EXTENDED TO NOVEMBER 15, 2019

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A	For th	e 2018 calendar year, or tax year beginning and er	naing					
В	Check if applicab	la:		D Employer identifi	cation number			
	Addre	INSTITUTE FOR ENERGY ECONOMICS AND FINANCIAL ANALYSIS INC.						
	Name			45-4	244605			
	Initial		oom/suite	E Telephone numbe				
	Final	3430 POCKY BIMED DRIVE		216-	216-688-3433			
	termir ated	Gity or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,764,678.			
	Amen return	CLEVELAND, OR 44111		H(a) Is this a group re				
	Application		W. Marcillo and Con-	for subordinates				
_	pendi	3430 ROCKY RIVER DRIVE, CLEVELAND, OH	44111	H(b) Are all subordinates in	ncluded? Yes No			
_		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)			
_		te: ► WWW.IEEFA.ORG		H(c) Group exemptio				
		forganization: X Corporation Trust Association Other	L Year o	of formation: 2011 N	N State of legal domicile: MA			
P	art I	Summary						
e	1	Briefly describe the organization's mission or most significant activities: TO ACC			NSITION TO			
and		A DIVERSE, SUSTAINABLE AND PROFITABLE ENER						
ern	2	Check this box if the organization discontinued its operations or disposed		1 1				
30	3			3	6			
ø	4	Number of independent voting members of the governing body (Part VI, line 1b)			<u>6</u>			
ties	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)						
Activities & Governance	6	Total number of volunteers (estimate if necessary)	••••	6	10			
Ac	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.			
-	d	Net unrelated business taxable income from Form 990-T, line 38	······					
Revenue	8	Contributions and grants (Part VIII line 1h)		Prior Year 3,405,500.	3,757,673.			
	9	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		4,200.	3,125.			
	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		66.	3,880.			
Re	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	3,000.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,409,766.	3,764,678.			
	-	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
10		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		272,083.	338,293.			
Expenses	162	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
per	b	Total fundraising expenses (Part IX, column (D), line 25) 219,678						
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,172,466.	2,743,043.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,444,549.	3,081,336.			
	1	Revenue less expenses. Subtract line 18 from line 12		965,217.	683,342.			
OF				inning of Current Year	End of Year			
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		1,815,059.	2,572,760.			
ABB	21	Total liabilities (Part X, line 26)		93,170.	167,529.			
ESE.	22	Net assets or fund balances. Subtract line 21 from line 20		1,721,889.	2,405,231.			
Pa	art II	Signature Block						
Und	ler pena	alties of perjury, I declare that I have examined this return, including accompanying schedules a	ind stateme	nts, and to the best of my	knowledge and belief, it is			
true	, correc	et, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer h	nas any knowledge.				
Sig	n	Signature of officer		Date				
Her	re	ALEXANDRA BUCHANAN, EXECUTIVE DIRECTOR						
_		Type or print name and title	In	I	TI DTIN			
2 V		Print/Type preparer's name Preparer's signature	Da	ate Check If	PTIN			
Paid		NICHOLAS D. VALENTINO Firm's name MILLS, POTOCZAK & COMPANY		self-employe				
	parer	Firm's EIN	34-1664751					
Use	Only	Firm's address 27600 CHAGRIN BLVD., SUITE 200			16) 464 8404			
		CLEVELAND, OH 44122		Phone no. (2)	16) 464-7481			
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)		.,	X Yes No			

	INSTITUTE FOR ENERGY ECONOMICS AND
	990 (2018) FINANCIAL ANALYSIS INC. 45-4244605 Page 2
Pa	t 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:
	TO ACCELERATE THE TRANSITION TO A DIVERSE, SUSTAINABLE AND PROFITABLE
	ENERGY ECONOMY AND TO REDUCE DEPENDENCE ON COAL AND OTHER
	NON-RENEWABLE ENERGY SOURCES.
_	
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1,720,303. including grants of \$) (Revenue \$3,125.
	TO CONDUCT ANALYSIS AND PUBLISH AND RELEASE STUDIES ON ENERGY ISSUES;
	RESOURCE PLANNING; POWER PLANT ECONOMICS AND FINANCING; THE FINANCIAL
	AND ECONOMIC RISKS OF ENERGY ALTERNATIVES; WATER AND ENERGY; AND COAL
	RESERVES, EXPORTS AND PRICES.
44.	(Code:) (Expenses \$ 954,429 · including grants of \$) (Revenue \$
4b	(Code:) (Expenses \$954,429 · including grants of \$) (Revenue \$
	YEAR AND HOLD ADDITIONAL WEBINARS, SEMINARS AND OTHER EDUCATIONAL
	EVENTS AS NEEDED AND REQUESTED.
	EVENTS AS NEEDED AND REQUESTED.
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$
46	(Code: / Expenses \$
4d	Other program services (Describe in Schedule O.)
	NOT AND THE PARTY OF THE PARTY

including grants of \$ 2 , 674 , 732 .

Form 990 (2018)

4e Total program service expenses ▶

INSTITUTE FOR ENERGY ECONOMICS AND FINANCIAL ANALYSIS INC.

Form 990 (2018)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? 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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			1 55556
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	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			1235
	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?			22
	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,			v
**	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	44		v
45	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,"	40		v
00	complete Schedule G, Part III	19		X
20a		20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
	domestic government on real tx, column (xy, interior needs, complete ochecule), rand rand in	41		44

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INSTITUTE FOR ENERGY ECONOMICS AND

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FINANCIAL ANALYSIS INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	-
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
201	Schedule K. If "No," go to line 25a	24a	-	X
	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			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		X
62	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	Λ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	OEh		X
00	Schedule L, Part I	25b		V
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	000		X
07	complete Schedule L, Part II	26		Λ
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		X
00	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		21
28				
	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		- 22
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		**
30	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
01	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-		
U.	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
.00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
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 in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 17			
b				
C			Server .	
	(gambling) winnings to prize winners?	1c	X	

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Form 990 (2018) FINANCIAL ANALYSIS INC.

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

rai	Statements negaring other ind rainings and rax compliance (communication)								
			Yes	No					
	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 3								
	nive is the same job strength of the same is a same in the	-	v						
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	-					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			v					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b							
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			v					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
	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).			v					
	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 5c		Δ					
	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
	Organizations that may receive deductible contributions under section 170(c).	_		v					
	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							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	-		Х					
	to file Form 8282?	7c							
	If "Yes," indicate the number of Forms 8282 filed during the year	7e		Х					
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
100									
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
		8							
	sponsoring organization have excess business holdings at any time during the year?	0		-					
	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a							
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
	Section 501(c)(7) organizations. Enter:	30							
	Initiation fees and capital contributions included on Part VIII, line 12								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders								
	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
192	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	124							
. 1	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note. See the instructions for additional information the organization must report on Schedule O.								
	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
	Enter the amount of reserves on hand								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b							
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		Х					
	If "Yes," see instructions and file Form 4720, Schedule N.								
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X					
	If "Yes," complete Form 4720, Schedule O.								
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI		*****	X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	5							
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent1b	5							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6									
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a		12a	X						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13	X	i i i i i i i i i i i i i i i i i i i					
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 approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	X						
	Other officers or key employees of the organization	15b	X						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ►MA, OH, CA, NY								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3	s only	availa	ble					
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial						
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
	ALEXANDRA BUCHANAN - 216-688-3433								
	3430 ROCKY RIVER DRIVE, CLEVELAND, OH 44111								

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LARRY SHAPIRO	5.00									
PRESIDENT		X		Х				0.	0.	0
(2) SUZANNE MATTEI	1.00							6.5		
VICE PRESIDENT		X		X				0.	0.	0
(3) ERIC SCHAEFFER	1.00									
TREASURER		X		X				0.	0.	0
(4) SARAH BRENNAN	1.00							_	_	_
DIRECTOR	1 00	X						0.	0.	0
(5) MARK COLON	1.00	77						_		0
DIRECTOR	1.00	X						0.	0.	0
(6) CHRIS MEYER	1.00	Х						0.	0	0
DIRECTOR	40.00	Δ			-			0.	0.	0
(7) ALEXANDRA BUCHANAN EXECUTIVE DIRECTOR/SECRETA	40.00			х				176,070.	0.	12,174

FINANCIAL ANALYSIS INC.

Par	t VII Section A. Officers, Directors, True	stees, Key Em	ploy	ees	, an	d Hi	ghe	st C	Compensated Emple	oyees (continued)				
	(A)	(B)				C)			(D)	(E)			(F)	
	Name and title	Average	Position (do not check more than one box, unless person is both an						Reportable	Reportable		10000	timate	No.
		hours per week					is bot or/trus						nount other	or
		(list any						the	organizations			pensa	ation	
		hours for	r direc				ted		organization	(W-2/1099-MIS	C)	fr	om th	е
		related	stee o	rustee		-	pensa		(W-2/1099-MISC)			anizat	
		organizations below	ual tru	ional t		ployer	tcom						d relat anizati	
		line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ai nzati	OHO
			-		-	×		_						
							1							
										A Second				
-						L								
34			_			_					-			
			-											
4			-		_	-	-				-			
			-											
			-		_	+	-				-			
			-											
-		_	-			\vdash					-			
			1											
16	Sub-total					_	_	•	176,07	0 -	0.	1	2.1	74.
	Total from continuation sheets to Part V									0.	0.			0.
	Total (add lines 1b and 1c)								176,07		0.	1	2,1	74.
2	Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) wh	no r)			
	compensation from the organization						100							1
													Yes	No
3	Did the organization list any former officer	, director, or tru	uste	e, ke	y e	mple	oyee	, or	highest compensate	ed employee on				2020
	line 1a? If "Yes," complete Schedule J for											3		X
4	For any individual listed on line 1a, is the s													
	and related organizations greater than \$15											4	X	
5	Did any person listed on line 1a receive or									idividual for services		_		7.7
	rendered to the organization? If "Yes," cor	nplete Schedul	e Ji	for s	uch	per	son				****	5		X
	tion B. Independent Contractors		al a sa				va. n.t.		that received more th	an \$100 000 of com	none	ation 1	from	
1	Complete this table for your five highest of the organization. Report compensation for										Jense	ation	TOITI	
		the calendar y	eai	enai	ng v	WILLI	OI W	IUII	(E			10	C)	
	(A) Name and busines	s address							Description		C	ompe	nsatio	n
m I	R. ROSE ASSOCIATES, LT	D.							RESEARCH,	REPORTS.				
	PATRIOTS PLACE, KINGS		1	24	01				TESTIMONY			45	4,5	41.
	XX INVESTMENT MGT. PTY								RESEARCH,	The second secon				
	FRALLAN AVE., WEST PY			TRA	AL	ΙA			SERVICES			44	1,7	28.
	LISSEL TECHNICAL CONS													
	HORACE ROAD, BELMONT,								TECHNICAL	SERVICES		34	3,0	19.
	ENERGY, 78 BELLE VUE			LI	SB	UR	Υ,		RESEARCH,	CONSULTING				
	TED KINGDOM SP1 3YD						0.7%		SERVICES			23	2,5	45.
GO	DD WORLD COMMUNICATION								MEDIA RELA	TION			120 41	
	4 N. FULLERTON AVE., M	ONTCLAI										17	9,6	11.
2	Total number of independent contractors					the	se li			ed more than				
	\$100,000 of compensation from the organ	nization >					5							

Form 990 (2018) FINANCIAL ANALYSIS INC.

		Check if Schedule O cont	tants a 105ponso	or note to any m	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gransimilar amounts not included about	tions) 1e 1f 3	757,673.				
9 G	h	Total. Add lines 1a-1f		, Þ	3,757,673.			
Program Service Revenue		RESEARCH		Business Code 541700	3,125.	3,125.		
Ser	ь	-						
E S	c							
Re	u o		4.					
Pro	4	All other program service reve	entie					
		Total. Add lines 2a-2f		The second secon	3,125.			
	3	Investment income (including other similar amounts) Income from investment of ta	dividends, inter	est, and	3,880.			3,880
	5	Royalties		.,				
	b	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss)		(ii) Personal				, , ,
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses		(ii) Other				
		Gain or (loss)			- "			
Other Revenue		Gross income from fundraisir including \$contributions reported on line	ng events (not of					ji Tu
er Re		Part IV, line 18	a	i				
g		Less: direct expenses						
		Net income or (loss) from fun Gross income from gaming a Part IV, line 19	ctivities. See					
	b	Less: direct expenses						
		Net income or (loss) from gar						
		Gross sales of inventory, less and allowances	8					
		Less: cost of goods sold Net income or (loss) from sale						
ē.	c	Miscellaneous Revenu		Business Code			- 100	
	11 a							
	С							
		All other revenue						
	е	Total Add lines 11a-11d		-	3.764.678.	3,125.	0.	3,880

Form 990 (2018) FINANCIAL ANALYSIS INC.

Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		1		
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	150 500	71 426	17 050	00 205
	trustees, and key employees	178,590.	71,436.	17,859.	89,295
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	105 602	27,515.	50,101.	28,007
7	Other salaries and wages	105,623.	21,515.	50,101.	20,007
8	Pension plan accruals and contributions (include	11 110	3,828.	2,691.	4,599
	section 401(k) and 403(b) employer contributions)	11,118. 23,879.	6,822.	9,695.	7,362
9	Other employee benefits		6,480.	5,005.	7,598
10	Payroll taxes	19,083.	0,400.	3,003.	1,330
11	Fees for services (non-employees):				
	Management	6,410.		6,410.	
	Legal	15,193.		15,193.	
	Accounting	13,133.		13,133.	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,		-		
g	column (A) amount, list line 11g expenses on Sch 0.)	2,275,914.	2,144,209.	63,046.	68,659
40	Advertising and promotion	2,213,314.	2/11/2001	00/0201	00,000
12	Office expenses	31,160.	19,104.	7,457.	4,599
13 14	Information technology	31/100.	25/2020	.,,	-1
15	Royalties				
16	Occupancy	12,000.	3,600.	4,200.	4,200
17	Travel	65,880.	60,011.	819.	5,050
18	Payments of travel or entertainment expenses	00/0001			
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates			1/2	
22	Depreciation, depletion, and amortization				
23	Insurance	6,290.	5,571.	410.	309
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	EDUCATION AND TRAINING	168,630.	168,630.		
b	MEDIA COMMUNICATIONS	80,806.	76,766.	4,040.	
C	DUES & SUBSCRIPTIONS	80,760.	80,760.		
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,081,336.	2,674,732.	186,926.	219,678
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year 1,224,162. 1,844,786. 1 Cash - non-interest-bearing 1 2 Savings and temporary cash investments 2 416,675. 553,084. 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net Inventories for sale or use 174,222. 174,890. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets Other assets. See Part IV, line 11 15 1,815,059. 2,572,760. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 93,170. 156,344. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 11,185. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 167,529. 93.170. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 105,405. 160,674. 27 Unrestricted net assets 27 1,616,484. 2,244,557. 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 2,405,231. 1,721,889. 33 33 Total net assets or fund balances 1.815.059. 2,572,760. Total liabilities and net assets/fund balances

Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Ш
	Total revenue (must equal Part VIII, column (A), line 12)	1	3,76	4.6	78.
1	그렇게 보면 문에 하게 하게 하게 하게 하게 하게 되었다. 이 이 있는 그 없이 살아	2	3,08		
2	Total expenses (must equal Part IX, column (A), line 25)	3			42.
3	Revenue less expenses. Subtract line 2 from line 1	4	1,72		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	5	±, / 2.	_, _	02.
5	Net unrealized gains (losses) on investments	6			
6	Donated services and use of facilities	7			-
7	Investment expenses				_
8	Prior period adjustments	8		-	0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	40	2,40	5 2	31
D-	column (B))	10	2,40.	0,4	21.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		***************************************	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	- Constant	-	103	140
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			1550	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				-
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

2018

Open to Public Inspection

Name of the organization INST

INSTITUTE FOR ENERGY ECONOMICS AND FINANCIAL ANALYSIS INC.

Employer identification number 45-4244605

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in X section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed (vi) Amount of other (v) Amount of monetary (iii) Type of organization (i) Name of supported in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Total

Schedule A (Form 990 or 990-EZ) 2018 FINANCIAL ANALYSIS INC.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1425450.	1590250.	2226946.	3405500.	3757673.	12405819.
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		No productive August 2				
4	Total. Add lines 1 through 3	1425450.	1590250.	2226946.	3405500.	3757673.	12405819.
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)						4591748.
6	Public support. Subtract line 5 from line 4.		-				7814071.
	ction B. Total Support	, , , , , , , , , , , , , , , , , , ,					
-	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	1425450.	1590250.	2226946.	3405500.		12405819.
8							
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	644.	231.	36.	66.	3,880.	4,857.
9	The control of the co	044.	251.	30.		5,000.	
9	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)	50.					50.
	- B. 2018 11 10 10 10 10 10 10 10 10 10 10 10 10	50.					12410726.
	Total support. Add lines 7 through 10 Gross receipts from related activities,	ata (ana instructio	anc)			12	300,475.
12	First five years. If the Form 990 is for			d fourth or fifth to	av vear as a sectio		300/1/30
13	organization, check this box and stop						
Se	ction C. Computation of Publ						
	D 1 II			column (fi)		14	62.96 %
14	Public support percentage from 2017					15	%
10	a 33 1/3% support test - 2018. If the c	rappization did no	t check the hox of	n line 13, and line	14 is 33 1/3% or n		
100	stop here. The organization qualifies						
	33 1/3% support test - 2017. If the c						
	and stop here. The organization qual						
47	a 10% -facts-and-circumstances tes						
1/6	and if the organization meets the "fac	to and sireumstan	anization did not t	nie boy and eton b	ore Evolain in Pa	rt VI how the orga	nization
	meets the "facts-and-circumstances" o 10% -facts-and-circumstances tes						
1							
	more, and if the organization meets the						
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	п ии пот спеск а	box on line 13, 16	a, 100, 17a, 01 17t			0 or 990-EZ) 2018

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not				2 2000		
	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 bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
-	The value of services or facilities						
5	furnished by a governmental unit to						
6	Total. Add lines 1 through 5	***		Miss and Miss			
	Amounts included on lines 1, 2, and						
200	3 received from disqualified persons						
ł	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
_	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6	1-7	1-7				
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	189					
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, this	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) org	anization,
	check this box and stop here						
Se	ction C. Computation of Publi	c Support Pe	rcentage				
15	Public support percentage for 2018 (li	ne 8, column (f),	divided by line 13,	column (f))		15	%
	Public support percentage from 2017					16	%
Se	ction D. Computation of Inves	tment Incom	e Percentage				
17	Investment income percentage for 20	18 (line 10c, colui	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	2017 Schedule A,	Part III, line 17			18	%
19	a 33 1/3% support tests - 2018. If the	organization did i	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and li	ne 17 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly s	supported organiz	ation	▶□
	b 33 1/3% support tests - 2017. If the	organization did I	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3	%, and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	nization qualifies	as a publicly supp	orted organizat	ion
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	▶□

Part IV Supporting Organizations

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

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)		200	
Sec	tion A. All Supporting Organizations		V	NI-
			Yes	No
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.	1		-
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2	-	-
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	-		
	(b) and (c) below.	3a	-	
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.	3b		
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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a	-	
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.	4b		
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.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a	-	
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6	-	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	-	
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.	9a		_
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		-
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		-11
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings)	10b		

determine whether the organization had excess business holdings.)

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Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	-	
	A family member of a person described in (a) above?	11b	-	-
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations		L	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	-	
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	L	
Sec	tion C. Type II Supporting Organizations		т	
			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	1	
Sec	tion D. All Type III Supporting Organizations		1	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	147 -		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		-
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	-	-
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction)	ns).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instruction	The same of the same of	T
2	Activities Test. Answer (a) and (b) below.		Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	-	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			-
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did to the state of the second to the second to the state of the officers directors or		1	
0.85	trustees of each of the supported organizations? Provide details in Part VI.	3a		
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.	3b		

Schedule A (Form 990 or 990-EZ) 2018 FINANCIAL ANALYSIS INC.

Pa	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			Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		100000000000000000000000000000000000000
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
V41829	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrate	ed Type III supporting org	ganization (see
	instructions)			

Schedule A (Form 990 or 990-EZ) 2018

	INDITIOIS FOR ENERGY ECONOMICS AND	
Sch	edule A (Form 990 or 990-EZ) 2018 FINANCIAL ANALYSIS INC.	45-4244605 Page 7
	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (contin	ued)
Sec	tion D - Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions Add lines 1 through 6	

Distributions to attentive supported organizations to which the organization is responsive

(provide details in Part VI). See instructions.

Distributable amount for 2018 from Section C, line 6

Line 8 amount divided by line 9 amount

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018 From 2013			
	From 2014			
-	From 2014 From 2015			
_	From 2016			
	From 2017			
	Total of lines 3a through e			
- 546	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
<u>i</u>				
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
1000	line 7: \$			1811
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

INSTITUTE FOR ENERGY ECONOMICS AND

Schedule A (Form 990 or 990 EZ) 2018 FINANCIAL ANALYSIS INC.	45-4244605 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition	17b; Part III, line 12; and 2; Part IV, Section C, Section B, line 1e; Part V,
(See instructions.)	
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:	
MISCELLANEOUS INCOME	
2014 AMOUNT: \$ 50.	
,	

45-4244605 Page 8

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

2018

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

Open to Public Inspection

OMB No. 1545-0047

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

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

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

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

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

	Section 50	1(c)(4), (5), or (6) organi	zations: Complete Part III.			The state of the s
_	ne of organ	ization INSTIT	UTE FOR ENERGY EC	CONOMICS AND) Empl	oyer identification number
		TT313310	TAT ANTATOTO TATO			45-4244605
Pa	art I-A	Complete if the o	rganization is exempt und	der section 501(c) or is a section 527 o	rganization.
2	Political c	ampaign activity expen	nization's direct and indirect polition ditures paign activities		> \$	
Pa	art I-B	Complete if the o	rganization is exempt und	der section 501(c)(3).	
	Enter the	amount of any excise to	ax incurred by the organization un	der section 4955	▶ \$	
2	Enter the	amount of any excise to	ax incurred by organization manag	ers under section 495	> \$	
			tion 4955 tax, did it file Form 4720			
						The second secon
t	of "Yes," c	lescribe in Part IV.				-1(0)
			rganization is exempt und			
			ded by the filing organization for se			
2			anization's funds contributed to o			
_	exempt fu	inction activities		and an Farm 1100 DO		
3	Total exer	npt function expenditu	res. Add lines 1 and 2. Enter here	and on Form 1120-PO	L, > \$	0
•	line 17b	ing organization file For	m 1120-POL for this year?			Yes No
5	Enter the made pay contributi	names, addresses and ments. For each organ ons received that were	employer identification number (E ization listed, enter the amount pa promptly and directly delivered to If additional space is needed, pro	(IN) of all section 527 p aid from the filing organ a separate political or	political organizations to which nization's funds. Also enter the ganization, such as a separa	th the filing organization ne amount of political
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

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	dule C (Form 990 or 990-EZ) 2018 FINT II-A Complete if the organization	IANCIAL A zation is exe	ANALYSIS INC mpt under section	on 501(c)(3) and file	45-4 d Form 5768 (el	244605 lection ur	rage 2
	section 501(h)).						
A C	neck 🕨 🔲 if the filing organization t			n Part IV each affiliated of	group member's nam	e, address,	EIN,
	expenses, and share of						
B C	neck 🕨 🔛 if the filing organization of	checked box A a	and "limited control" pr	ovisions apply.	7500	T	A Light Survey open (S. All)
	Limits on (The term "expenditure	Lobbying Expensions amo		.)	(a) Filing organization's totals	(b) Affiliate	
1a	Total lobbying expenditures to influence	e public opinion	(grass roots lobbying)		0.		
	Total lobbying expenditures to influence				0.		The same
	Total lobbying expenditures (add lines				0.		
	Other exempt purpose expenditures				0.		
	Total exempt purpose expenditures (ad				0.		
	Lobbying nontaxable amount. Enter the			3.13 GRANT N. 1. 10 N. M.	0.		
	If the amount on line 1e, column (a) or (b)		obying nontaxable an				
	Not over \$500.000		f the amount on line 1e				
	Over \$500,000 but not over \$1,000,000	\$100,0	00 plus 15% of the ex-	cess over \$500,000.			
	Over \$1,000,000 but not over \$1,500,0		00 plus 10% of the ex-	cess over \$1,000,000.			
	Over \$1,500,000 but not over \$17,000,	Contract of the contract of the	00 plus 5% of the exce				
	Over \$17,000,000	\$1,000	- carried				
		efe W. V					572-573
a	Grassroots nontaxable amount (enter 2	5% of line 1f)			0.		
-	Subtract line 1g from line 1a. If zero or I						
	Subtract line 1f from line 1c. If zero or le						
	If there is an amount other than zero or						
	reporting section 4911 tax for this year'					Yes	No
	(Some organizations that n	ade a section	veraging Period Under 501(h) election do not rate instructions for li	have to complete all o	f the five columns b	elow.	
		Lobbying Expe	enditures During 4-Ye	ar Averaging Period			
-	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) T	otal
				272 227	0	0.70	227

	Lobbying Exper	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount			272,227.	0.	272,227.
b Lobbying ceiling amount (150% of line 2a, column(e))					408,341.
c Total lobbying expenditures			19,923.	0.	19,923.
d Grassroots nontaxable amount			68,057.	0.	68,057.
e Grassroots ceiling amount (150% of line 2d, column (e))					102,086.
f Grassroots lobbying expenditures			0.	0.	

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 FINANCIAL ANALYSIS INC. 45-424460

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

or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
f the lobbying activity.	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?			-	
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				200
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or se	ction	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		. 1		
Tivere substantially all (00% of more) accorded for the forest and				
		2		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? n 501(c)(5	3 5), or se	ction III-A, lin	ne 3, i
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section	e prior year? n 501(c)(5 "No," OR	3 5), or se (b) Part	ction : III-A, lin	ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the carry lile. Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	e prior year? n 501(c)(5 "No," OR	3 5), or se (b) Part	ction : III-A, lin	ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	e prior year? n 501(c)(5 "No," OR	3 5), or se (b) Part	ction : III-A, lin	ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5 "No," OR	3 5), or se (b) Part	ction : III-A, lin	ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? n 501(c)(5 "No," OR	3 5), or se (b) Part	ction : III-A, lin	ne 3,
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SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

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.

2018
Open to Public Inspection

Name of the organization

INSTITUTE FOR ENERGY ECONOMICS AND FINANCIAL ANALYSIS INC.

Employer identification number 45-4244605

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds Total number at end of year 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year. a Total number of conservation easements Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2018

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

Par	t III Organizations Maintaining C							
3	Using the organization's acquisition, accession	on, and other record	ls, check any of the	e following that are a	significant	use of its	collection it	ems
	(check all that apply):		20					
а	Public exhibition	d	Loan or ex	change programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explai	n how they further	the organization's ex	empt purp	ose in Par	XIII.	
5	During the year, did the organization solicit or	receive donations	of art, historical tre	asures, or other simi	lar assets			
	to be sold to raise funds rather than to be ma	intained as part of t	he organization's o	collection?			Yes	No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the organizati	on answered "Yes" o	on Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Par	t X, line 21.						
1a	Is the organization an agent, trustee, custodia	an or other intermed	liary for contribution	ns or other assets n	ot included			
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing table:					
							Amount	
C	Beginning balance		*******************	***************************************	1c			
d	Additions during the year		********************		1d			
е	Distributions during the year	***********	***************************************		1e			
f	Ending balance	********************	**********************	*******************************	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for escrow or o	custodial account lia	bility?		Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has bee	n provided on Part X	III		**********	
Par	t V Endowment Funds. Complete if	the organization an	swered "Yes" on F	orm 990, Part IV, line	e 10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Four ye	ars back
1a	Beginning of year balance				1/2000			
b	Contributions							
C	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
0.50	and programs							
f	Administrative expenses					C-0612		
a	End of year balance							
2	Provide the estimated percentage of the curr	ent vear end balanc	e (line 1g, column	(a)) held as:	Witc. 55 132			
a	Board designated or quasi-endowment		%	10.55				
h	Permanent endowment	%						
c	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.						
32	Are there endowment funds not in the posses		ation that are held	and administered fo	r the organ	ization		N5001167-57
ou	by:				8		Y	es No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations							
h	If "Yes" on line 3a(ii), are the related organization							
4	Describe in Part XIII the intended uses of the							
Pai	t VI Land, Buildings, and Equipm							
	Complete if the organization answered		0, Part IV, line 11a.	See Form 990, Part	X, line 10.			
-	Description of property	(a) Cost or o			Accumulat	ted	(d) Book v	alue
		basis (investr		s (other)	lepreciation	n	13.1	
19	Land							
	Buildings	255						
	Leasehold improvements				111 - 222			
	Equipment			£. H.				
	Other							
	I. Add lines 1a through 1e. (Column (d) must e		X, column (B), line	10c.)		. >		0.

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	on Form 990, Part IV, line	(-) Mathad of cal	art A, IIIIe 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value	uation: Cost or end-of-year market value
) Financial derivatives			
2) Closely-held equity interests			
) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F) (G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11c. See Form 990, Pa	art X, line 13.
(a) Description of investment	(b) Book value	(c) Method of value	uation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
Part IX Other Assets.			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes"	on Form 990, Part IV, line Description	11d. See Form 990, Pr	art X, line 15. (b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes"		11d. See Form 990, Pa	
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Schedule D (Form 990) 2018

FINANCIAL.	ANALYSTS	TNC

Pa	rt XI Reconciliation of Revenue per Audited Financial St	atements With Rever	nue per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	3,764,678.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		3003-0307-03000	
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		CONTRACTOR OF THE PARTY OF	3,764,678.
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		
C	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	3,764,678.
Pa	rt XII Reconciliation of Expenses per Audited Financial S	tatements With Expe	nses per Retui	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1	Total expenses and losses per audited financial statements		1	3,081,336.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	Tr. Tr		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		100
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	3,081,336.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	T T		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b			0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line of XIII Supplemental Information.	18.)	5	3,081,336.
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a		Part V, line 4; Part	X, line 2; Part XI,
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SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Name of the organization

Inspection

Employer identification number

		NERGY EC		AND		4E 40446	0.5
FINANCIA	L ANALY	SIS INC.	ctivities Ou	tside the United States. Complete		45-42446	
	rm 990, Part IV		ctivities Ou	talue the Officed States. Complete	en the organiz	auon answered	100 011
			maintain recor	ds to substantiate the amount of its gran	nts and other a	ssistance,	V
				the selection criteria used to award the o			Yes No
United Sta	ates.		12.5%	procedures for monitoring the use of its an be duplicated if additional space is ne		er assistance ou	tside the
3 Activities (a) Re		(b) Number of offices in the region			(e) If activit is a progr describe s	ty listed in (d) am service, specific type) in the region	(f) Total expenditures for and investments in the region
EUROPE				FUNDRAISING			0.
EUROPE				CONDRAISING			,
			E.				
3 a Subtotal b Total from	n continuation	0	0				0.
	Part I	0	0_				0.
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Schedule F (Form 990) 2018

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total number of	f recipient organization	is listed above that are i	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	e foreign country	, recognized as tax-e	xempt		
3 Enter total number of other organizations or entities	f other organizations o	rentities	- (-)(-)(-)			V		

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Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018 FINANCIAL ANALYSIS INC.

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

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

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

INSTITUTE FOR ENERGY ECONOMICS AND

Schedule F	(Form 990) 2018 FINANCIAL ANALYSIS INC.	45-4244605	Page 5
Part V	Supplemental Information		
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (ac	counting method; amounts of	
	investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting		
	(estimated number of recipients), as applicable. Also complete this part to provide any additional		
	resultrated flumber of recipients), as applicable. Also complete this part to provide any additional	illiornation. See instructions.	
	<u> </u>		
215			
		3. \$	
7.			

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

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

Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

▶ Go to www.irs.gov/Form990 for instructions and the latest information. INSTITUTE FOR ENERGY ECONOMICS AND FINANCIAL ANALYSIS INC.

Employer identification number

45-4244605

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)	1		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
1000	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
0.000	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
	additional and officeror, more during the object of the ob			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
•	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	Approval by the board of compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling			
4	organization or a related organization:			
		40		Х
a	Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan?			X
D	Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement?			X
C		4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		X
~	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
•	contingent on the net earnings of:			
2	The organization?	6a		х
	Any related organization?	CITATI I		X
U	If "Yes" on line 6a or 6b, describe in Part III.	OD		- 21
7				
,		7		v
0	not described on lines 5 and 6? If "Yes," describe in Part III Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	7		X
8				v
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	_	X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2018

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

Schedule J (Form 990) 2018

Do not list any individuals that aren't listed on Form 990, Part VII. 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).

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

		B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	_	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) ALEXANDRA BUCHANAN (i)	=	176,070.	0.	0.	7,651.	4,523.	188,244.	0.
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orm 990) 2018	Schedule J (Form 990) 2018	
V.		
		A.
lion.	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.	Provide the information, ex
Page 3	18 FINANCIAL ANALYSIS INC. 45-4244605	Schedule J (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

Department of the Treasury Internal Revenue Service Name of the organization

INSTITUTE FOR ENERGY ECONOMICS AND FINANCIAL ANALYSIS INC.

Employer identification number 45-4244605

FORM 990, PART VI, SECTION B, LINE 11B:	
THE 990 IS REVIEWED BY ALL MEMBERS OF THE GOVERNING BOARD BE	FORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C:	
ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES FILL OUT THE ANNUA	L CONFLICT OF
INTEREST DISCLOSURE FORM AND ARE REQUIRED TO DISCLOSE CONFLI	CTS AS THEY
WOULD ARISE.	<u> </u>
FORM 990, PART VI, SECTION B, LINE 15:	
MEMBERS OF THE GOVERNING BOARD CONDUCT REVIEWS OF COMPENSATI	ON FOR
COMPARABLE POSITIONS AND MAKE INDEPENDENT DECISIONS ON COMPE	NSATION LEVELS.
FORM 990, PART VI, SECTION C, LINE 19:	
THE DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING:	
PROGRAM SERVICE EXPENSES	2,144,209.
MANAGEMENT AND GENERAL EXPENSES	63,046.
FUNDRAISING EXPENSES	68,659.
TOTAL EXPENSES	2,275,914.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,275,914.

Form 8868

(Rev. January 2019)

Department of the Treasury

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

File a separate application for each return.

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

OMB No. 1545-1709

Internal Revenue Service Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Employer identification number (EIN) or Name of exempt organization or other filer, see instructions. Type or INSTITUTE FOR ENERGY ECONOMICS AND print 45-4244605 FINANCIAL ANALYSIS INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 3430 ROCKY RIVER DRIVE return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions CLEVELAND, OH 44111 0 1 Enter the Return Code for the return that this application is for (file a separate application for each return) Return Return Application Application Code Code Is For Is For 07 01 Form 990-T (corporation) Form 990 or Form 990-EZ Form 1041-A 08 02 Form 990-BL Form 4720 (other than individual) 09 03 Form 4720 (individual) 10 Form 5227 04 Form 990-PF 11 05 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 12 Form 990-T (trust other than above) 06 Form 8870 ALEXANDRA BUCHANAN The books are in the care of ➤ 3430 ROCKY RIVER DRIVE - CLEVELAND, OH 44111 Telephone No. ▶ 216-688-3433 Fax No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this NOVEMBER 15, 2019 , to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: ➤ X calendar year 2018 or , and ending ____ tax year beginning _ Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less

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

using EFTPS (Electronic Federal Tax Payment System). See instructions.

b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

any nonrefundable credits. See instructions.

Form 8868 (Rev. 1-2019)

instructions.

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