

Form 9	90
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Department of the Treasury

For the 0040 color deriver

Internal Revenue Service

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

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<u>A I</u>		and a	enaing		
B	Check if	C Name of organization		D Employer identific	ation number
a	applicabl				
	Addre	e PLUG IN AMERICA			
	Name chang	e Doing business as		26-1'	799615
	Initial		Room/suite	E Telephone number	
	Final return	6380 WILSHIRE BOULEVARD, NO. 1000		323-3	372-1236
	termir ated	· · · · · · · · · · · · · · · · · · ·		G Gross receipts \$	2,245,782.
	Amen	LOS ANGELLES, CA 90046		H(a) Is this a group re	
	Applic tion			for subordinates	? Yes X No
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
		empt status: 🗴 501(c)(3) 🗌 501(c) ()◀ (insert no.) 🗌 4947(a)(1) o	or 📃 527	lf "No," attach a	list. (see instructions)
		te: PLUGINAMERICA.ORG		H(c) Group exemption	
		organization: 🔀 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨	L Year of	of formation: 2008 N	I State of legal domicile: CA
Pa	art I	Summary			
•	1	Briefly describe the organization's mission or most significant activities:	SCHEDU	LE O	
č					
Activities & Governance	2	Check this box 🕨 🦳 if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	
ove	3	Number of voting members of the governing body (Part VI, line 1a)			13
Ō	4	Number of independent voting members of the governing body (Part VI, line 1b)			13
ŝ	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			17
viti	6	Total number of volunteers (estimate if necessary)		6	200
\cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 38	<u></u>	7b	8,465.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		1,300,890.	1,500,015.
Revenue	9	Program service revenue (Part VIII, line 2g)		346,076.	727,076.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,711.	1,031.
œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,354.	17,660.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		1,653,031.	2,245,782.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		670,571.	904,869.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
be	. b	Total fundraising expenses (Part IX, column (D), line 25)	91.		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		751,151.	1,089,106.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,421,722.	1,993,975.
	19	Revenue less expenses. Subtract line 18 from line 12		231,309.	251,807.
OL			Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		1,218,712.	1,504,656.
Net Assets or	21	Total liabilities (Part X, line 26)		421,234.	741,761.
		Net assets or fund balances. Subtract line 21 from line 20		797,478.	762,895.
Pa	art II	Signature Block			

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

Sign		Signature	of officer						Date			
Here		JOEL	LEVIN,	EXECUTIVE	DIRECTO	R						
		Type or p	rint name and ti	tle								
	Prin	t/Type prep	arer's name		Preparer's sig	nature)	Date		Check] PTIN	
Paid	LAI	UREN A	A. HAVE	RLOCK	LAUREN	Α.	HAVERLOCK	11/13	/19	ii self-employed	P0054	5829
Preparer				ADAMS LLP					Firm's	EIN 🕨	91-018	9318
Use Only	Firm	n's address	10960	WILSHIRE	BLVD SU	ITE	E 1100					
			LOS A	NGELES, CA	90024				Phone	e no.310	-477-0	450
May the I	RS di	scuss this	return with th	e preparer shown a	bove? (see instru	uctior	ıs)				X Yes	No
				Deduction Act No	tion one the on		le instructions				Farm	990 (0010)

832001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	1 990 (2018) PLUG IN AMERIC		26-179961	15	Page 2
Pa	rt III Statement of Program Service Accor	•			
	Check if Schedule O contains a response or not	to any line in this Part III		<u></u>	X
1	Briefly describe the organization's mission:				
	PLUG IN AMERICA IS A NON-PRO			WE	
	ARE THE VOICE OF PLUG-IN VE	HICLE DRIVERS A	CROSS THE COUNTRY. OUR		
	MISSION IS TO DRIVE CHANGE	TO ACCELERATE T	HE SHIFT TO PLUG-IN VEHI	ICLE	S
	POWERED BY CLEAN, AFFORDABL	E, DOMESTIC ELE	CTRICITY TO REDUCE OUR		
2	Did the organization undertake any significant program	services during the year whi	ch were not listed on the		
		,		Yes [XNo
	If "Yes," describe these new services on Schedule O.				
3	Did the organization cease conducting, or make signifi	cant changes in how it condu		Yes	XNO
0	If "Yes," describe these changes on Schedule O.	sant changes in now it condu]103 [100
4	Describe the organization's program service accomplis	bmonto for each of its three l	areast preserve continue of massived by super		
4	Section 501(c)(3) and 501(c)(4) organizations are required				J
		ed to report the amount of gr	and allocations to others, the total expens	es, and	1
4 -	revenue, if any, for each program service reported.		λ. (78,3	11
4a	(Code:) (Expenses \$ 645,041		, , ,	-	44.
	PLUGSTAR - PLUG IN AMERICA'				
	SUPPLEMENTS MODEL-SPECIFIC				
	TRAINING COVERING KEY TOPIC		· •		
	IT FURTHER EQUIPS SALES STAN				E
	RESOURCES AND EXPERT SUPPOR				
	<u>THAT SERVE THEM - NAVIGATE (</u>	1 14			
	PATCHWORK OF PUBLIC INCENTIV				
	SIMPLER. PLUGSTAR.COM, A "O	<u>1E STOP SHOP" F</u>	OR ALL THINGS EV, REACHE	<u>IS</u>	
	1,000 CONSUMERS ON AVERAGE	DAILY WHILE SER	VING AS A TRAINING AID 7	ГО	
	DEALERS AND CONVERTING ENGA	JED CONSUMERS,	THROUGH BOTH OFFLINE ANI	5	
	ONLINE RECRUITMENT CHANNELS	, TO REAL LEADS	FOR ACCREDITED DEALERS.		
4b	(Code:) (Expenses \$ 364,042	including grants of \$) (Revenue \$]	12,7	32.
	NATIONAL DRIVE ELECTRIC WEE		ANNUAL, NATIONWIDE		
	CELEBRATION TO HEIGHTEN AWA		-	гтү	0F
	PLUG-IN VEHICLES AND HIGHLIG				
	HYBRID-ELECTRIC CARS, TRUCK			001	<u> </u>
	ORGANIZED BY VOLUNTEERS AND	· · · · · ·			
	VARIETY OF EVS AND EDUCATE				017
			<u> </u>		.o.c.
	AND CHARGING INCENTIVES. PLI		•	10	
	AUTO ASSOCIATION ARE THE NAT				
	SUPPORT TO ALL VOLUNTEERS V		-		
	MATERIALS, PRESS CONTACTS, 1		-		
	RESOURCES. VARIOUS ORGANIZA	<u>LIONS SPONSOR N</u>	DEW NATIONALLY, REGIONAL	<u>ЪLY,</u>	
	AND LOCALLY EVERY YEAR.				
4c	(Code:) (Expenses \$ 356, 396	including grants of \$		58,0	00.
	AS FAST AS EV ADOPTION GREW	IN 2018, EV PO	LICY TOOK OFF JUST AS		
	QUICKLY. POSITIVE DEVELOPMEN	TS INCLUDED MO	RE UTILITIES PROPOSING		
	TRANSPORTATION ELECTRIFICAT	ION PROGRAMS, W	HICH INCLUDES THE DEPLOY	YMEN	T
	OF EV INFRASTRUCTURE, EV CH				
	-		ONS OPENING STAKEHOLDER		
	PROCESSES TO EXPLORE THE UT			LOB	
	GROWS. BUT WITH THE POSITIVE				
	· · · · · · · · · · · · · · · · · · ·		THE SINGLE BIGGEST POLIC		
	DRIVER FOR EVS - THROUGH TH	-			
				DTT	T a
	STANDARDS AT THE FEDERAL LEY		•		
	ACROSS STATE HOUSES THAT WO	JLD IMPOSE PUNI	TIVE REGISTRATION FEES (<u> JN E</u>	V
	DRIVERS.				
4d	Other program services (Describe in Schedule O.)				
	(Expenses \$ 348,908. including grants of	.f \$) (Revenue \$ 78,000.)		
<u>4e</u>	Total program service expenses ► 1,7	14,387.			
			Fc	orm 99	0 (2018
3200	2 12-31-18 SEE	SCHEDULE O FOR	CONTINUATION(S)		
		4			
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 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	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
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	_		77
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	~		х
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
0	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	7		
8		8		x
٥	Schedule D, Part III	0		
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?			
		9		х
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		- 43
10	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, VII, VII, VII, VII, VII, VII,	10		
••	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	х	
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		х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
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			v
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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			v
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	46		х
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	1	- 23
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		х
18	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		- 23
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	.0		
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<u> </u>
	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		х
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1 0	Continued)		Vee	Na
22	Did the examination report more than \$5,000 of grants or other expiritence to ar for demostic individuals on		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		х
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			- 23
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
		23		х
24 2	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	25		
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 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,"			
	complete Schedule L, Part II	26		Х
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			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
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			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	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			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
~ ~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			х
05-	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		<u> </u>
b		35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	350		
30		36		х
37	<i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i> Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		- 21
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	- 57		
00	Note. All Form 990 filers are required to complete Schedule O	38	х	
Par				
	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 20			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
_	(gambling) winnings to prize winners?	1c	Х	
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Par	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	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	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			77
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand			v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u>X</u>
	If "Yes," complete Form 4720, Schedule O.			

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	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 1a 13			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
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		Х
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		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6		х
- 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u> </u>		
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	10		
a	The governing body?	8a	х	
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			
3	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.)	5		
	This Section B requests mormation about policies not required by the internal Revenue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
D D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	110		
		12a	x	
		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120		
С		12c	x	
10	in Schedule O how this was done	13		Х
13 14	Did the organization have a written whistleblower policy?	14	х	- 23
	Did the organization have a written document retendon and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
		15a		Х
D D	Other officers or key employees of the organization	150		- 23
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
104		16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
		16b		
Sec	exempt status with respect to such arrangements?	001		
	List the states with which a copy of this Form 990 is required to be filed CA			
17 10	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	o nhuì	ovoilek	
18		orny)	avallar	ле
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website Another's website X Upon request Other (<i>explain in Schedule O</i>)	e		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	inanc	idi	
00	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 AHMED ABOU-ISMAIL - 323-372-1236			
		Гот	1 990	(0040
832006	12-31-18 8	Forn	1990	(2018)
211	° 13 146892 659907 2018.05000 PLUG IN AMERICA		65	990
	IS 140092 039907 Z010.03000 PLOG IN AMERICA		03	טעע

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

PLUG IN AMERICA

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Form 990 (2		IN AMERICA		Page 7					
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated									
	Employees, and Indepe	endent Contractors							
	Check if Schedule O contains	a response or note to any line	in this Part VII						
Section A.	Officers, Directors, Trustee	s, Key Employees, and High	est 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.

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

(A) Name and Title	(B) Average hours per	(do not check more than one					n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer D		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) TONIA BUELL	2.00								_	-
SECRETARY		Х		X				0.	0.	0.
(2) JEFF FINN	2.00									-
DIRECTOR		Х						0.	0.	0.
(3) RON FREUND DIRECTOR	2.00	x						0.	0.	0.
(4) JAY FRIEDLAND	2.00									
DIRECTOR		х						0.	0.	0.
(5) MARC GELLER	2.00									
VICE PRESIDENT		Х		Х				3,000.	0.	0.
(6) RICHARD KELLY	2.00									
DIRECTOR		Х						0.	0.	0.
(7) JENNIFER KRILL	2.00									
PRESIDENT		Х		Х				0.	0.	0.
(8) TOM SAXTON	2.00									
DIRECTOR		Х						0.	0.	0.
(9) MICHAEL THWAITE	2.00									
DIRECTOR		Х						0.	0.	0.
(10) COLBY TRUDEAU	2.00									
IT DIRECTOR		Х						0.	0.	0.
(11) BARRY WOODS	2.00									_
DIRECTOR		Х						0.	0.	0.
(12) RANDY JOHNSON	2.00									
TREASURER		Х		X				0.	0.	0.
(13) NICKY DAVIES	2.00									_
DIRECTOR	45.00	Х						0.	0.	0.
(14) JOEL LEVIN	45.00							100 400	^	10 210
EXECUTIVE DIRECTOR		-		X				123,496.	0.	19,316.
		-								
000007 10 01 10	I	I					l			Form 990 (2018)

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	990 (2018) PLUG IN A									26-1	799	615	Pa	age 8
Par	t VII Section A. Officers, Directors, Trust		oloy	ees,			ghes	t C		· /	r			
	(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 o s both	n an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other			
							the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	I	fr org and	pensa om the anizat d relate anizatio	e ion ed		
	Sub-total								126,496.		0.	1	9,3	16.
с	Total from continuation sheets to Part VI	, Section A							0.		0.			0.
d 2	Total (add lines 1b and 1c)							► o re	126,496. eceived more than \$100,	000 of reportable	0. e	L :	9,3:	16.
	compensation from the organization						-						Yes	1 No
3	Did the organization list any former officer,	director, or tru	istee	e, ke	y en	nplo	yee,	or l	highest compensated er	nployee on	[165	NO
4	line 1a? If "Yes," complete Schedule J for su For any individual listed on line 1a, is the su											3		X
•	and related organizations greater than \$150	,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual			4		Х
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." <i>com</i>	-				-			-			5		х
	tion B. Independent Contractors													
1	Complete this table for your five highest con the organization. Report compensation for t	-									bensat	tion fro	om	
	(A) Name and business	address							(B) Description of s	ervices	С	(C ompei		า
	ACH STRATEGIES, 100 SHO			-	S	UI	ΤE					4.5		
) BLDG. B, MILL VALLEY, PERT MEETINGS PLUS	CA 949	41					-	EVENT ORGANI	ZERS		17	0,14	<u>47.</u>
214	WEST PINE AVE, EL SEG	UNDO, C	A	90	24	5		_	EVENT ORGANI	ZERS		10	6,5	00.
								_						
2	Total number of independent contractors (ir \$100,000 of compensation from the organiz	•	ot lin	nited	d to f		se lis 2	ted	above) who received mo	ore than				
	wroo,ood or compensation from the organiz					2	-					Form	990 (2	2018)

_			Check if Schedule O conta	ains a resp	onse	or note to any lin				
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ţs	1 a	a	Federated campaigns		a					
n	k	c	Membership dues		b					
Ĕ	c	5	Fundraising events		c					
ar /	c		Related organizations		d					
mil	e	Э	Government grants (contributi	ons) 1	e	155,020.				
ŝ	f	ł	All other contributions, gifts, grant							
the			similar amounts not included abov	/e 1	f 1,	344,995.				
and Other Similar Amounts	ç	9	Noncash contributions included in lines	1a-1f: \$						
an	ł	۱	Total. Add lines 1a-1f			>	1,500,015.			
						Business Code				
	2 a	a	PROGRAM FEES			900099	727,076.	727,076.		
θ	k	C								
nuə	c	2								
Sev.	c	b								
Revenue	e									
			All other program service reve							
			Total. Add lines 2a-2f				727,076.			
	3		Investment income (including	-			1 0 2 1			1 021
			other similar amounts)				1,031.			1,031.
	4		Income from investment of tax	•						
	5		Royalties							
	•		0	(i) Rea	1	(ii) Personal				
	-		Gross rents							
			Less: rental expenses							
	c		Rental income or (loss)							
			Net rental income or (loss)							
	1 2		Gross amount from sales of	(i) Securi	ties	(ii) Other				
	Ŀ		assets other than inventory Less: cost or other basis							
	L		and sales expenses							
			Gain or (loss)							
			Net gain or (loss)							
			Gross income from fundraising							
an	0 6		including \$		51					
Ver			contributions reported on line							
чe			Part IV, line 18	,	а					
Uther Kevenue	r		Less: direct expenses							
5			Net income or (loss) from fund							
			Gross income from gaming ac	0						
			Part IV, line 19							
	k		Less: direct expenses							
			Net income or (loss) from gam							
			Gross sales of inventory, less	•						
			and allowances		a					
	k		Less: cost of goods sold							
			Net income or (loss) from sales			>				
			Miscellaneous Revenue			Business Code				
Γ	11 a	3	MISCELLANEOUS			900099	17,660.			17,660.
	b	c								
	c	5								
	c	b	All other revenue							
	e		Total. Add lines 11a-11d			•	17,660.			
							2,245,782.	727,076.		18,691.

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	Check if Schedule O contains a respons			(0)	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
~	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
5		142,813.	117,901.	12,456.	12,456
6	trustees, and key employees Compensation not included above, to disqualified	142,013.	117,501•	12,450.	12,490
0	persons (as defined under section 4958(f)(1)) and				
	(0,0)				
7	Other salaries and wages	663,779.	538,427.	56,623.	68,729
' 8	Pension plan accruals and contributions (include				
5	section 401(k) and 403(b) employer contributions)	14,846.	10,769.	2,236.	1.841
9	Other employee benefits	23,851.	17,054.	1,305.	5.492
0	Payroll taxes	59,580.	48,516.	5,363.	1,841 5,492 5,701
1	Fees for services (non-employees):	5575001	10,5100		57701
	Management				
b	Legal	7,214.	7,214.		
	Accounting	30,723.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	30,723.	
	Lobbying	7,200.	7,200.		
	Professional fundraising services. See Part IV, line 17	, , 2000	.,		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)	567,454.	567,454.		
2	Advertising and promotion	8,712.	8,712.		
3	Office expenses	45,736.	30,178.	10,529.	5,029
4	Information technology	102,475.	78,318.	9,884.	14,273
5	Royalties		,		/
6	Occupancy	92,490.	81,626.	9,124.	1,740
7	Travel	70,232.	70,232.		•
8	Payments of travel or entertainment expenses				
-	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	9,918.	9,918.		
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	1,340.		1,340.	
3	Insurance	11,666.	9,916.	1,049.	701
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	MISCELLANEOUS	76,575.	76,575.		
b	PRINTING	26,688.	20,817.	2,402.	3,469
c	RECRUITMENT	17,385.	13,560.	1,565.	2,260
d	DUES AND SUBSCRIPTIONS	13,298.	.,	13,298.	, = , ,
	All other expenses	,,		, ,	
5	Total functional expenses. Add lines 1 through 24e	1,993,975.	1,714,387.	157,897.	121,691
6	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				

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Form 990 (2018)

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

		Check if Schedule O contains a response or no	te to an				
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			383,249.	1	759,393.
	2	Savings and temporary cash investments			430,029.	2	431,060.
	3	Pledges and grants receivable, net			100,000.	3	100,000.
	4	Accounts receivable, net			296,413.	4	195,782.
	5	Loans and other receivables from current and f					
		trustees, key employees, and highest compens					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disgual			-		
		section 4958(f)(1)), persons described in section	,				
		employers and sponsoring organizations of sec					
		employees' beneficiary organizations (see instr)				6	
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use			961.	8	0.
	9	Prepaid expenses and deferred charges				9	
		Land, buildings, and equipment: cost or other	I			-	
	100	basis. Complete Part VI of Schedule D	10a	11.133.			
	b		10b	<u>11,133.</u> 2,102.	3,048.	10c	9,031.
	11	Investments - publicly traded securities			•,•=••	11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		5,012.	15	9,390.	
	16	Total assets. Add lines 1 through 15 (must equ			1,218,712.	16	1,504,656.
	17	Accounts payable and accrued expenses		73,471.	17	151,861.	
	18	Grants payable		- /	18	, , , , , , , , , , , , , , , , ,	
	19	Deferred revenue		332,028.	19	0.	
	20	Tax-exempt bond liabilities			•	20	
	21	Escrow or custodial account liability. Complete				21	
6	22	Loans and other payables to current and forme					
Liabilities		key employees, highest compensated employe					
ilidi						22	
Lia	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on line					
		Schedule D	-		15,735.	25	589,900.
	26	Total liabilities. Add lines 17 through 25			421,234.	26	741,761.
		Organizations that follow SFAS 117 (ASC 95	3), chec	k here 🕨 🗴 and			
Ś		complete lines 27 through 29, and lines 33 a					
JCe	27	Unrestricted net assets			492,687.	27	621,297.
alaı	28				304,791.	28	141,598.
ар	29	Permanently restricted net assets				29	
ñ		Organizations that do not follow SFAS 117 (A					
Net Assets or Fund Balances		and complete lines 30 through 34.					
șts.	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or e	quipme	nt fund		31	
et A	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			797,478.	33	762,895.
	34	Total liabilities and net assets/fund balances			1,218,712.	34	1,504,656.
							Form 990 (2018)

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Form 990 (2018) Part X Balance Sheet

Form	990 (2018) PLUG IN AMERICA	26-17	99615	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,245	,78	82.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,993	, 9'	75.
3	Revenue less expenses. Subtract line 2 from line 1	3	251	, 80	07.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	797	,4	78.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-286	, 39	90.
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,				
	column (B))	10	762	, 89	95.
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				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2018)

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Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2018
Open to Public Inspection

Name of the organization Empl								Employer	identification number
			IN AMERIC						6-1799615
Pa	rt I	Reason for Public C	Charity Status (All organizations must co	omplete th	is part.) Se	e instructions	3.	
The	organ	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1	Ď	A church, convention of chu					I)(A)(i).		
2	\square	A school described in secti							
3	\square	A hospital or a cooperative					i).		
4	\square	A medical research organiza)(iii). Enter	the hospital's name.
		city, and state:	I I	, , ,				/···/-	Į ,
5		An organization operated for	or the benefit of a co	llege or university owned	l or operat	ed by a do	vernmental u	nit describe	ed in
•		section 170(b)(1)(A)(iv). (C		5		, ,			
6		A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v)		
	X	An organization that normal	-					ne deneral r	ublic described in
•		section 170(b)(1)(A)(vi). (Co	-		on a gove			ie general j	
8		A community trust describe		(1)(A)(vi) (Complete Par	+ 11 \				
9	H	-				ad in aanii	notion with a	land grant	
9		An agricultural research org				-		-	-
		or university or a non-land-g	grant college of agric	ulture (see instructions).		name, city	, and state of	the college	
40		university:	Illy reacinger (1) more	than 22 1/20/ of its sur	o out from a	ontributio	na mambaral	in face on	d areas ressints from
10		An organization that normal							
		activities related to its exem							-
		income and unrelated busin		(less section 511 tax) fro	om busines	sses acqui	rea by the org	janization a	πer June 30, 1975.
		See section 509(a)(2). (Cor	-	the stand of the s	(04-14		
11	\square	An organization organized a	-		•				
12		An organization organized a	-	-	-			•	
		more publicly supported org	-						Check the box in
	_	lines 12a through 12d that o	• •			-		-	
а		Type I. A supporting orga	-	-	• • • •	-			
		the supported organization			majority c	of the direc	tors or truste	es of the su	ipporting
		organization. You must c	-						
b		Type II. A supporting orga	anization supervised	l or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hav	ring
		control or management of	f the supporting orga	anization vested in the s	ame perso	ns that co	ntrol or mana	ge the supp	ported
		_ organization(s). You mus	t complete Part IV,	Sections A and C.					
С		Type III functionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functional	ly integrate	d with,
		its supported organization	n(s) (see instructions). You must complete l	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	integrated. A supp	porting organization oper	ated in co	nnection w	ith its suppor	ted organiz	zation(s)
		that is not functionally inte	egrated. The organiz	zation generally must sat	isfy a distr	ibution rec	quirement and	l an attentiv	veness
		requirement (see instructi	ions). You must cor	mplete Part IV, Sections	A and D,	and Part	v .		
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.			
f	Ente	er the number of supported o	organizations						
g		vide the following information							
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) IS the orga in your governi	anization listed ing document?	(v) Amount of	,	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
Tota	al								
LHA	For F	Paperwork Reduction Act N	lotice, see the Instr	uctions for Form 990 o	r 990-EZ.	832021 10-	11-18 Sche	dule A (For	m 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018 PLUG IN AMERICA

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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.)

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
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	642,195.	799,222.	614,839.	1300890.	1500015.	4857161.
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 \dots						
4	Total. Add lines 1 through 3	642,195.	799,222.	614,839.	1300890.	1500015.	4857161.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1297610.
	Public support. Subtract line 5 from line 4.						3559551.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	642,195.	799,222.	614,839.	1300890.	1500015.	4857161.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	609.	1,368.	3,274.	3,059.	1,031.	9,341.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	990.	112.	1,047.	2,354.	17,660.	22,163.
11	Total support. Add lines 7 through 10						4888665.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12 1	<u>,387,559.</u>
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectior	n 501(c)(3)	
<u>.</u>	organization, check this box and stop	bere					
	ction C. Computation of Publi					I I	
	Public support percentage for 2018 (I	,	•			14	72.81 %
	Public support percentage from 2017					15	59.78 %
1 6a	33 1/3% support test - 2018. If the o				14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2017. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac			-		-	
	meets the "facts-and-circumstances"	•	•	,	•		
b	10% -facts-and-circumstances test	-					
	more, and if the organization meets th						•
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 1/a, or 17b			
					Sche	edule A (Form 990	or 990-EZ) 2018

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Schedule A (Form 990 or 990-EZ) 2018 PLUG IN AMERICA Part III Support Schedule for Organizations Described in Section 509(a)(2)

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(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.)

Section A. Public Support	-	-				
Calendar 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.")						
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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disgualified persons 						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included 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.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) orgar	nization,
check this box and stop here						
Section C. Computation of Publi	<u>c Support Per</u>	centage				
15 Public support percentage for 2018 (ine 8, column (f), d	ivided by line 13,	column (f))		15	%
16 Public support percentage from 2017					16	%
Section D. Computation of Inves					1 1	
17 Investment income percentage for 20		'			17	%
18 Investment income percentage from						%
19a 33 1/3% support tests - 2018. If the						e 17 is not
more than 33 1/3%, check this box at						►
b 33 1/3% support tests - 2017. If the						
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organizatio	п ана пот спеск а	box on line 14, 19	a, or 190, check t			
832023 10-11-18		17	,	Sch	ieuule A (Form s	2018 (1 200-EZ) 2018

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3a

Yes No

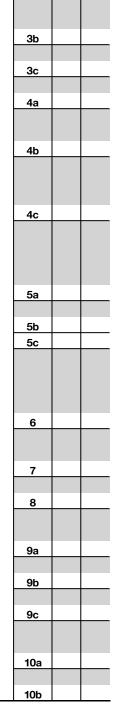
Part IV Supporting Organizations

(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.)

Section A. All Supporting Organizations

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

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Schedule A (Form 990 or 990-EZ) 2018

			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		
h	A family member of a person described in (a) above?	11b		
		11c		
	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. tion B. Type I Supporting Organizations	TIC		
000				
			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		
Sec	tion C. Type II Supporting Organizations	-		
000			Vee	
			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		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
-				
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
•	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 year (see instructions).			
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 insti	uctions)		
2	Activities Test. Answer (a) and (b) below.	,	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		-	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	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 the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	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		
832025	5 10-11-18 Schedule A (Form 9		0-EZ)	2018

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Schedule A (Form 990 or 990-EZ) 2018 PLUG IN AMERICA Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 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		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional			nization (see

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

Schedule A (Form 990 or 990-EZ) 2018

Par	t V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continued)				
Secti	on D - Distributions	Current Year					
1	1 Amounts paid to supported organizations to accomplish exempt purposes						
2	Amounts paid to perform activity that directly furthers exemp						
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3				
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.						
8	Distributions to attentive supported organizations to which the	ne organization is responsive					
	(provide details in Part VI). See instructions.	-					
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
Secti	on 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						
a	From 2013						
b	From 2014						
с	From 2015						
d	From 2016						
е	From 2017						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2018 distributable amount						
i	Carryover from 2013 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from Section D,						
	line 7: \$						
а	Applied to underdistributions of prior years						
b	Applied to 2018 distributable amount						
с	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						
	Excess from 2015						
	Excess from 2016						
	Excess from 2017						
	Excess from 2018						

Schedule A (Form 990 or 990-EZ) 2018

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Schedule A (Form 990 or 990 EZ) 2018 PLUG IN AMERICA

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; 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 and 2; Part IV, Section C, 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 B, line 1e; 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 additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

 Sakadula A (Farma 000 ar 000 F	7) 00-1
	Schedule A (Form 990 or 990-F

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

F

** PUBLIC DISCLOSURE COPY *

Schedule of Contributors

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

OMB No. 1545-0047

2018

Employer identification number

26-1799615

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

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

General Rule

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

Special Rules

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

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

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

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

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B	(Form	990,	990-EZ,	or 990-PF)	(2018)
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Name of organization

Employer identification number

PLUG IN AMERICA

26-1799615

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution		
1		- \$\$210,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution		
2		- \$ <u>165,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution		
3		- \$ <u>150,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		- \$\$90,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6_		- \$\$55,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
823452 11-08	- 10	Scheaule B (Form	990, 990-EZ, or 990-PF) (2018)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

PLUG IN AMERICA

26-1799615

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
7		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash Contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
823452 11-08		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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Name of organization

Employer identification number

26-1799615

PLUG IN AMERICA

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

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Page 4

ame of org	ganization		Employer identification numb		
ына т	N AMERICA		26-1799615		
Part III	Exclusively religious, charitable, etc., contribut	ions to organizations described in se	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the ye		
	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or I	ry. For organizations less for the year. (Enter this info. once.) > \$		
	Use duplicate copies of Part III if additional	space is needed.	1		
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	(*) * ** ** ** 3	(-, 3	(*) ; ; ;		
			[
		(e) Transfer of gift	1		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
		[
a) No. from	(h) Dumpers of sift		(d) Description of how sift is hold		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transfer of gift				
		(0)			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
		[
a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
			[
F		(e) Transfer of gift	I		
		(c) manaler of gift			
	Transferee's name, address, a	nd ZI P + 4	Relationship of transferor to transferee		
a) No. rom					
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
			[
_					
		(e) Transfer of gift			
L	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
454 11-08-1	18		Schedule B (Form 990, 990-EZ, or 990-PF) (2		
		27			

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SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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.

2018 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

Section 527 organizations: Complete Part I-A only.

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

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

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

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

Name of organization Employer identification					over identification number		
	PLUG IN AMERICA					26-1799615	
Pa	art I-A Complete if the o	rganization is exempt under	section 501(c) o	r is a section 52	27 org	anization.	
2							
Pa	art I-B Complete if the o	rganization is exempt under					
1	Enter the amount of any excise ta	ix incurred by the organization under	section 4955		. ►\$		
2	Enter the amount of any excise ta	ix incurred by organization managers	under section 4955		. ▶\$		
3	If the organization incurred a sec	ion 4955 tax, did it file Form 4720 fo	r this year?			Yes No	
4a	a Was a correction made?					Yes No	
	b If "Yes," describe in Part IV.				-04/-)	(0)	
		rganization is exempt under					
		ed by the filing organization for secti			. 🏲 \$.		
2	00	anization's funds contributed to othe	U				
-					►\$		
3		es. Add lines 1 and 2. Enter here and	,				
4		m 1120-POL for this year?					
5	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.						
	(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organization filing organization funds. If none, ent	on's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0	

Schedule C (Form 990 or 990-EZ) 2018 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

832041 11-08-18

LHA

Schedule C (Form 990 or 990-EZ) 2018					L799615 Page 2
Part II-A Complete if the orga	inization is exe	mpt under section	n 501(c)(3) and file	d Form 5768 (el	ection under
section 501(h)).		en , , , , , , , , , , , , , , , , , , ,			
	•	• • •	n Part IV each affiliated	group member's nam	ie, address, EIN,
expenses, and share	, ,	• •	- defense og ska		
B Check 🕨 🛄 if the filing organizati	on checked box A a	and "limited control" pro	ovisions apply.		
	s on Lobbying Expo tures" means amo	enditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influe					
c Total lobbying expenditures (add lin	es 1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Enter					
If the amount on line 1e, column (a) or		bbying nontaxable am			
Not over \$500,000		the amount on line 1e			
Over \$500,000 but not over \$1,000,		100 plus 15% of the exc			
· · · · · · · · · · · · · · · · · · ·					
Over \$1,000,000 but not over \$1,50		00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0		\$225,000 plus 5% of the excess over \$1,500,000.			
Over \$17,000,000	\$1,000	,000.			
	050/ (1: 40				
g Grassroots nontaxable amount (ente	,				
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero					
j If there is an amount other than zero	on either line 1h o	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this y					Yes No
(Some organizations that		veraging Period Under 501(h) election do not		f the five columns b	elow.
	See the sepa	rate instructions for li	nes 2a through 2f.)		
	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) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 PLUG IN AMERICA 26-17996 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)).

For e	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		a)	(b)	
of the lobbying activity.		Yes	No	Amo	ount
1	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:				
а	Volunteers?	X			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
с	Media advertisements?		X		
d	Mailings to members, legislators, or the public?	Х			
	Publications, or published or broadcast statements?		X		
f	Grants to other organizations for lobbying purposes?		X		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X			<u>7,200.</u>
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
	Other activities?		X		
j	Total. Add lines 1c through 1i				7,200.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6).	n 501(c)(b), or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
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 th				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(5), or sec	tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OR	(b) Part	III-A, line	e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
2	expenses for which the section 527(f) tax was paid).	201			
-			2a		
c c	, , , , , , , , , , , , , , , , , , , ,				
່້					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc		3		
-	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?	Jillical	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par			5		
Prov instru	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group uctions); and Part II-B, line 1. Also, complete this part for any additional information. TII-B, LINE 1, LOBBYING ACTIVITIES:	list); Part II-	A, lines 1 a	nd 2 (see	
PLU	JG IN AMERICA DID SUPPORT A NUMBER OF BILLS IN 2019,	THOUC	GH THI	S	
REI	PRESENTED A VERY MINIMAL AMOUNT OF STAFF TIME AND RE	SOURCE	ES IN I	LIGHT	
OF	THE FACT THAT PLUG IN AMERICA IS A 501C3 AND NOT A	C6. PI	LUG IN		
AMI	ERICA MOST OFTEN SERVES AS THE RESOURCE ON MARKET DA	TA ANI) THE		
<u>C01</u>	SUMER VOICE TO EDUCATE ELECTED OFFICIALS AND POLICY		-		
		Schedu	le C (Form	990 or 990	D-EZ) 2018

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Schedule C (Form 990 or 990-EZ) 2018 PLUG IN AMERICA Part IV Supplemental Information (continued)

LEAVES THE SPECIFIC LOBBYING ON CERTAIN BILLS TO OTHER GROUPS IN-STATE. HOWEVER, PLUG IN AMERICA DID SEND OUT ACTION ALERTS TO OUR MEMBERS IN WASHINGTON STATE ON HB 2653, A SALES TAX EXEMPTION BILL FOR EV DRIVERS. WE ALSO PUT OUT A PETITION TO OUR CALIFORNIA DRIVERS TO ALLOW FOR EV DRIVERS TO STAY IN THE HOV LANES; THIS PETITION WAS DELIVERED TO POLICYMAKERS IN CALIFORNIA. IN GEORGIA, WE SUPPORTED THE CITY OF ATLANTA BUILDING CODE LEGISLATION, AND HB 98 - A TAX CREDIT FOR THE PURCHASE OF AN EV. WE ALSO PARTICIPATED IN A LOBBY DAY AT THE GEORGIA CAPITOL IN JANUARY 2018. IN COLORADO, WE SUPPORTED SB 18216, A BILL ON INSTALLING CHARGING INFRASTRUCTURE, AND HAD OUR SUPPORTERS SEND EMAILS TO THE CO SENATE. WE ALSO HAD OUR DRIVERS SEND EMAILS TO THE CO AIR OUALITY COMMISSION ON THE ADOPTION OF THE ADVANCED CLEAN CARS PROGRAM. AT THE FEDERAL LEVEL, PLUG IN AMERICA SUPPORTED THE FEDERAL EV TAX CREDIT (30D) AND THE EXTENDERS BILL. WE ALSO HAD OUR EV DRIVERS SEND A PETITION TO THE EPA OPPOSING THE RE-OPENING OF THE MID-TERM EVALUATION OF THE CLEAN CAR STANDARDS.

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SCHEDULE	D
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Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Name	of the	organiza	atior
name		or guinza	ation

Nam	e of the organization PLUG IN AMERICA	Employer identification number 26-1799615
Par		
	organization answered "Yes" on Form 990, Part IV, line 6.	
) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds	S
	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used on	
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferrir	
	impermissible private benefit?	
Par		
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	important land area
	Protection of natural habitat Preservation of a certified his	toric structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a con	servation easement on the last
	day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organiz	ation during the tax
	year ►	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	easements during the year
	▶	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ease	ements during the year
-	▶\$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i	
-	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement	
	include, if applicable, the text of the footnote to the organization's financial statements that describes the orga	nization's accounting for
Par	conservation easements. t III Organizations Maintaining Collections of Art, Historical Treasures, or Other Sin	milar Assets
. a	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1-		holopoo oboot werke of art
ia	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and bistorical traceures, or other similar assots held for public axhibition, education, or research in furtherance of p	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of p	ubile service, provide, in Part All,
h	the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and bal	ance sheet works of art historical
b	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public servi	
	relating to these items:	ice, provide the following arribuilts
	5	₽ ◀
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X	► \$ ► \$
2	(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, p	
2	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
9	Revenue included on Form 990, Part VIII, line 1	▶ \$
a h	Assets included in Form 990, Part X	
		▼ Ψ

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 832051 10-29-18

Schedule D (Form 990) 2018

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Sche		AMERICA						179961		
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	torical Tre	easures, or	r Other S	Similar As	sets _{(cont}	inued,)
3	Using the organization's acquisition, accession	on, and other records	s, chec	k any of the	following that	are a sign	ificant use of	its collectio	n item	IS
	(check all that apply):									
а	Public exhibition	d		Loan or exc	hange progra	ams				
b	Scholarly research	e		Other						
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how t	hey further th	ne organizatio	on's exemp	ot purpose in	Part XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, h	istorical treas	sures, or othe	er similar a	ssets			
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran		ete if th	e organizatic	on answered '	'Yes" on F	orm 990, Par	t IV, line 9, c	or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custodi								_	_
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing	table:						
								Amou	nt	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						lf			
	Did the organization include an amount on F						?	Yes	Ļ	No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete i									
		(a) Current year	(b)	Prior year	(c) Two year	rs back (c	i) Three years I	back (e) Fo	ur year	s back
1 a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	rent year end balance	e (line 1	g, column (a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
с	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that	at are held ar	nd administer	ed for the	organization			
	by:								Yes	No
	(i) unrelated organizations							3a(i))	
)	
b	If "Yes" on line 3a(ii), are the related organization	tions listed as requir	ed on S	Schedule R?				3b		
4	Describe in Part XIII the intended uses of the		wment	funds.						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" on Form 990), Part l	V, line 11a. S	See Form 990	, Part X, lir	ne 10.			
	Description of property	(a) Cost or o		• •	t or other	• •	cumulated	(d) Bo	ok val	ue
		basis (investn	nent)	basis	(other)	depr	eciation	L		
1a	Land									
b	Buildings									
с	Leasehold improvements									
d	Equipment			1	1,133.		2,102.		9,0)31.
	Other									
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part .	<u>X. colui</u>	mn (<u>B), line 1</u>	0c.)		►		9,0)31.
							Sche	dule D (For	m 990) 2018

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(a) Des	Complete if the organization answered "Yes" c cription of security or category (including name of security)	(b) Book value		tion: Cost or end-of-year market value
	ncial derivatives			
• •	ely-held equity interests			
(3) Othe				
(C) (A)				
(B)				
(C)				
(D)				
(E)				
(E) (F)				
(G)				
(H)				
	h (h) must squal Form 000 Part X, sol. (P) line 12.)			
	bl. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ [//// Investments - Program Related.			
i art v			11. 0. Fam. 000 Dad	N 1/2 - 10
	Complete if the organization answered "Yes" c (a) Description of investment	n Form 990, Part IV, Iin (b) Book value		X, line 13. ition: Cost or end-of-year market value
	(a) Description of investment			tion. Cost of end-of-year market value
(1)				
(2)				
(3)			_	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	ol. (b) must equal Form 990, Part X, col. (B) line 13.) 🕨			
Part IX	X Other Assets.			
	Complete if the organization answered "Yes" of	on Form 990, Part IV, lin	e 11d. See Form 990, Part	X, line 15.
	(a) [Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	Column (b) must equal Form 990, Part X, col. (B) line	15)		
Part X	Other Liabilities.	<u>15.)</u>		
	Complete if the organization answered "Yes" of	n Form 990 Part IV lin	e 11e or 11f See Form 00() Part X line 25
	· · · · · · · · · · · · · · · · · · ·		(b) Book value	, r arc A, into 20.
4	(a) Description of liability			
	(a) Description of liability			
(1) F	Federal income taxes	TT.TTY	589 900	
(1) F (2) I		ILITY	589,900.	
(1) F (2) I (3)	Federal income taxes	ILITY	589,900.	
(1) F (2) J (3) (4)	Federal income taxes	ILITY	589,900.	
(1) F (2) I (3) (4) (5)	Federal income taxes		589,900.	
(2)] (3) (4) (5) (6)	Federal income taxes		589,900.	
(1) F (2) I (3) (4) (5) (6) (7)	Federal income taxes		589,900.	
(1) F (2) J (3) (4) (5) (6) (7) (8)	Federal income taxes		589,900.	
(1) F (2) I (3) (4) (5) (6) (7)	Federal income taxes		589,900.	

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

832053 10-29-18

Sche	dule D (Form 990) 2018 PLUG IN AMERICA		26-3	L799615 Page	4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Reven	ue per Return.		_
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total revenue, gains, and other support per audited financial statements		1	2,245,782	•
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e	0	•
3	Subtract line 2e from line 1		3	2,245,782	•
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	. 4b			
с	Add lines 4a and 4b		4c	0	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			2,245,782	•
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents With Expe	nses per Returr	1.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				_
1	Total expenses and losses per audited financial statements		1	1,993,975	•
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities	2 a			
b	Prior year adjustments	. 2b			
С	Other losses	. 2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e	0	•
3	Subtract line 2e from line 1			1,993,975	•
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
с	Add lines 4a and 4b		4c	0	•
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			1,993,975	•
Pa	rt XIII Supplemental Information.				

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

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3)
OF THE INTERNAL REVENUE CODE AND ONLY UNRELATED BUSINESS INCOME IS SUBJECT
TO FEDERAL AND STATE INCOME TAX. THE ORGANIZATION IS A PUBLIC, CHARITABLE
ORGANIZATION AND CONTRIBUTIONS TO THE ORGANIZATION QUALIFY FOR A
CHARITABLE TAX DEDUCTION TO DONORS. THE ORGANIZATION FILES INFORMATIONAL
RETURNS IN THE U.S. FEDERAL JURISDICTION AND THE STATE OF CALIFORNIA.
UNCERTAIN TAX PROVISIONS, IF ANY, ARE RECORDED WITH FINANCIAL ACCOUNTING
STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740, INCOME
TAXES (PREVIOUSLY FASB INTERPRETATION NO. 48). FASB ACC 740 REQUIRES THE
RECOGNITION OF A LIABILITY FOR A TAX POSITION THAT DOES NOT MEET THE
832054 10-29-18 Schedule D (Form 990) 2018 35

Part XIII Supplemental Information (continued)

MORE-LIKELY-THAN-NOT STANDARD THAT THE POSITION WILL BE SUSTAINED UPON

EXAMINATION BY THE TAXING AUTHORITIES. THERE WAS NO LIABILITY FOR

UNCERTAIN TAX POSITION RECORDED AT DECEMBER 31, 2018.

Schedule D (Form 990) 2018

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36 2018.05000 PLUG IN AMERICA SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

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

Open to Public Inspection Employer identification number

/

OMB No. 1545-0047

18

PLUG IN AMERICA

26-1799615

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PLUG IN AMERICA IS A NON-PROFIT, SUPPORTER-DRIVEN ADVOCACY GROUP. WE

ARE THE VOICE OF PLUG-IN VEHICLE DRIVERS ACROSS THE COUNTRY. OUR

MISSION IS TO DRIVE CHANGE TO ACCELERATE THE SHIFT TO PLUG-IN VEHICLES

POWERED BY CLEAN, AFFORDABLE, DOMESTIC ELECTRICITY TO REDUCE OUR

NATION'S DEPENDENCE ON PETROLEUM, IMPROVE AIR QUALITY AND

REDUCE GREENHOUSE GAS EMISSIONS.

WE HELP CONSUMERS, POLICY-MAKERS, AUTO MANUFACTURERS AND

OTHERS TO UNDERSTAND THE POWERFUL BENEFITS OF DRIVING ELECTRIC.

WE PROVIDE PRACTICAL, OBJECTIVE INFORMATION TO HELP CONSUMERS

SELECT THE BEST PLUG-IN VEHICLE FOR THEIR LIFESTYLES AND NEEDS.

PLUG IN AMERICA FOUNDED NATIONAL DRIVE ELECTRIC WEEK, THE

WORLD'S LARGEST CELEBRATION OF THE PLUG-IN VEHICLE, WHICH

WELCOMED OVER 180,000 ATTENDEES ACROSS 321 EVENTS IN 2018,

SPANNING ALL 50 STATES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

NATION'S DEPENDENCE ON PETROLEUM, IMPROVE AIR QUALITY AND

REDUCE GREENHOUSE GAS EMISSIONS.

WE HELP CONSUMERS, POLICY-MAKERS, AUTO MANUFACTURERS AND

OTHERS TO UNDERSTAND THE POWERFUL BENEFITS OF DRIVING ELECTRIC.

WE PROVIDE PRACTICAL, OBJECTIVE INFORMATION TO HELP CONSUMERS

SELECT THE BEST PLUG-IN VEHICLE FOR THEIR LIFESTYLES AND NEEDS.

PLUG IN AMERICA FOUNDED NATIONAL DRIVE ELECTRIC WEEK, THE

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990 or 990-EZ) (2018)83221110-10-18

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization PLUG IN AMERICA	Employer identification number 26-1799615
WORLD'S LARGEST CELEBRATION OF THE PLUG-IN VEHICLE, WHICH	
WELCOMED OVER 180,000 ATTENDEES ACROSS 321 EVENTS IN 2018,	
SPANNING ALL 50 STATES.	

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

PLUGSTAR PRODUCES REAL-WORLD RESULTS, ENGAGING MORE EV DEALERS AND

DRIVING EV SALES INCREMENTALLY HIGHER. OUR VERY FIRST TRAINING-ONLY

PILOT LAUNCHED IN 2016 WITH SDG&E SAW PARTICIPATING DEALERSHIPS DELIVER

6.5% MORE EVS THAN A CONTROL GROUP OF SIMILAR AREA DEALERS.THE PROGRAM

HAS SINCE GROWN TO ENCOMPASS AN ARRAY OF RESOURCES FOR DEALERS AND

CUSTOMERS, INCLUDING INFORMATIVE COLLATERAL SUCH AS A GLOVEBOX EV

WELCOME KIT, A MOBILE-FRIENDLY EV PORTAL, AND HELP-LINE SUPPORT.

PLUGSTAR SUPPORTED DEALERS NOW SELL BETWEEN FOUR AND FIVE TIMES MORE

EVS THAN THEIR UNTRAINED COUNTERPARTS, EVEN WHEN BOTH GROUPS RECEIVE

THE SAME MONETARY INCENTIVE. OVER 99% OF PARTICIPANTS RECOMMEND OUR

TRAINING TO OTHER SALES STAFF. THE PROGRAM WORKS BECAUSE IT FITS NEATLY

WITHIN THE DEALER'S BUSINESS MODEL, PROVIDING A TURN-KEY, YET FLEXIBLE,

PLATFORM TO ACCOMMODATE A DIVERSITY OF DEALER PROFILES, GEOGRAPHIES AND

NEEDS.

PLUGSTAR HAS SINCE TRAINED OVER 1,000 SPECIALISTS FROM MORE THAN 200 DEALERS AND MANUFACTURER TEAMS REPRESENTING 14 AUTOMOTIVE BRANDS COAST-TO-COAST. WE'VE ALSO DISTRIBUTED OVER \$125,000 IN POINT-OF-PURCHASE CUSTOMER REBATES AND \$300,000 IN DEALER INCENTIVES THAT HELPED SELL CLOSE TO 1,000 EVS IN SAN DIEGO AND SACRAMENTO,

38

CALIFORNIA.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

832212 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)

AT THE FEDERAL LEVEL, 2018 WAS A BUSY YEAR. WE WERE SUCCESSFUL IN PRESERVING THE SECTION 30D EV TAX CREDIT OF UP TO \$7,500 FROM BEING CUT IN THE TAX PACKAGE THAT MOVED THROUGH THE CONFERENCE PROCESS. WE ALSO CONTINUED TO EDUCATE MEMBERS OF CONGRESS ON THE IMPORTANCE OF THE MODIFYING THE TAX CREDIT TO WORK FOR MORE DRIVERS FOR A LONGER PERIOD OF TIME. TO THIS END WE HOSTED OUR SECOND ANNUAL EV RIDE AND DRIVE ON CAPITOL HILL, WORKING WITH SENATOR PORTMAN'S OFFICE AND THE SENATE AUTO CAUCUS TO HOST THE EVENT. PLUG IN AMERICA WAS ALSO VERY ACTIVE ON THE PROPOSED CLEAN CAR STANDARDS ROLLBACK BY THE EPA AND NHTSA. WE SUBMITTED COMMENTS, PUT OUT A PETITION FOR OUR MEMBERS TO SIGN IN OPPOSITION TO THE ROLLBACK AND HOSTED A RALLY IN OPPOSITION AT THE PUBLIC HEARING IN FRESNO. PLUG IN AMERICA ALSO BECAME A MEMBER OF THE NATIONAL COALITION FOR ADVANCED TRANSPORTATION (NCAT) TO JOIN LITIGATION ON THE RE-OPENING OF THE MID-TERM EVALUATION OF THE CLEAN CAR STANDARDS.

IN CALIFORNIA, WE CONTINUED TO WORK ON ISSUES SUCH AS THE REMOVAL OF SOME EV DRIVERS FROM THE HOV LANES STARTING IN JANUARY 2019. WE HOSTED A PETITION, HELD MEETINGS WITH KEY STAFF AND LEGISLATORS AND SUBMITTED COMMENTS MULTIPLE TIMES. WE CONTINUE TO SEEK SOLUTIONS TO REMEDY THE HOV ACCESS FOR EV DRIVERS. IN ADDITION, WE ALSO PROVIDED SUPPORT TO A NUMBER OF BILLS PERTINENT TO ADVANCING THE EV MARKET. WE ALSO WORKED WITH OTHER EV ADVOCATE GROUPS ON POST-2025 STANDARDS FOR AUTOMAKERS UNDER THE ZEV MANDATE.

ON THE UTILITY FRONT, PLUG IN AMERICA WAS ACTIVE WITH THE ALLIANCE FOR

 TRANSPORTATION ELECTRIFICATION, AND SUBMITTED COMMENTS FROM THE EV

 832212 10-10-18
 Schedule O (Form 990 or 990-EZ) (2018)

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Schedule O (Form 990 or 990-EZ) (2018)	Page 2			
Name of the organization PLUG IN AMERICA	Employer identification number 26-1799615			
	20-1799015			
DRIVER PERSPECTIVE IN A NUMBER OF STATES INCLUDING: MD, VT	, CA, NY, AZ,			
SC AND MORE. WE ALSO HOSTED EV RIDE AND DRIVES TO EDUCATE	UTILITY			
COMMISSIONERS ON THE BENEFITS OF EVS AT THE NATIONAL ASSOC	IATION OF			
REGULATORY UTILITY COMMISSIONERS (NARUC) CONFERENCE AND TH	E			
MID-ATLANTIC COMMISSIONER CONFERENCE (MACRUC). PLUG IN AME	RICA WAS ALSO			
AN ORIGINAL AUTHOR AND SIGNATORY OF THE TRANSPORTATION ELE	CTRIFICATION			
ACCORD (TE ACCORD), WHICH HIGHLIGHTS THE BROAD PRINCIPLES	ТО			
TRANSPORTATION ELECTRIFICATION FOR ALL STAKEHOLDERS TO AGR	EE TO. THE TE			
ACCORD WAS OFFICIALLY LAUNCHED IN JUNE 2018.				
AROUND THE COUNTRY, PLUG IN AMERICA WAS ACTIVE ON A NUMBER	OF ISSUES.			
IN GEORGIA, WE CONTINUED TO PUSH FOR AN EV TAX CREDIT AND	A REDUCED EV			
USER FEE. IN COLORADO, WE RALLIED UP OUR EV DRIVERS TO SUP	PORT THE			
STATE'S INQUIRY INTO ADOPTING THE CA CLEAN CAR STANDARDS A	ND			
PARTICULARLY THE ZEV MANDATE. IN VERMONT WE WERE ACTIVE ON	THE			
COMMISSION PROCESS TO UNDERSTAND IF EVSE SHOULD BE REGULATED OR NOT. IN				
WASHINGTON AND NEW JERSEY WE PUT OUT ACTION ALERTS ON EV LEGISLATION.				
THIS IS JUST A SMALL SAMPLING OF OUR STATE ACTIVITY.				

FINALLY, PLUG IN AMERICA CONTINUED TO EDUCATE GROUPS AROUND THE COUNTRY ON CONSUMER PROTECTION ISSUES, SUCH AS THE NESCAUM MEMBERS. WE WORKED WITH TESLA AND OTHERS ON A MODEL BUILDING CODE FOR INSTALLING EVSE IN NEW CONSTRUCTION AND RETROFITS. WE RELEASED A 2.0 VERSION OF OUR ACHIEVE MODEL POLICY TOOLKIT, AND WE PREPARED A NUMBER OF NEW FACTSHEETS ON ISSUES SUCH AS: DCFC RATES, OPEN ACCESS, TE PRINCIPLES FOR REGULATORS, VGI, EDUCATION AND OUTREACH, AND MUCH MORE.

40

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

Schedule O (Form 990 or 990-EZ) (2018)

832212 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)	Page 2		
Name of the organization PLUG IN AMERICA	Employer identification number 26-1799615		
NATIONAL DRIVE ELECTRIC WEEK, SEPTEMBER OF EVERY YEAR, IS	A NATIONWIDE		
CELEBRATION TO HEIGHTEN AWARENESS OF TODAY'S WIDESPREAD AV	AILABILITY OF		
PLUG-IN VEHICLES AND HIGHLIGHT THE BENEFITS OF ALL-ELECTRIC AND PLUG-IN			
HYBRID-ELECTRIC CARS, TRUCKS, MOTORCYCLES, AND MORE. THEY ARE FUN TO			
DRIVE, ARE LESS EXPENSIVE AND MORE CONVENIENT TO FUEL THAN GASOLINE			
VEHICLES, ARE BETTER FOR THE ENVIRONMENT, PROMOTE LOCAL JOBS, AND			
REDUCE OUR DEPENDENCE ON FOREIGN OIL.			

STARTED IN 2011 AS NATIONAL PLUG IN DAY WITH THE SIMPLE IDEA TO HOLD SIMULTANEOUS EVENTS ACROSS THE COUNTRY ON THE SAME DAY, BY POPULAR DEMAND WE HAVE EXPANDED TO AN ENTIRE WEEK OF EVENTS AND CHANGED THE NAME TO EMPHASIZE THE THING WE ALL WANT TO DO: DRIVE ELECTRIC. WE EXPECT NATIONAL DRIVE ELECTRIC WEEK 2020 WILL AGAIN GROW TO INCLUDE MORE EVENTS IN MORE CITIES WITH MORE DRIVERS REACHING OUT TO SHARE THE MANY ADVANTAGES OF DRIVING ELECTRIC WITH THE PUBLIC.

EACH EVENT IS LED BY LOCAL PLUG-IN DRIVERS AND ADVOCATES AND TYPICALLY
INCLUDES SOME COMBINATION OF EV PARADES, RIDE-AND-DRIVES, ELECTRIC
TAILGATE PARTIES, PRESS CONFERENCES, AWARD CEREMONIES, INFORMATIONAL
BOOTHS, AND MORE. PLUG IN AMERICA TEAM PROVIDING SUPPORT TO THE EVENTS
THROUGHOUT THE COUNTRY. WE ARE PLEASED TO PARTNER WITH MANY OTHER
ORGANIZATIONS AND INDIVIDUALS WORKING TO BRING NATIONAL DRIVE ELECTRIC
WEEK TO COMMUNITIES ACROSS THE COUNTRY. ABOUT 300 EVENTS ACROSS ALL 50
STATES WITH AN ESTIMATED 120,000 ATTENDEES.
EXPENSES \$ 348,908. INCLUDING GRANTS OF \$ 0. REVENUE \$ 78,000.

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

 THE
 FORM
 990
 IS
 PREPARED
 BY
 AN
 OUTSIDE
 TAX
 PREPARER
 WITH
 SUPPORT
 BY
 THE

 832212
 10-10-18
 Schedule O (Form 990 or 990-EZ) (2018)

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 41

Schedule O (Form 990 or 990-EZ) (2018)					
Name of the organization	Employer identification number				
PLUG IN AMERICA	26-1799615				

DIRECTOR OF FINANCE AND ADMINISTRATION FOR REVIEW AND APPROVAL BY THE

FINANCE COMMITTEE OF THE BOARD. ONCE APPROVED BY THE FINANCE

COMMITTEE, IT IS DISTRIBUTED TO THE FULL BOARD AND SIGNED BY THE

EXECUTIVE DIRECTOR BEFORE SUBMISSION.

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

MEMBERS OF THE BOARD OF DIRECTORS ARE ANNUALLY REQUIRED TO SUBMIT A FORM IN WHICH THEY DISCLOSE ANY INTERESTS THAT COULD GIVE RISE TO CONFLICTS.

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

THE BOARD REVIEWS AND APPROVES THE COMPENSATION OF THE EXECUTIVE DIRECTOR

ONLY AFTER DETERMINING THAT THE COMPENSATION IS JUST AND REASONABLE. THE

REVIEW AND APPROVAL OCCURED BEFORE THE EXECUTIVE DIRECTOR WAS HIRED AND IS

REVIEWED BEFORE THE TERM OF EMPLOYMENT IS RENEWED OR EXTENDED, AND BEFORE

ANY COMPENSATION IS MODIFIED, UNLESS THE MODIFICATION APPLIES TO

SUBSTANTIALLY ALL OF THE EMPLOYEES OF THE ORGANIZATION. THE ORGANIZATION

DOES NOT HAVE ANY OTHER OFFICERS OR KEY EMPLOYEES WHO ARE COMPENSATED.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST. THE FINANCIAL STATEMENTS ARE POSTED ON THE PLUG IN AMERICA WEBSITE.

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FORM 990, PART IX, LINE 11G, OTHER FEES:

CONTRACT SERVICES, EDUCATION:

PROGRAM SERVICE EXPENSES

MANAGEMENT AND GENERAL EXPENSES

FUNDRAISING EXPENSES

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2018.05000 PLUG IN AMERICA

0.

Ο.

550,454.

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization PLUG IN AMERICA	Page Employer identification numb 26-1799615
OTAL EXPENSES	550,454.
OUTSIDE SERVICES/TEMP STAFFING:	
PROGRAM SERVICE EXPENSES	17,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	17,000.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	567,454.
332212 10-10-18 Sc	20 chedule O (Form 990 or 990-EZ):

19121113 146892 659907

NOTICE 2018-100									
Form 990-T	Exempt Organization Business Income Tax Return								OMB No. 1545-0687
	(and proxy tax under section 6033(e))								2018
	For calendar year 2018 or other tax year beginning, and ending							·	ZU IO
Department of the Treasury Internal Revenue Service	 Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). 							C 5	Open to Public Inspection for 01(c)(3) Organizations Only
A Check box if	Name of organization (Check how if name changed and cas instructions)							yer identification number	
address changed								instruc	oyees' trust, see tions.)
B Exempt under section	Print								5-1799615
X 501(c)(3)	or Type	" Number, street, and room or suite no. If a P.O. box, see instructions.							ted business activity code structions.)
408(e) 220(e)	Type	6380 WILSHIRE BOULEVARD, NO. 1000							
408A 530(a)		City or town, state or province, country, and ZIP or foreign postal code							
529(a)		LOS ANGELES, CA 90048 900099							
C Book value of all assets at end of year		F Group exemption numb G Check organization type			501(c)	truct		ı) trust	Other trust
H Enter the number of the	organiza		、,				he only (or first) u	,	
	-	EE STATEMENT	· ·				complete Parts I-V		than one
	-	ce at the end of the previou		rts I an			-		
business, then complete			·····, ·····		,				
I During the tax year, was	the corp	oration a subsidiary in an a	ffiliated group or a paren	ıt-subsi	diary controlled gr	roup?		Yes	s 🗌 No
		tifying number of the paren							
J The books are in care of						<u> </u>	ne number 🕨 🕄		
		te or Business Inc	ome		(A) Income	;	(B) Expense	S	(C) Net
1a Gross receipts or sale									
b Less returns and allow				1c		-			
		A, line 7) rom line 1c		2 3		-			
		h Schedule D)		4a		-			
		art II, line 17) (attach Form		4b					
		sts		4c					
		ship or an S corporation (at		5					
				6					
		ne (Schedule E)		7					
8 Interest, annuities, roy	valties, a	nd rents from a controlled c	rganization (Schedule F)	8					
		on 501(c)(7), (9), or (17) or							
		me (Schedule I)		10					
11 Advertising income (S	Schedule	e J)		11					
12 Other income (See in:	Struction	is; attach schedule)		12		0.			
13 Total. Combine lines Part II Deductio	ns No	^{gh 12} . I Taken Elsewher	e (See instructions fo	r limits	tions on deduct				
		utions, deductions must					ncome.)		
14 Compensation of off	ficers. di	rectors, and trustees (Sche	dule K)					14	
								15	
								16	
								17	
18 Interest (attach sche								18	
19 Taxes and licenses	9 Taxes and licenses							19	
		e instructions for limitation						20	
		562)						0.01	
		n Schedule A and elsewhere						22b	
		mnensation plans						23 24	
		mpensation plans						24	
26 Excess exempt expe	nses (So	chedule I)						26	
							27		
		nedule)						28	
		14 through 28						29	0.
								30	0.
		ncome. Subtract line 31 fro						32	<u> </u>
823701 01-09-19 LHA Fo	or Paper	work Reduction Act Notice	, see instructions.						Form 990-T (2018)

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Form 990-	T (2018)	PLUG IN	AMERICA				26-17	99615	Page 2
Part I	III Tota	al Unrelate	d Business Taxal	ole Income					
33	Total of ur	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)							0.
34			34	9,465.					
35	Deduction	unts paid for disallowed fringes						35	
36		al of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of							
		les 33 and 34						36	9,465.
37	Specific de	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)							1,000.
38			le income. Subtract line						
		smaller of zero o			-			38	8,465.
Part I	V Tax	Computati	on					<u> </u>	
39	Organizati	ions Taxable as	Corporations. Multiply I	ine 38 by 21% (0.21)				39	1,778.
40									-
	40 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: Tax rate schedule or Schedule D (Form 1041)							40	
41	Proxy tax.	See instruction	S					· 41	
42	Alternative	e minimum tax (t	rusts only)					42	
43	Tax on No	ncompliant Fac	lity Income. See instruc	tions				43	
44	Total. Add	I lines 41, 42, an	d 43 to line 39 or 40, wh	ichever applies				44	1,778.
Part V		and Payme							
45 a	Foreign tax	x credit (corpora	tions attach Form 1118;	trusts attach Form 1116	5)	45a			
		lits (see instructi							
		•	tach Form 3800						
			um tax (attach Form 880						
			a through 45d					45e	
46			44					46	1,778.
47	Other taxe	s. Check if from:	Form 4255	Form 8611 Form	1 8697 🔲 Form	n 8866	Other (attach schedule)		•
48			d 47 (see instructions)						1,778.
49			aid from Form 965-A or I						0.
			yment credited to 2018						
			nts						
			868						
			paid or withheld at source						
			structions)						
f	Credit for	small employer l	nealth insurance premiun	ns (attach Form 8941)		50f			
			, and payments: 🔲 Fo						
9				ther	Total	► 50g			
51		-	50a through 50g					51	
52			instructions). Check if Fo					52	
53			han the total of lines 48,				►	53	1,778.
54			larger than the total of li				Þ	54	
55			4 you want: Credited to 2				Refunded 🕨	55	
Part V			garding Certain			tion (see i			
56	At any tim	e during the 201	8 calendar year, did the o	proanization have an inte	erest in or a signat	ure or other a	uthority		Yes No
	-	0	ank, securities, or other)	0	0		5		
		•	of Foreign Bank and Fina			-			
	here 🕨	<i>,</i> ,	Ū			0	5		
57		e tax year, did the	e organization receive a d	listribution from, or was	it the grantor of, o	or transferor to	o, a foreign trust?		
	-		r other forms the organiz		0 /		, , , , , , , , , , , , , , , , , , , ,		
58			empt interest received or	-	year ▶\$				
			declare that I have examined					ledge and belie	f, it is true,
Sign	correct,	and complete. Deci	aration of preparer (other than	r taxpayer) is based on all init	-		F	May the IPS di	scuss this return with
Here					EXECU	TIVE D			iown below (see
	Sig	nature of officer		Date	Title			instructions)?	X Yes No
	Prir	nt/Type preparer	's name	Preparer's signature		Date	Check	if PTIN	
Paid				LAUREN [°] A.			self- employe		
Prepa	arer LA	UREN A.	HAVERLOCK	HAVERLOCK		11/13/)545829
Use (-0189318		
			10960 WILS		SUITE 11	L00			
	Firn	n's address 🕨	LOS ANGELE	<u>S, CA 9</u> 0024	1		Phone no.	<u>310-47</u>	77-0450
823711 01	1-09-19							F	orm 990-T (2018)
					45				

2018.05000 PLUG IN AMERICA

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1 BUSINESS ACTIVITY

QUALIFIED TRANSPORTATION FRINGE BENEFITS

TO FORM 990-T, PAGE 1