

Fill in this information to identify the case:Debtor Powin, LLCUnited States Bankruptcy Court for the: _____ District of New Jersey
(State)Case number 25-16137**Modified Official Form 410
Proof of Claim****04/25**

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	American Clean Power Association	
	Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom?	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? American Clean Power Association ACPA 1299 Pennsylvania Ave. NW Suite 1300 Washington, DC 20004 Contact phone <u>202-318-5341</u> Contact email <u>legalnotices@cleanpower.org</u> Uniform claim identifier (if you use one):	Where should payments to the creditor be sent? (if different) Contact phone Contact email
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) Filed on MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing?	



Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? ☒ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: ____

7. How much is the claim? \$ 218000. Does this amount include interest or other charges?
☒ No
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
Limit disclosing information that is entitled to privacy, such as health care information.
Contract for event space and membership services

9. Is all or part of the claim secured? ☒ No
☐ Yes. The claim is secured by a lien on property.
Nature or property:
☐ Real estate: If the claim is secured by the debtor's principle residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ Other. Describe: _____
Basis for perfection: _____
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
☐ Fixed
☐ Variable

10. Is this claim based on a lease? ☒ No
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? ☒ No
☐ Yes. Identify the property: _____



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. Check all that apply:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Amount entitled to priority

\$ _____

☐ Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$17,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ _____

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ _____

☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?

☒ No

☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ _____

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(3) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☒ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 09/23/2025
MM / DD / YYYY

/s/Michael A. Baird
Signature

Print the name of the person who is completing and signing this claim:

Name Michael A. Baird
First name Middle name Last name

Title Head of Corporate Legal Affairs

Company American Clean Power Association
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Contact phone _____ Email _____



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 507-8031 | International 001-310-823-9000

Debtor: 25-16137 - Powin, LLC District: District of New Jersey, Trenton Division		
Creditor: American Clean Power Association ACPA 1299 Pennsylvania Ave. NW Suite 1300 Washington, DC, 20004 Phone: 202-318-5341 Phone 2: Fax: Email: legalnotices@cleanpower.org	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party: Creditor	
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: Contract for event space and membership services	Last 4 Digits: No	Uniform Claim Identifier:
Total Amount of Claim: 218000	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): No Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: Michael A. Baird on 23-Sep-2025 7:14:58 a.m. Pacific Time Title: Head of Corporate Legal Affairs Company: American Clean Power Association		

Company Information

Company Name:	Powin Energy
Address:	20550 SW 115th Ave.
Address 2:	
City:	Tualatin
State / Province:	OR
Zip / Postal Code:	97062
Country:	United States of America
Phone:	5034039731
Website:	www.powin.com
Please select all technologies that represent the majority of your business (50% or more):	Energy Storage
Product Categories:	Battery Manufacturer,Energy Storage

Contacts

Contact Name	Type	Title	Department	Phone	Email
Debbie Hamilton (Primary)	Official	Marketing Specialist		5034039731	debbie.hamilton@powin.com
Debbie Hamilton	Billing	Marketing Specialist		5034039731	debbie.hamilton@powin.com
Michelle Meyer	Secondary	Director of Strategic Marketing		5419681804	Michelle.meyer@powin.com

Line Item Orders

Order Number: 1187490 Balance: \$43,000.00

Type	Description	Price Type	Price
Booth	Halls A-E, Booth 1833 (20 x 50, 1000 sq ft)	ACP Member - Early Bird	\$43,000.00
Order Total:			\$43,000.00

Order Payments

There have been no payments for this order

External Orders (Paid to Map Your Show)

Order Number: I-394332

Balance: \$495.00

Type	Description	Price
Package	Essential Package	\$495.00
Order Total:		\$495.00

Terms & Conditions

The person executing this agreement has read and agrees, on behalf of the individual or entity for which it is executed, to be bound by the terms and conditions of the contract, incorporated herein by reference, further warrants that he or she has authority to execute this agreement by electronic signature and full authority to act for the individual or entity entering into this agreement.

Signature

Agreed to on:	February 4, 2025 @ 1:48 PM ET
Signature Print Name:	Debbie Hamilton
Title:	Marketing Specialist

A handwritten signature in black ink, appearing to be 'Debbie Hamilton', written in a cursive style. The signature starts with a large 'D', followed by 'e', 'b', 'b', 'i', 'e', and then 'H', 'a', 'm', 'i', 'l', 't', 'o', 'n'.



2025 Executive Energy Storage Council Membership Form

Please complete the below form and return to Laura Frazier at lfrazier@cleanpower.org no later than **December 31st, 2024** to renew your ACP membership and confirm eligibility to serve on the Executive Council.

Step #1: Provide Your Company Information

Company Name:

Company Name

Business Unit Joining ACP (*if different*)

U.S. Headquarters Location:

Street Address

City

State

Zip Code

Primary Contact:

Please identify the Primary Contact ("Authorized Representative") for the company. Any employee of your company will have access to ACP benefits and communications, but **only one person may be recognized as the Primary Contact. The Primary Contact has the power to represent and vote on behalf of the company** on matters brought to the membership including the Board of Directors election and will receive account correspondence such as renewal notices.

First Name, Last Name

Title

Email Address

Phone Number

Billing Contact:

Please identify the individual in your organization responsible for processing invoices and payments.

First Name, Last Name

Title

Email Address

Phone Number

Clean Power Technologies:

Which of the following clean power technologies that ACP represents does your organization have an interest in currently or in the next 1-2 years? *(Select all that apply)*

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Solar | <input type="checkbox"/> Offshore Wind |
| <input type="checkbox"/> Storage | <input type="checkbox"/> Transmission |
| <input type="checkbox"/> Onshore Wind | <input type="checkbox"/> Clean Hydrogen |

Step #2: Confirm Your Dues and Council Participation

ESA Legacy Members will pay 50% of the standard ACP dues in 2025 and 100% in 2026, with a required two-year membership commitment. The executive-level Energy Storage Council, requires consistent participation and total dues of at least \$125,000 in 2025, and dues of at least \$250,000 in 2026.

Membership Category: OEM, Manufacturing, Supply Chain, and EPC

Clean Power Revenue: _____

**Membership dues are established based on a three-year trailing average of revenues associated with ACP covered technologies. This only applies to revenue generated from ACP-covered technologies of solar, storage, onshore wind, offshore wind, transmission, and green hydrogen. This only applies to revenue attributable to the U.S. market.*

Business Level		
	Range of Revenue Per Instructions	Annual Membership Dues Level
<input type="radio"/>	\$10M -\$25M	\$25,000
<input type="radio"/>	\$25M – \$30M	\$50,000
<input type="radio"/>	\$30M – \$40M	\$60,000
<input type="radio"/>	\$40M – \$50M	\$80,000
<input type="radio"/>	\$50M – \$65M	\$120,000
<input type="radio"/>	\$65M – \$80M	\$170,000
<input type="radio"/>	\$80M – \$100M	\$218,000

Executive Level		
	Range of Revenue Per Instructions	Annual Membership Dues Level
<input type="radio"/>	\$100M – \$200M	\$310,000
<input type="radio"/>	\$200M – \$350M	\$360,000
<input type="radio"/>	\$350M – \$500M	\$403,000
<input type="radio"/>	\$500M – \$750M	\$468,000
<input type="radio"/>	\$750M – \$850M	\$504,000
<input type="radio"/>	\$850M – \$1B	\$540,000
<input type="radio"/>	\$1B – \$1.5B	\$730,000
<input type="radio"/>	\$1.5B – \$2B	\$790,000
<input type="radio"/>	Over \$2B	\$845,000*

Category	Contribution
ACP Base Membership Dues (Unless revenue range has changed and needs updating)	
2025 SINGLE-USE RATE	\$
Additional Contribution for Executive Level Membership (Additional payment to reach Executive Committee levels as necessary)	
TOTAL DIRECT PAYMENT DUE TO ACP	

Step #3: Confirm Official Representative to Serve on the Council

Please identify the main contact person to serve on the Executive Storage Council. Additional staff may be eligible participate. For more information on roles and responsibilities please contact us.

Council Representative

First Name, Last Name

Title

Email Address

Phone Number

Council Advisor

First Name, Last Name

Title

Email Address

Phone Number

Step #4: Read and Acknowledge Membership Agreement

[Terms and Conditions \(linked\)](#):

☐

Click here to indicate that you have read the Membership Agreement linked above.

Sign and Agree:

By providing your contact information and initials electronically, you agree, on behalf of the organization you represent, to the terms and conditions of this Membership Agreement. You acknowledge and agree that submitting this information electronically has the same force and effect as if you were to sign a hard copy of the Membership Agreement.

Print Name (First, Last)

Title

Initial

Signature

Michelle Meyer

Date