information i) Name of supported	ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount o	fmonetary	(vi) Amount of other			
	,	organization		(described on lines 1-10	in your governi	ing document?	support (see in	-	support (see instructions)			
		g		above (see instructions))	Yes	No						

Schedule A (Form 990) 2023 Part II Support Sch

MIDWEST ENERGY EFFICIENCY ALLIANCE

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

Sec	Section A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received. (Do not	0505606	000101	0000000	0.0.4.0.000		1 4 9 6 6 6 9 5					
	include any "unusual grants.")	2597626.	2788191.	2666503.	2747630.	3566745.	14366695.					
2	Tax revenues levied for the organ-											
	ization's benefit and either paid to											
•	or expended on its behalf											
3	The value of services or facilities											
	furnished by a governmental unit to the organization without charge											
		2597626.	2788191.	2666503.	2747630.	3566745	14366695.					
	Total. Add lines 1 through 3 The portion of total contributions	2397020.	2700191.	2000303.	2/4/050.	5500745.	143000931					
5	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)						897,146.					
6	Public support. Subtract line 5 from line 4.						13469549.					
	ction B. Total Support						L					
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total					
7	Amounts from line 4	2597626.	2788191.	2666503.	2747630.	3566745.	14366695.					
	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources \dots	29,749.	7,145.	2,973.	29,268.	126,641.	195,776.					
9	Net income from unrelated business											
	activities, whether or not the											
	business is regularly carried on \dots											
10	Other income. Do not include gain											
	or loss from the sale of capital		c o o		44 4 9 9	20 116	04 454					
	assets (Explain in Part VI.)	9,525.	600.	80.	41,133.		81,454.					
	Total support. Add lines 7 through 10						14643925.					
	Gross receipts from related activities,		,				,442,350.					
13	First 5 years. If the Form 990 is for th	-		-								
Sor	organization, check this box and stor ction C. Computation of Publi											
	Public support percentage for 2023 (I			olumn (f))		14	91.98 %					
	Public support percentage from 2023 (i Public support percentage from 2022					15	94.51 %					
	33 1/3% support test - 2023. If the c											
100	stop here. The organization qualifies						V					
b	33 1/3% support test - 2022. If the o		-									
	and stop here. The organization qual											
17a	10% -facts-and-circumstances test											
		-										
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization											
b	b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or											
	more, and if the organization meets th	-										
	organization meets the facts-and-circu											
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a							
						Schedule A	(Form 990) 2023					

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qualify under the tests listed	below, please comp	olete Part II.)				
Section A. Public Support				-1		
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business and the section 512						
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	L	•		ł	•	
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 						
c Add lines 10a and 10b						
11 Net income from unrelated 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 Total support. (Add lines 9, 10c, 11, and 12.)		l				
14 First 5 years. If the Form 990 is for the check this box and stop here						
Section C. Computation of Pub	lic Support Per					
15 Public support percentage for 2023			column (f))		15	%
16 Public support percentage for 202316 Public support percentage from 202					16	%
Section D. Computation of Inve						/0
17 Investment income percentage for 2			ne 13. column (f)		17	%
18 Investment income percentage from					18	<u>%</u>
19a 33 1/3% support tests - 2023. If th				e 15 is more than 3		
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2022. If th						
line 18 is not more than 33 1/3%, ch 20 Private foundation. If the organizati						" <u>L</u>
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					Jonedule	

MIDWEST ENERGY EFFICIENCY ALLIANCE

(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

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

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Schedule A (Form 990) 2023

16			-	-	
2023.05070	MIDWEST	ENERGY	EFFICIENCY	155019_	_1

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

Part IV | Supporting Organizations

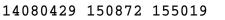
(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and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

Section A. All Supporting Organizations

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

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10b | Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 MIDWEST ENERGY EFFICIENCY ALLIANCE

1 0	Continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
	11c below, the governing body of a supported organization? 11a		
b	A family member of a person described on line 11a above? 11b		
с	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 Part VI. 11c	Ĩ	
Sec	tion B. Type I Supporting Organizations		
		Yes	No
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.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
	supervised, or controlled the supporting organization. 2		
Sec	tion C. Type II Supporting Organizations		
		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		

or management of the supporting organization was vested in the same persons that controlled or managed			
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 Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described 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 Part VI 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	d that the organization used	d to satisfy the Integral Part	t Test during the vear	(see instructions)
•	Check the DOX heat to the method	<i>inal line organization use</i>			1000 1100 000

a ____ The organization satisfied the Activities Test. Complete line 2 below.

b		The organization	is the parent of	of each of its	supported of	organizations.	Complete line 3 be	elow.
---	--	------------------	------------------	----------------	--------------	----------------	--------------------	-------

С		The organization supported a g	governmental entity.	Describe in Part VI how	you supported a go	overnmental entity	(see instruction <u>s).</u>
---	--	--------------------------------	----------------------	-------------------------	--------------------	--------------------	-----------------------------

- 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.* 332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

3a

Yes No

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	dule A (Form 990) 2023 MIDWEST ENERGY EFFICIEN	-		36-4352022 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin			
1	Check here if the organization satisfied the Integral Part Test as a qualifying			in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complet	e Sections A through E.	
Sect	ion A - Adjusted Net Income	_	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 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		
Sect	ion 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	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting o	rganization (see

instructions).

Schedule A (Form 990) 2023

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Schedule A (Form 990) 2023

Section D - Distributions

MIDWEST ENERGY EFFICIENCY ALLIANCE

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** 1 2

1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 3 4 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 6 7 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 9 Distributable amount for 2023 from Section C, line 6 10 **10** Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2023 Amount for 2023 1 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2023 a From 2018 **b** From 2019 c From 2020 d From 2021 e From 2022 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2023 from Section D, line 7: \$ a Applied to underdistributions of prior years b Applied to 2023 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2024. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023			EFFICIENCY		36-4352022 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1	, 2, 3b, 3c, 4b, 4c lines 2 and 3; Pa	:, 5a, 6, 9a, 9t t IV, Section I	o, 9c, 11a, 11b, and 1 E, lines 1c, 2a, 2b, 3a,	Ic; Part IV, Section B, I and 3b; Part V, line 1;	17a or 17b; Part III, line 12; lines 1 and 2; Part IV, Section C, Part V, Section B, line 1e; Part V, dditional information.
						0.1.1.1.1.1.1.
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** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

Schedule B	
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

М

				1
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6-4352022

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

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

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

General Rule

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

Special Rules

X 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 for an *exclusively* set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set is the set in the set in the set in the set in the set is the set in the set in the set in the set in the set is the set in t

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).

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

Part I

MIDWEST ENERGY EFFICIENCY ALLIANCE

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person Payroll 370,307. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 200,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 103,977. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 X Person Payroll 185,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.)

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Employer identification number

36-4352022

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Schedule B (Form 990) (2023)

MIDWEST ENERGY EFFICIENCY ALLIANCE

Name of organization

Employer identification number

36-4352022

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

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Page 3

Schedule I	B (Form 990) (2023)				Page 4			
Name of o	rganization				Employer identification number			
MIDWE	ST ENERGY EFFICIENCY AL	LIANCE			36-4352022			
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	ions to organizations describe) through (e) and the following charitable, etc., contributions of \$1,	line entry. For or	anizations	nat total more than \$1,000 for the year			
(a) No.	Use duplicate copies of Part III if additional	space is needed.						
from Part I	(b) Purpose of gift	(c) Use of git	ft	(d) Dese	cription of how gift is held			
		(e) Transfe	r of gift					
	Transferee's name, address, a	and ZIP + 4	Re	elationship of tra	Insferor to transferee			
(a) No. from	(h) Domes of all (h)			(1) D				
Part I	(b) Purpose of gift 	(c) Use of git	π 	(d) Desc	cription of how gift is held			
	(e) Transfer of gift							
	Transferee's name, address, a	and ZIP + 4	Re	elationship of tra	nsferor to transferee			
(-) N-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of git	ft	(d) Dese	cription of how gift is held			
		(e) Transfe	r of gift					
	Transferee's name, address, a	and ZIP + 4	Re	elationship of tra	Insferor to transferee			
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of git	ft	(d) Dese	cription of how gift is held			
		(e) Transfe	r of gift					
	Transferee's name, address, a	and ZIP + 4	Re	elationship of tra	nsferor to transferee			
323454 12-26	3-23				Schedule B (Form 990) (2023)			

Department of the Treasury

Internal Revenue Service

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

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



Name of the organization

Employer identification number

Nam	MIDWEST ENERGY EFF		36-4352022							
Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the							
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.								
		(a) Donor advised funds	(b) Funds and other accounts							
1	Total number at end of year									
2	Aggregate value of contributions to (during year)									
3	Aggregate value of grants from (during year)									
4	Aggregate value at end of year									
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds							
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No							
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can b	e used only							
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring									
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990	, Part IV, line 7.							
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).								
	Preservation of land for public use (for example, recrea	ation or education) Preservation	of a historically important land area							
	Protection of natural habitat	Preservation	of a certified historic structure							
	Preservation of open space									
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the forr	n of a conservation easement on the last							
	day of the tax year.		Held at the End of the Tax Year							
а	Total number of conservation easements		2a							
b	Total acreage restricted by conservation easements		2b							
с	Number of conservation easements on a certified historic structure	ucture included on line 2a								
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not								
	on a historic structure listed in the National Register									
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	ne organization during the tax							
	year									
4	Number of states where property subject to conservation eas	sement is located	_							
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling o	f							
	violations, and enforcement of the conservation easements it									
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing co	nservation easements during the year							
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ration easements during the year							
_										
8	Does each conservation easement reported on line 2d above									
•										
9	In Part XIII, describe how the organization reports conservation									
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial state	nents that describes the							
Par	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	f Art. Historical Treasures, or ()ther Similar Assets							
	Complete if the organization answered "Yes" on Form									
1a	If the organization elected, as permitted under FASB ASC 95		and balance sheet works							
Ĩ	of art, historical treasures, or other similar assets held for put	· ·								
	service, provide in Part XIII the text of the footnote to its finar		•							
h	If the organization elected, as permitted under FASB ASC 95									
	art, historical treasures, or other similar assets held for public									
	provide the following amounts relating to these items.									
	(i) Revenue included on Form 990, Part VIII, line 1		\$							
	(ii) Assets included in Form 990, Part X									
2	If the organization received or held works of art, historical tre									
2	the following amounts required to be reported under FASB A		a gan, provide							
а	Revenue included on Form 990, Part VIII, line 1	-	\$							
	Assets included in Form 990, Part X									
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2023							

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Part IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization accussion, and other records, check any of the following that make significant use of its contaction terms (check all that apply). d Loan or exchange program 4 Provide acciption of the organization socilections and explain how they further the organization's exempt purpose in Part XIII. Forwide acciption of the organization socilections and explain how they further the organization's acception of the organization's collection? Yes No Part is developed an anount on form 900, Part X, line 21. The organization and program is a social social resource or custodial account liability? Yes No b If Yes," explain the arrangement in Part XIII and complete the following table: Amount 1 1 Is the organization and the organization's accustodial account liability? Yes No b If Yes," explain the arrangement in Part XIII and complete the following table: Intermediation and the organization and the provide and the organization and the organization and the organization and table and anount on Form 990, Part X, line 21, for secret or custodial account liability? Yes No b If Yes," explain the arrangement in Part XIII Check hear If the explanation has been provided in Part XIII Provide the estimated and the organization and the organization and the preserve of the current year and balance (line 10, column (a)) held			ENERGY EF							6-43			age 2
collection lame (check all that apply). a Delta exhibition d Loan or exchange program b Scholarly research e Other	Par	t III Organizations Maintaining C	ollections of Ar	t, Histor	rical 1	Freasures, o	r Othe	r Sin	nilar	Assets	(contin	nued)	
a Public exhibition d Can or exchange program b Schlarly research e Other	3	Using the organization's acquisition, accessi	on, and other record	s, check a	ny of t	he following that	t make s	signific	ant u	se of its			
b Scholary research e Other		collection items (check all that apply).											
c Preservation for future generations 4 Provide a description of the organization is 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 answered 'Yea' on Form 990, Part V, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization and approximation and the organization answered 'Yea' on Form 990, Part X, line 21. 1a Is the organization and approximation or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 1b The organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? 2b Dating balance	а	Public exhibition	c	1 📃 Lo	oan or	exchange progra	am						
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be add to raise funds rather than to be maintained as part of the organization's collection? Part W Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 900, Part X, line 9, or reported an amount on Form 900, Part X, line 21, for escrow or outsolid or or series of the organization and agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 900, Part X, line 21, for escrow or custodial account liability? Each and the year to be stabilitions during the year to be stabilitions the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No be if 'Yes, 'explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part W Endowment Funds Complete if the organization and weread 'Yes' on Form 990, Part X, line 10. Part V Endowment Funds Complete if the organization and weread 'Yes' on Form 990, Part X, line 10. Combitutions to exclusion part to a line t	b	Scholarly research	e	e 🗌 Ot	ther								
5 During the year, did the organization solicit or receive donations of art, historical tressures, or other similar assets 10 be sold to raise funds rather than to be maintained as part of the organization is collection? Part M Escrow and Oustodial Arrangements Complete if the organization assets 11 Ste organization assets 12 Ste organization and exercitive and the organization assets 13 Is the organization and exercitive and on other intermediary for contributions or other assets not included on form 990, Part X 14 Is the organization and exercitive and on other assets and included on form 990, Part X 14 Is the organization and exercitive and on the organization asset included on form 990, Part X 15 Ending balance 16 Indications during the year 16 Indications during the year 17 Indications during the year 16 Ending balance 17 Indications during the year 18 Indications during the year 19 If Yes, 'explain the arrangement in Part XII. Check there if the explanation has been provided in Part XII. 19 Indiversity on the organization answered Yes' on Form 900, Part X, line 21, for serve or organization is ordonarity on the organization answered Yes' on Form 900, Part X, line 10.	С	Preservation for future generations											
top 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. Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 980, Part X, line 21. Yes No. b if "Yes," explain the arrangement in Part XIII and complete the following table: Amount Yes No. c Beginning balance 1d Image: Section 20. Amount Image: Section 20. Amount d Additions during the year 1d Image: Section 20. Image:	4		-	-		-				e in Part	XIII.		
Part W 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 III and complete the following table: Ves No b If "Yes," explain the arrangement in Part XIII and complete the following table: Image: Complete intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrow or custodial account tability? Image: Complete intermediary for escrow or custodial account lability? Image: Complete intermediary for escrow or custodial account lability? Image: Complete intermediary for escrow or custodial account lability? Image: Complete intermediary for escrow or custodial account lability? Image: Complete intermediary for escrow or custodial account lability? Image: Complete intermediary for escrow or custodial account lability? Image: Complete intermediary for escrow or custodial account lability? Image: Complete intermediary for escrew or custodial account lability? Image: Complete intermediary for escrew or custodial account lability? Image: Complete intermediary for escrew or custodial account lability? Image: Complete intermediary for escrew or custodial account lability? Image: Complete intermediary for escrew or custodial account lability? Image: Complete intermediary for escrew or custodial account lability? Image: Complete intermediary for escrew or custodiary for escrew or escrew or escrew or escrew or escrew or escrew or escrew	5	0, , , 0		,		,				_	-		-
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? No b If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount 1d 1d 1d 1d 1d 1d 1d 1d 1d 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No Part V Endowment Funds Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Image: the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No Part V Endowment Funds Complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Image: the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back for a complete if the organization answered 'Yes' on Form 990, Part IV, line 10. Image: the organization answered 'Yes' on Form 990, Part IV, line 10. c Not investment amings, gains, and losses	D												No
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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 1d d Additions during the year 1d e Distributions during the year 1d d Additions during the year 1d d Distributions during the year 1d e Distributions (e) Complete if the organization answered 'Yes' on Form 990, Part X, line 10. Part V Endowment Funds Complete if the organization answered 'Yes' on Form 990, Part X, line 10. a Beginning of year balance (e) Ourrent year (b) Prior year (c) Two years back (e) Four years back (e) Four years back ies and programs e Other expenditures for facilities and programs 1d 1d e Other expenditures for facilities and programs 1d 1d f Administrative expenses 1d 1d 1d	4								-11				
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b. If Yes,* explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds: Complete if the organization answered Yes" on Form 90, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b. Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c. Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (e) Four years back f. Administrative expenses (a)								∟ litv?			Yes		No
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b Contributions			(a) Current year	(b) Prio	or year	(c) Two yea	rs back	(d) ⊺∣	hree ye	ars back	(e) Fou	years	back
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e Other expenditures for facilities and programs	с												
e Other expenditures for facilities and programs	d	Grants or scholarships											
f Administrative expenses	е												
g End of year balance		and programs											
2 Provide the estimated percentage of the current year end balance (line 1g, column (ai)) held as: a Board designated or quasi-endowment% b Permanent endowment% c Term endowment% mthe percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? b If "Yes" on line 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (investment) basis (other) basis (other) depreciation c Leasehold improvements 611, 898. 575, 377. 36, 521. Guipment c Cother 0 140, 979. 140, 979. 0.	f	Administrative expenses											
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: (i) Unrelated organizations? (ii) Related organizations? b If "Yes" on line 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Buildings	g	End of year balance											
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:	2	Provide the estimated percentage of the curr	rent year end balance	e (line 1g, o	columr	n (a)) held as:							
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: (i) Unrelated organizations? (ii) Related organizations? 3a(i) 3b 2 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 (other) depreciation a a basis (investment) basis (other) basis (other) basis (other)	а	Board designated or quasi-endowment		_%									
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (ii) Related organizations? (iii) Related organization? (iii) Related organization? (iii) Related organization? (iii) Related 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 (d) Book value (e) Leasehold improvements (f) Requipment (f) So (f) (f) (f) (f) (f) (f) (f) (f) (f) (f)	b	Permanent endowment	%										
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (ii) Part VI Describe in Part XIII the intended uses of the organization's endowment funds. (i) Cost or other basis (investment) (i) Cost or other basis (other) (i) Cost or other basis (other) (ii) Cost or other basis (other) (iii) Related inprovements (iii) Related organization (iii) Related organization and the organization's endowment funds. (iii) Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (iii) Cost or other basis (other) (iii) Cost cor conter conter basis (other) (iii) Cost cor conter conter	С		•										
organization by: Yes No (i) Unrelated organizations? 3a(i) 3b 3c													
(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. 3b Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation b Buildings 50 575, 377. 36, 521. c Leasehold improvements 611, 898. 575, 377. 36, 521. d Equipment 75, 659. 75, 659. 0. e Other 140, 979. 140, 979. 0.	3a		ssion of the organiza	ation that a	are helo	d and administer	ed for th	ne			1	Vee	Na
(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. 3b Part VI Land, Buildings, and Equipment 3b Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (d) Book value Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation b Buildings 575, 377. 36, 521. c Leasehold improvements 611, 898. 575, 377. 36, 521. d Equipment 75, 659. 0. 0. e Other 140, 979. 140, 979. 0.		c										res	NO
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 1a Land													
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 1a Land	L	(II) Related organizations?	tiona listad os raguir										
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	U A					К?					30		
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	Par			willent lui	ius.								
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land). Part IV. I	ine 11	a. See Form 990	. Part X	. line 1	0.				
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements 611,898. 575,377. d Equipment 75,659. 75,659. e Other 140,979. 140,979.										4	(d) Boo	k valu	<u>م</u>
b Buildings 611,898. 575,377. 36,521. c Leasehold improvements 75,659. 75,659. 0. e Other 140,979. 140,979. 0.			1		• •					-	, 200		-
b Buildings 611,898. 575,377. 36,521. c Leasehold improvements 75,659. 75,659. 0. e Other 140,979. 140,979. 0.	1a	Land		· ·									
c Leasehold improvements 611,898. 575,377. 36,521. d Equipment 75,659. 75,659. 0. e Other 140,979. 140,979. 0.													
d Equipment 75,659. 75,659. 0. e Other 140,979. 140,979. 0.						611,898.		575	,37	7.	3	6,5	21.
e Other													0.
						140,979.		140	,97	9.			
	Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, line 10c	. colu	mn (B))					3	6,5	21.

Schedule D (Form 990) 2023

	(Form 990) 2023		RGY EFFICIENC	Y ALLIANCE	36-4352022 Page 3
Part VII		Other Securities			
	Complete if the orga	anization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, lii	
(a) Descrip	tion of security or categ	Ory (including name of security)	(b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1) Financia	al derivatives				
(2) Closely	held equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (<u>b) must equal Form 990</u>	, Part X, line 12, col. (B))			
Part VIII		Program Related.			
				11c. See Form 990, Part X, lir	
	(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. (Col. (b) must equal Form 990	, Part X, line 13, col. (B))			
Part IX	Other Assets				
	Complete if the orga			11d. See Form 990, Part X, lii	
		. ,	Description		(b) Book value
<u>(1)</u> OP	ERATING LEA	ASE RIGHT OF U	JSE		270,385.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Fo	rm 990, Part X, line 15, co.	l. (B))		
Part X	Other Liabilitie				
			on Form 990, Part IV, line	11e or 11f. See Form 990, Pa	
1.	(a) De	escription of liability			(b) Book value
	leral income taxes				
	ANTS PAYABI				57,219.
		BERSHIP DUES			158,623.
		ASE LIABILITY			36,562.
(5) OP	ERATING LEA	ASE LIABILITY			417,135.
(6)					
(7)					
(8)					
(9)					
2. Liability	for uncertain tax pos	sitions. In Part XIII, provide	the text of the footnote to	the organization's financial s	tatements 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 X

Schedule D (Form 990) 2023

36-4352022 Page 3

332053 09-28-23

Sche	dule D (Form 990) 2023 MIDWEST ENERGY EFFICIENCY A	ALLIANCI	Ξ	36-4	4352022	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With Re	evenue per Re			
	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	4,735	<u>,945.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	3,635.			
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	3 4,732	<u>,635.</u>
3	Subtract line 2e from line 1			3	4,732	,310.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	4,732	,310.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme		xpenses per F	Returi	n	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	5,234	,018.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)					•
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	5,234	,018.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b					
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	5,234	,018.
Pa	t 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.

PART X, LINE 2:

MEEA IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE
INTERNAL REVENUE CODE. IN ADDITION, MEEA HAS BEEN DETERMINED BY THE
INTERNAL REVENUE SERVICE NOT TO BE A "PRIVATE FOUNDATION" WITHIN THE
MEANING OF SECTION 509(A) OF THE INTERNAL REVENUE CODE. MANAGEMENT HAS
ANALYZED THE TAX POSITIONS TAKEN BY MEEA, AND HAS CONCLUDED THAT AS OF
JUNE 30, 2024, THERE ARE NO UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO
BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR
DISCLOSURE IN THE FINANCIAL STATEMENTS.

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Schedule D (Form	990) 2023 plemental Inform	MIDWEST	' ENERGY	EFFICIENCY	ALLIANCE	36-4352022	Page 5
Part XIII Sup	plemental Inform	nation _{(conti}	inued)				
						Schedule D (Form 9	90) 2023
							,

14080429 150872 155019

SCHEDULE J	Compensation Information	I	OMB No. 1	1545-004	47
(Form 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	n n	
	Compensated Employees		20	ZJ)
Department of the Trees	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
Department of the Treas Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe	ction	
Name of the orga	zation	Employer id			mber
	MIDWEST ENERGY EFFICIENCY ALLIANCE	36-4	35202	2	
Part I Que	tions Regarding Compensation				
				Yes	No
1a Check the a	propriate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
Part VII, Sec	on A, line 1a. Complete Part III to provide any relevant information regarding these items.				
First-cla	s or charter travel Housing allowance or residence for perso	nal use			
Travel f	r companions Payments for business use of personal re	sidence			
	mnification and gross-up payments Health or social club dues or initiation fee	s			
Discreti	nary spending account Personal services (such as maid, chauffer	ur, chef)			
	oxes on line 1a are checked, did the organization follow a written policy regarding payment or				
	t or provision of all of the expenses described above? If "No," complete Part III to explain		<u>1b</u>		
0	zation require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
trustees, and	officers, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
2 Indianta utai					
	n, if any, of the following the organization used to establish the compensation of the organization's e Director. Check all that apply. Do not check any boxes for methods used by a related organizati				
	pensation of the CEO/Executive Director, but explain in Part III.				
	sation committee Written employment contract				
·	Jent compensation consultant X Compensation survey or study				
	D of other organizations \mathbf{X} Approval by the board or compensation	ommittee			
		ommittee			
4 During the ye	ar, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	r a related organization:				
•	erance payment or change-of-control payment?		4a		X
	or receive payment from a supplemental nonqualified retirement plan?				X
•	or receive payment from an equity-based compensation arrangement?				X
	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	sted on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
contingent o	the revenues of:				
a The organiza	on?		. 5a		X
	ganization?				X
If "Yes" on li	e 5a or 5b, describe in Part III.				
	sted on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
-	the net earnings of:				
	on?				X
	ganization?		. 6b		X
	e 6a or 6b, describe in Part III.				
	sted on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			77	
	on lines 5 and 6? If "Yes," describe in Part III		7	Х	
	ounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ne			v
			8		X
	e 8, did the organization also follow the rebuttable presumption procedure described in				
	ection 53.4958-6(c)?		. 9		
For Paperwork R	duction Act Notice, see the Instructions for Form 990.	Schedu	ule J (Forn	n 990)) 2023

LHA 332111 11-06-23

Schedule J (Form 990) 2023

36-4352022

Page 2

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 and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) BILL ANGELOS	(i)	138,219.	18,000.	0.	4,734.	7,759.	168,712.	0.	
DEPUTY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) JENNIFER RHODES	(i)	133,356.	17,500.	0.	4,569.	7,759.	163,184.	0.	
DIRECTOR OF MEMBERSHIP AND	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
_	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(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.

PART I, LINE 3:

THE LAST COMPENSATION STUDY WAS COMPLETED IN SEPTEMBER 2023.

PART I, LINE 7:

THE FOLLOWING PERSONS RECEIVED BONUSES THAT WERE AWARDED AT THE DISCRETION

OF THE BOARD, NON-FIXED PAYMETNS, FOR THE YEAR ENDED DECEMEBR 31, 2023:

BILL ANGELOS, DEPUTY EXECUTIVE DIRECTOR, \$18,000

JENNIFER RHODES, DIRECTOR OF MEMBERSHIP, \$17,500

MOLLY GRAHAM, MSE DIRECTOR, \$15,000

ALISON LINDBURG, BUILDING POLICY DIRECTOR, \$10,000

Schedule J (Form 990) 2023

SCHEDULE	0
(Form 990)	

Name of the organization

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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

MIDWEST ENERGY EFFICIENCY ALLIANCE

Employer identification number 36-4352022

FORM 990, PART VI, SECTION A, LINE 6:

THE CORPORATION IS ORGANIZED UNDER AND SHALL OPERATE AS AN ILLINOIS

NOT-FOR-PROFIT CORPORATION, AND SHALL HAVE SUCH POWERS AS ARE NOW OR AS MAY

HEREAFTER BE GRANTED BY THE GENERAL NOT-FOR-PROFIT CORPORATION ACT OF THE

STATE OF ILLINOIS.

FORM 990, PART VI, SECTION A, LINE 7A:

THE BOARD GOVERNANCE COMMITTEE CHOOSES A SLATE OF CANDIDATES AND THE MEMBER

ORGANIZATIONS VOTE UP OR DOWN ON THE SLATE.

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

THE FINANCE COMMITTEE PERFORMS AN INITIAL REVIEW OF THE FORM 990 AND THEN

THE EXECUTIVE COMMITTEE PERFORMS AN ADDITIONAL REVIEW BEFORE THE RETURN IS FILED.

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

THE ORGANIZATION PERIODICALLY REVIEWS ANY CONNECTIONS BETWEEN DIRECTORS/KEY

EMPLOYEES AND THEIR BUSINESS RELATIONSHIPS WITH THE ORGANIZATION.

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

THE DIRECTOR'S COMPENSATION IS SET BY THE EXECUTIVE DIRECTOR, AND THE

EXECUTIVE DIRECTOR'S COMPENSATION IS SET BY THE BOARD OF DIRECTORS. BOTH

USE AN INDUSTRY BENCHMARK TO DETERMINE COMPENSATION.

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

MAKING GOVERNING DOCUMENTS, CONFLICT OF INTEREST, & FINANCIAL STATEMENTS

35

Iame of the organization			Pag Employer identification numb 36-4352022
MIDWEST ENER	GY EFFICIENCY	ALLIANCE	36-4352022
VAILABLE TO THE PUBLIC UP	ON REQUEST.		

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