** 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)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For th	e 2020 calendar year, or tax year beginning and e	ending	_					
В	Check if applicat	C Name of organization INTERNATIONAL LEAGUE OF		D Employer identific	cation number				
Address change CONSERVATION PHOTOGRAPHERS									
F	Name chan			27-1455999					
	Initia returi	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number					
	Final			571-354-					
	termi ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	558,145.				
	Amer returi	nded ADITMCTON 17A 22202		H(a) Is this a group re	eturn				
	Appli	F Name and address of principal officer; DODAN NORTON		for subordinates					
	pend	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No				
		sempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	r 527	If "No," attach a	list. See instructions				
		te: ► WWW.CONSERVATIONPHOTOGRAPHERS.ORG		H(c) Group exemption					
		forganization: X Corporation Trust Association Other	L Year	of formation: 2009 N	f M State of legal domicile; $f DC$				
P	art I	Summary							
ø	1	Briefly describe the organization's mission or most significant activities: TO FU	JRTHER	ENVIRONMEN	TAL AND				
Activities & Governance		CULTURAL CONSERVATION THROUGH ETHICAL PHO							
ern	2	Check this box if the organization discontinued its operations or dispose	ed of more						
Š	3			3	12				
<u>«</u>	4	Number of independent voting members of the governing body (Part VI, line 1b) $_{\cdot\cdot}$			12				
ies	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			3				
Ĕ	6	Total number of volunteers (estimate if necessary)			13				
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.				
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····						
		Outside the second seconds (DestAM) Park 415		Prior Year 361,818.	Current Year 548,917.				
ine	8	Contributions and grants (Part VIII, line 1h)		9,106.	9,228.				
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.				
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,889.	0.				
	11 12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		374,813.	558,145.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	350,757.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
(0		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		122,199.	129,886.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
per	h	Total fundraising expenses (Part IX, column (D), line 25)	8.	<u> </u>					
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		233,659.	40,219.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		355,858.	520,862.				
	19			18,955.	37,283.				
Or Pos	3	·	Ве	ginning of Current Year	End of Year				
Net Assets or Find Ralances	20	Total assets (Part X, line 16)		115,720.	151,152.				
L Ass	21	Total liabilities (Part X, line 26)		100,162.	98,311.				
	22	Net assets or fund balances. Subtract line 21 from line 20		15,558.	52,841.				
	art II								
		alties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is				
true	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of whi	ch preparer	has any knowledge.					
		Observation of afficers		Data					
Sig	jn	Signature of officer		Date					
He	re	SUSAN NORTON, EXECUTIVE DIRECTOR							
		Type or print name and title		Oato I	II PTIN				
11.19.2021 If DO 1 6 0 9 2									
	parer	Firm's name JM&M	יוודיים	Firm's EIN >	52-1853933				
US	Only	Firm's address 10500 LITTLE PATUXENT PARKWAY, S COLUMBIA, MD 21044	OTTE	I	0-884-0220				
<u> </u>				Prione no.41					
Ma	y the	RS discuss this return with the preparer shown above? See instructions			X Yes No				

Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO FURTHER ENVIRONMENTAL AND CULTURAL CONSERVATION THROUGH ETHICAL
	PHOTOGRAPHY AND FILM.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 395,410 • including grants of \$ 350,757 •) (Revenue \$ 9,228 •)
	CONSERVATION PHOTOGRAPHY EXPEDITIONS & EDUCATION: EDUCATING THE PUBLIC
	ABOUT CRITICAL CONSERVATION ISSUES ALL OVER THE GLOBE USING THE POWER
	OF VISUAL COMMUNICATIONS, WHICH ARE THE PRODUCT OF THE ORGANIZATION'S
	CONSERVATION PHOTOGRAPHY EXPEDITIONS. THE OBJECTIVE OF THE EXPEDITIONS
	IS TO INTENSELY DOCUMENT AND PRODUCE A BODY OF IMAGES THAT FULLY
	CAPTURES THE THREATS AND OPPORTUNITIES FACED BY COMMUNITIES WHOSE
	PHYSICAL ENVIRONMENTS, ANIMAL OR PLANT POPULATIONS, AND/OR CULTURAL
	TRADITIONS ARE BEING IMPACTED, BOTH POSITIVELY AND NEGATIVELY, BY HUMAN
	ACTIVITY.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ \text{including grants of \$} \text{) (Revenue \$} \text{)}
4e	Total program service expenses ► 395,410.

4e Total program service expenses ▶

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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	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			7.7
_	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	_		x
^	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
3	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	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			x
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-		x
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		<u> </u>
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
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
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			177
	complete Schedule G, Part III	19		X
20a	· · · · · · · · · · · · · · · · · · ·	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	4 1	22	

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

Form 990 (2020)

Part IV | Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			\vdash
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	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		
25a	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		X
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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			١
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//	00-		X
00	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		X
31	contributions? If "Yes," complete Schedule M 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	31		
32	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			\Box
	1 1 .		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
С				
	(gambling) winnings to prize winners?	1c	X	

032004 12-23-20

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

2a Inter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, Idea of the calendary year ending who are within the year covered by this return b If at least one is reported on line 2a, did the organization field all required federal employment tax returner? Note: If the sum of lines 1 and 12a is grafer from 250, you may be required to e-fire (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a I any time during the calendar year, did the organization have an interest in, or a dignature or other authority over, a financial account in a foreign country fauch as a bank account, securities account, or other financial account in a foreign country fauch as a bank account, securities account, or other financial accounts (FBAR). See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). See Instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solid any contributions that were not tax deductibles or celebrated becomes that as a bank account to any contributions that were not tax deductibles or celebrated becomes that are committed to any contributions that were not tax deductibles or celebrated becomes that are committed to the organization include with every solicitation an express statement that such contributions or grifts were not tax deductibles or celebrated becomes that are contributions or personal benefit contributions or grifts were not tax deductibles or celebrated because the foreign and services provided? To Organizations that may receive deductible contributions under section 170(c). 10 If the organization receive a point were organization from the property of the replacement of the property of the property of the organization receive and the section 170 of the property of				Yes	No			
b If all least one is reported on line 2a, did the organization file all required to e-file (see instructions) Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business goes income of \$1,000 or more during the year? 3 Did the organization have unrelated business goes income of \$1,000 or more during the year? 3 A tary time during the celendary year, did the organization have an interest in, or a significant or other suthority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? 4 A tary time the name of the foreign country 5 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization aparty to a prohibited tax shelter fransaction at any time during the tax year? 5 Was the organization aparty to a prohibited tax shelter fransaction at any time during the tax year? 5 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles or enhancibutions? 5 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles or enhancibutions? 6 Was the organization shall be a contribution and express statement that such contributions or gifts were not tax deductibles? 7 Organizations that may receive deductible? 8 Was the organization receive a payment in excess of \$75 make party to goods and services provided to the payor? 7 To granizations that may receive deductible on the value of the goods or services provided? 7 To granizations that any receive deductible or the value of the goods or services provided? 8 Was the organization receive a payment in excess of \$75 make party than the payor to which it was required to the foreign that the payor than the payor than	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
Note: if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a		filed for the calendar year ending with or within the year covered by this return 2a 3						
3a X X bill the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3b 1f 'Yes,' in still field a Form 990-71 for this year of "Work of ine 83, provide an explanation on Schedule O 3b X X X X X X X X X	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X				
b If "Yes," has it filled a Form 990 T for this year? If "No" to line 3b, provide an explanation on Schedule O 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? 4b If "Yes," enter the name of the foreign country [Section 1] 5b If "Yes," enter the name of the foreign country [Section 1] 5c Holland State 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 Did any taxable party notify the organization file Form 8886-17. 5c If "Yes" to line Sa or Sb, did the organization file Form 8886-17. 5d 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? 6d Did the organization shall may receive deductible contributions an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess \$15^{\text{may}}\$ may be a party for goods and services provided? 7 To the "Yes," indicate the number of Forms \$2820 fleed during the year 8 Did the organization receive a payment in excess \$15^{\text{may}}\$ may be year 9 Did the organization receive any payment in excess \$15^{\text{may}}\$ and party as a contribution and party for goods and services provided to the payor? 7 To Did the organization receive any payment in excess \$15^{\text{may}}\$ as contribution of payment and the payment of Forms \$2820 fleed during the year 9 Did the organization received a contribution of cards to the year to the organization fleed to the payment of Forms \$2820 fleed during the year 1 Did the organization received an contribution of a divised typic organization fleed and payment of the payment of the payment of the payment		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
4a A lary time during the calendary year, dut 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)? 5a Was the organization and the foreign country ▶ 5a Was the organization aparty to a prohibite tax was real and the property of the problement of the foreign country ▶ 5a Was the organization aparty to a prohibite tax was real and the problement and the organization the organization the foreign Bank and Financial Accounts (FBAFI). 5a Was 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 or that device she carbitation contributions that was not act deductible as charitative contributions? 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not itax deductible? 6c Organizations that may receive deductible contributions under section 170(c). a bid the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7b Organizations that may receive deductible contributions under section 170(c). b) If "Yes," of the organization include with every solicitation and express statement that such contributions or grifts were not itax deductible the organization and party for goods and services provided to the payor? 7c Organizations that may receive a payment in excess of \$75 made party as a contribution of an advised that the payor and the organization receive a prostity the donor of the value of the goods or services provided? 7c If If Yes, indicate the number of forms \$822 filed during the year 9c Did the organization received a contribution of qualified intellectual property, of the organization file Form 5889 as required? 17d If The organization received a contribution of capable that the payor of the organizati	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X			
financial account in a foreign country (such as a bank account, securities account, or other financial account)? b if 1º Yes,** foreither the name of the foreign country ≥ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c □ 6a Does the organization are 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? 6b If 1º Yes,** did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles. 6c □ 7 Organization start many receive deductible contributions under section 170(c). 8d bif the organization receive a agament in excess of \$75 made party as a contribution of property for which it was required to life Form 8282? 8d If 1º Yes,** did the organization notify the donor of the value of the goods or services provided? 7b □ 8d If 1º Yes,** indicate the number of Forms 8282 filed during the year 9d If 1º Yes,** indicate the number of Forms 8282 filed during the year 9d If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-07 7c	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b					
b If Yes,* enter the name of the foreign country ► See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization of party to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes* to line Sa or 5b, did the organization fille Form 88867? 5c If Yes* to line Sa or 5b, did the organization fille Form 88867? 5c Describe 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? 5c Vine organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Vine organization start any receive deductible contributions under section 170(c). a Did the organization start may receive deductible contributions under section 170(c). a Did the organization notify the donor of the value of the goods or services provided? 5c Vine Form 8282? 5d Vine Good Prome Seed and uning the year 5d Vine Good Prome Seed any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d Vine Form 8282? 6d Vine organization received a contribution of qualified intellectual property, did the organization file a Form 1098 C? 8 Vine organization received a contribution of cars, bots, airplanes, or other vehicles, did the organization file a Form 1098 C? 8 Vine organization received a contribution of cars, bots, airplanes, or other vehicles, did the organization file a Form 1098 C? 9 Vine organization vehicles or shareholders 5 Vine organization vehicles or shareholders 5 Vine organization vehicles or shareholders 5 Vine organization vehicles or shareh	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
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16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			15		X			
If "Yes," complete Form 4720, Schedule O.					77			
	16		16		X			
		If "Yes," complete Form 4720, Schedule O.	F	000	(0000			

27-1455999 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X			
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						
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other						
	officer, director, trustee, or key employee?	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors, 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		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6		X			
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			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or						
~	persons other than the governing body?	7b		Х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а	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						
5	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
000	tion D. Follow (This occion B requests information about politics not required by the internal revenue code.)		Yes	No			
102	Did the organization have local chapters, branches, or affiliates?	10a	163	X			
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IUa					
D	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Ha					
12a	and the second s	12a	Х				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120					
С	Solved to Ohe William days	12c	х				
10		13	X				
13	Did the organization have a written whistleblower policy?	14	X				
14	Did the organization have a written document retention and destruction policy?	14	21				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
_		450	Х				
d	The organization's CEO, Executive Director, or top management official Other officers or key ampleyees of the organization	15a 15b	-22	Х			
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130					
16-							
ıoa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		Х			
L	taxable entity during the year?	16a		21			
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	4Ch					
800	exempt status with respect to such arrangements? tion C. Disclosure	16b					
17		0.6:21:	ı\ aı :=!!	ab!-			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3	s only) avail	able			
	for public inspection. Indicate how you made these available. Check all that apply.						
40	Own website Another's website X Upon request Other (explain on Schedule O)	-1 <i>e</i> :					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	a tinai	ncial				
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 ►SUSAN NORTON, EXECUTIVE DIRECTOR - 571-354-0248						
	4600 N. FAIRFAX DRIVE, 2ND FLOOR, ARLINGTON, VA 22203						
	FOOD NO LUTIVIUV DUTAR' VIND LINCOL' WUTTINGION' AV 77703						

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PHOTOGRAPHERS

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

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

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

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

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

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Form 990 (2020)

(A) Name and title	(B) (C) Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee)					than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SUSAN NORTON	40.00			٠,				75 000	0	2 705
EXECUTIVE DIRECTOR	F 00		_	Х	_		_	75,000.	0.	2,795.
(2) BUFFY REDSECKER	5.00	X		x				0.	0.	0.
CHAIR UNTIL JUNE	5.00	Α.	-	^	_		_	0.	0.	0.
(3) DR. JEFF DORMAN, VICE CHAIR UNTIL JUNE, THEN CHAIR	3.00	X		x				0.	0.	0.
(4) DECLAN MOORE, BOARD MEMBER	2.00	 	\vdash	 				•		
UNTIL JUNE, THEN VICE CHAIR		X		х				0.	0.	0.
(5) JOHN HARRINGTON	2.00									
SECRETARY		Х		Х				0.	0.	0.
(6) JIM DOUGHERTY	2.00									
TREASURER		Х		X				0.	0.	0.
(7) JOHN NUHN	2.00									_
BOARD MEMBER		Х						0.	0.	0.
(8) RICHARD STEINBERG	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(9) ROB LEE	2.00									
BOARD MEMBER		Х	<u> </u>	_				0.	0.	0.
(10) DANIELLE GUSTAFSON	2.00									0
BOARD MEMBER	1 0 00	Х	_	_				0.	0.	0.
(11) SARAH LEEN	2.00	.,							0	0
BOARD MEMBER AS OF JUNE	2 00	Х	_	_	_		_	0.	0.	0.
(12) MARK LUKES	2.00	x						0.	0.	0.
BOARD MEMBER AS OF JUNE (13) MICHELE WESTMORLAND	2.00	^						0.	0.	0.
BOARD MEMBER AS OF JUNE	4.00	X						0.	0.	0.
(14) JASON OKAZAKI	2.00	122	\vdash		\vdash			0.	0.	
BOARD MEMBER AS OF JUNE	2.00	X						0.	0.	0.
		_								
		1								
020007 10 02 00	<u>'</u>	_	_		_	_				Form 990 (2020)

Form **990** (2020)

INTERNATIONAL LEAGUE OF 27-1455999 CONSERVATION PHOTOGRAPHERS Form 990 (2020) Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (A) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations ndividual trustee or directo the compensation hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization organizations and related below organizations line) 75,000. 0. 1b Subtotal 0. 0. c Total from continuation sheets to Part VII, Section A 75,000. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 0 compensation from the organization Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual X 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) (A) (B) Name and business address NONE Description of services Compensation

Form 990 (2020)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form 990 (2020)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 24,265. **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d 20,832. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 503,820. similar amounts not included above 1f 1g \$ g Noncash contributions included in lines 1a-1f 548,917. h Total. Add lines 1a-1f **Business Code** 541900 3,660. 3,660. 2 a LICENSING FEE Program Service Revenue b PROGRAM EVENTS 3,068. 900099 3,068. 900099 SPEAKERS BUREAU REFERR 2,500. 2,500. f All other program service revenue 9,228. g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 7a **b** Less: cost or other basis Other Revenue 7b and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses _____ c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code Miscellaneous** 11 a d All other revenue e Total. Add lines 11a-11d 9,228. 558,145.

Total revenue. See instructions

Part IX | Statement of Functional Expenses

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

Do	not include amounts reported on lines 6b,	se or note to any line in	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	244 420	244 420		
_	and domestic governments. See Part IV, line 21	344,430.	344,430.		
2	Grants and other assistance to domestic	6 227	6 227		
_	individuals. See Part IV, line 22	6,327.	6,327.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	77,795.	21,432.	56,363.	
•	trustees, and key employees	11,190.	21,432.	30,303.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	44,003.	12,575.	31,428.	
7	Other salaries and wages	44,003.	14,313.	JI,440.	
8	Pension plan accruals and contributions (include				
^	section 401(k) and 403(b) employer contributions)	469.		469.	
9	Other employee benefits	7,619.		7,619.	
10	Payroll taxes	1,019.		1,019.	
11	Fees for services (nonemployees):				
	Management				
b	5 ·····	1,500.		1,500.	
C	5 ······	1,500.		1,500.	
	Lobbying Professional fundraising convices. See Part IV, line 17				
e	Professional fundraising services. See Part IV, line 17 Investment management fees				
f	// / L 100/ 11 05 F				
g	column (A) amount, list line 11g expenses on Sch 0.)	14,424.	1,826.	2,271.	10,327
12	Advertising and promotion	11,121.	1,020	2,211.	10,527
13	Office expenses	2,403.	813.	773.	817
14	Information technology	900.	0201	900.	
15	Royalties	3000		3000	
16	Occupancy	5,985.		5,985.	
17	Travel	4,594.	3,238.	75.	1,281
18	Payments of travel or entertainment expenses		7,200		
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	31.	31.		
20	Interest			+	
21	Payments to affiliates			+	
22	Depreciation, depletion, and amortization	141.		141.	
23	Insurance	1,033.		1,033.	
24	Other expenses. Itemize expenses not covered	-,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	SUBSCRIPTION FEES	3,596.	971.	1,542.	1,083
b	IMAGES/MUSIC LICENSES	3,200.	3,200.	,	,
c	STORAGE FEES	1,699.	.,	1,699.	
d	REGISTRATION	575.	567.	8.	
e		138.		138.	
25	Total functional expenses. Add lines 1 through 24e	520,862.	395,410.	111,944.	13,508
26	Joint costs. Complete this line only if the organization	,	,	·	•
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2020)

Ра	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to a	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	113,416.	1	147,449.		
	2	Savings and temporary cash investments	119.	2	59.		
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,150.	4	2,750.
	5	Loans and other receivables from any currer					
		trustee, key employee, creator or founder, su	ubstantial	contributor, or 35%			
		controlled entity or family member of any of	sons		5		
	6	Loans and other receivables from other disq	ualified pe	ersons (as defined			
		under section 4958(f)(1)), and persons descr	ibed in se	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			800.	9	800.
	10a	Land, buildings, and equipment: cost or other	1				
		basis. Complete Part VI of Schedule D	10a	13,411.			
	b	Less: accumulated depreciation			235.	10c	94.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, li	ne 11			12	
	13	Investments - program-related. See Part IV, I	ne 11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must			115,720.	16	151,152.
	17	Accounts payable and accrued expenses	99,862.	17	98,311.		
	18	Grants payable				18	
	19	Deferred revenue			300.	19	
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Comple	ete Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or	ormer off	icer, director,			
Liabilities		trustee, key employee, creator or founder, su	ubstantial	contributor, or 35%			
jab		controlled entity or family member of any of				22	
_	23	Secured mortgages and notes payable to ur				23	
	24	Unsecured notes and loans payable to unrel				24	
	25	Other liabilities (including federal income tax	, payables	to related third			
		parties, and other liabilities not included on I	ines 17-24	I). Complete Part X			
		of Schedule D			100 160	25	00 211
	26	Total liabilities. Add lines 17 through 25			100,162.	26	98,311.
S		Organizations that follow FASB ASC 958,	check he	re 🕨 🔼			
nce		and complete lines 27, 28, 32, and 33.			15 550		EO 041
ala	27	Net assets without donor restrictions			15,558.	27	52,841.
ф	28	Net assets with donor restrictions				28	
Ë		Organizations that do not follow FASB AS	C 958, ch	eck here			
٥٠		and complete lines 29 through 33.					
)ts	29	Capital stock or trust principal, or current fur				29	
SS	30	Paid-in or capital surplus, or land, building, o				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulate			15 550	31	F2 0/11
ž	32	Total net assets or fund balances			15,558.	32	52,841.
	33	Total liabilities and net assets/fund balances			115,720.	33	151,152.

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Act and OMB Circular A-133?

Both consolidated and separate basis

1

2 3

4

5

6

8

10

Part XI Reconciliation of Net Assets

consolidated basis, or both: Separate basis

Consolidated basis

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

	INTERNATIONAL LEAGUE OF									
rm	m 990 (2020) CONSERVATION PHOTOGRAPHERS 27-145									
a	rt XI Reconciliation of Net Assets									
	Check if Schedule O contains a response or note to any line in this Part XI									
l	Total revenue (must equal Part VIII, column (A), line 12)	1		8,1						
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,8						
3	Revenue less expenses. Subtract line 2 from line 1	3		7,2						
ŀ	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	5,5	58.					
5	Net unrealized gains (losses) on investments	5								
6	Donated services and use of facilities	6								
,	Investment expenses	7								
3	Prior period adjustments 8									
)	Other changes in net assets or fund balances (explain on Schedule O)									
)	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,									
	column (B))	10	5	2,8	41.					
a	rt XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII									
				Yes	No					
	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	О.								
a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X					
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d 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		X					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	e basis,								

Form 990 (2020)

X

2c

За

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 27-1455999

Name of the organization INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

Pa	πı	Reason for Public (Snarity Status.	(All organizations must c	omplete th	nis part.) S	see instructions.				
he	organ	ization is not a private found	ation because it is: (For lines 1 through 12, c	heck only	one box.)					
1		A church, convention of ch	urches, or association	on of churches described	d in sectio	n 170(b)(1)(A)(i).				
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)									
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4		A medical research organiz	ation operated in co	njunction with a hospital	described	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,			
		city, and state:									
5		An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a g	overnmental unit describ	ped in			
		section 170(b)(1)(A)(iv). (C	complete Part II.)								
6		A federal, state, or local gov	vernment or governn	nental unit described in :	section 17	70(b)(1)(A)	(v).				
7	X	An organization that norma	lly receives a substa	intial part of its support f	rom a gov	ernmental	unit or from the general	public described in			
		section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a land-grant	college			
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of the colleg	e or			
		university:									
10		An organization that norma	lly receives (1) more	than 33 1/3% of its sup	port from o	contributio	ons, membership fees, a	nd gross receipts from			
		activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more than	n 33 1/3% of its support	from gross investment			
		income and unrelated busin	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.			
		See section 509(a)(2). (Cor	mplete Part III.)								
11		An organization organized a	and operated exclus	ively to test for public sa	fety. See	section 50)9(a)(4).				
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform t	the functio	ons of, or to carry out the	e purposes of one or			
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section :	509(a)(2).	See section 509(a)(3). (Check the box in			
		lines 12a through 12d that	describes the type o	of supporting organizatio	n and com	nplete lines	s 12e, 12f, and 12g.				
а		Type I. A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s), typically by	giving giving			
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the s	supporting			
		organization. You must o	omplete Part IV, Se	ections A and B.							
b		Type II. A supporting org	anization supervised	d or controlled in connec	tion with it	s support	ed organization(s), by ha	iving			
		control or management o	f the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	ported			
		organization(s). You mus	t complete Part IV,	Sections A and C.							
С		Type III functionally inte	grated. A supporting	g organization operated	in connec	tion with,	and functionally integrate	ed with,			
		its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.				
d		Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organi	zation(s)			
		that is not functionally int	egrated. The organiz	zation generally must sat	isfy a dist	ribution re	quirement and an attent	iveness			
		requirement (see instruct									
е		Check this box if the orga					a Type I, Type II, Type III				
		functionally integrated, or	* *	nally integrated support	ing organiz	zation.					
		er the number of supported of	•								
g		ride the following information i) Name of supported	about the supporte	d organization(s).	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other			
	,	organization	(11) 2.11	(described on lines 1-10	in your governi Yes	ng document? No	support (see instructions)	support (see instructions)			
		-		above (see instructions))	103	140					

Schedule A (Form 990 or 990-EZ) 2020 CONSERVATION PHOTOGRAPHERS

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	359,037.	433,310.	194,143.	361,818.	548,917.	1897225.				
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										
4	Total. Add lines 1 through 3	359,037.	433,310.	194,143.	361,818.	548,917.	1897225.				
	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)						247,310.				
6	Public support. Subtract line 5 from line 4.						1649915.				
	tion B. Total Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total				
7	Amounts from line 4	359,037.	(b) 2017 433,310.	194,143.	361,818.	548,917.	1897225.				
	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,										
	and income from similar sources	12.	22.				34.				
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.)		4,305.	291.	3,889.		8,485.				
11	Total support. Add lines 7 through 10						1905744.				
	Gross receipts from related activities,	etc. (see instruction	ons)			12	122,666.				
	First 5 years. If the Form 990 is for the	•	,	fourth, or fifth tax	vear as a section 5		<u> </u>				
	organization, check this box and stor	_			-						
Sec	ction C. Computation of Publ						ŕ				
14	Public support percentage for 2020 (line 6, column (f), c	livided by line 11,	column (f))		14	86.58 %				
	Public support percentage from 2019					15	76.22 %				
	33 1/3% support test - 2020. If the					nore, check this bo	x and				
	stop here. The organization qualifies	-					ightharpoons X				
b	33 1/3% support test - 2019. If the						nis box				
	and stop here. The organization qual						ightharpoons				
17a	10% -facts-and-circumstances tes						or more,				
	and if the organization meets the fact										
	meets the facts-and-circumstances to			-	•						
b	10% -facts-and-circumstances tes	-			-		10% or				
~	more, and if the organization meets the						y =				
	organization meets the facts-and-circ				-						
18					, , ,		s				
		8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions									

Schedule A (Form 990 or 990-EZ) 2020

INTERNATIONAL LEAGUE OF Schedule A (Form 990 or 990-EZ) 2020 CONSERVATION PHOTOGRAPHERS

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

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

5e	ction A. Public Support	, ,	,				
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and	. ,	, ,	, ,	.	, ,	,,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
Ü	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						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	n Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
	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.)						
	assets (Explain in Part VI.)						
	assets (Explain in Part VI.)	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
14	assets (Explain in Part VI.)				•	501(c)(3) organizat	
14 Sec	assets (Explain in Part VI.)	c Support Pe	rcentage				
14 Sec	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2020 (line	c Support Pe	ercentage divided by line 13,	column (f))	-	15	<u>%</u>
14 Sec 15 16	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2020 (line Public support percentage from 2019)	c Support Pene 8, column (f), c	rcentage divided by line 13,	column (f))	-		<u>▶□</u>
14 Sec 15 16 Sec	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Ction C. Computation of Public Public support percentage from 2019 Public support percentage from 2019 Ction D. Computation of Inves	c Support Pe ne 8, column (f), c Schedule A, Part tment Incom	rcentage divided by line 13, III, line 15	column (f))		15 16	% %
14 Sec 15 16 Sec 17	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2020 (line Public support percentage from 2019 ction D. Computation of Investment income percentage for 2020 (line Public support percentage from 2019 ction D. Computation of Investment income percentage for 2020 (line Public support percentage from 2019 ction D. Computation of Investment income percentage for 2020 (line Public support percentage from 2019 ction D. Computation of Investment income percentage for 2020 (line Public support percentage for 2020 (line Publ	c Support Pene 8, column (f), conscious Schedule A, Part tment Incom (20 (line 10c, column)	divided by line 13, III, line 15 Percentage mn (f), divided by I	column (f))ine 13, column (f))		15 16	% %
14 Sec 15 16 Sec 17 18	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2020 (line Public support percentage from 2019 ction D. Computation of Investment income percentage from 2020 (Investment income percentage from 2020 (Investment income percentage from 2020)	c Support Pene 8, column (f), consideration (f), consideration (f), column (f)	divided by line 13, III, line 15	column (f))ine 13, column (f))		15 16 17 18	% % %
14 Sec 15 16 Sec 17 18	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2020 (line Public support percentage from 2019 ction D. Computation of Investment income percentage from 2019 Investment income percentage from 2013 1/3% support tests - 2020. If the control of the support tests - 2020. If the control of the support tests - 2020. If the control of the support tests - 2020.	c Support Pene 8, column (f), of Schedule A, Part tment Incomo (line 10c, column 19 Schedule A, prganization did response to the schedule A, prganization di	divided by line 13, III, line 15 e Percentage mn (f), divided by I Part III, line 17 not check the box	column (f)) ine 13, column (f)) on line 14, and line	e 15 is more than	15 16 17 18 33 1/3%, and line 1	% % %
14 Sec 15 16 Sec 17 18 19a	rist 5 years. If the Form 990 is for the check this box and stop here Ction C. Computation of Public Public support percentage for 2020 (ling Public support percentage from 2019 ction D. Computation of Investment income percentage from 2020 (ling Public support percentage from 2019 ction D. Computation of Investment income percentage from 2020 (ling Public support percentage from 2020) (ling s	c Support Pene 8, column (f), of Schedule A, Part tment Incomo (line 10c, columo 19 Schedule A, proganization did redstop here. The	rcentage divided by line 13, III, line 15 Percentage mn (f), divided by I Part III, line 17 not check the box organization quali	column (f)) ine 13, column (f)) on line 14, and line	e 15 is more than supported organiz	15 16 17 18 33 1/3%, and line 1	% % % 17 is not
14 Sec 15 16 Sec 17 18 19a	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here ction C. Computation of Public Public support percentage for 2020 (line Public support percentage from 2019 ction D. Computation of Investment income percentage from 2019 Investment income percentage from 2013 1/3% support tests - 2020. If the control of the support tests - 2020. If the control of the support tests - 2020. If the control of the support tests - 2020.	c Support Pe ne 8, column (f), o Schedule A, Part tment Incom 0 (line 10c, colum 0 19 Schedule A, organization did r d stop here. The organization did r	divided by line 13, III, line 15 Percentage mn (f), divided by I Part III, line 17 not check the box organization qualinot check a box or	column (f)) ine 13, column (f)) on line 14, and line fies as a publicly s	e 15 is more than supported organiz a, and line 16 is m	15 16 17 18 33 1/3%, and line 1 ation ore than 33 1/3%,	% % % 17 is not

INTERNATIONAL LEAGUE OF Schedule A (Form 990 or 990-EZ) 2020 CONSERVATION PHOTOGRAPHERS

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

INTERNATIONAL LEAGUE OF Schedule A (Form 990 or 990-EZ) 2020 CONSERVATION PHOTOGRAPHERS

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of on			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officetors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	cers,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among	I		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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,	2		
	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
0001	tion of Type in Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	NO
	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		
	tion D. All Type III Supporting Organizations			<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	tion E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instru	ctions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	. (aaa inatuustia	nal	
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	(see mstructio		No
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	trustees of each of the supported organizations? If "Yes" or "No" 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 "Ves " describe in Part VI the role played by the organization in this regard	3h		

Schedule A (Form 990 or 990-EZ) 2020 CONSERVATION PHOTOGRAPHERS

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations			
1	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	st 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 0.015 of line 3 (for greater amount,					
	see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 0.035.	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, column A)	1				
2	Enter 0.85 of line 1.	2				
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3				
4	Enter greater of line 2 or line 3.	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functional	ally integrate	d Type III supporting org	ganization (see		
	instructions)					

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 CONSERVATION PHOTOGRAPHERS

Part V Type III Non-Eurotionally Integrated 509(a)(3) Supporting Organization

Pai	t v Type III Non-Functionally Integrated 509	<u>ແລງເຈງ Supporting Org</u>	anizations _{(continu}	ıed)				
Secti	ction D - Distributions Current Year							
1	Amounts paid to supported organizations to accomplish exe		1					
2	Amounts paid to perform activity that directly furthers exempt							
	organizations, in excess of income from activity	2						
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	3				
4	Amounts paid to acquire exempt-use assets			4				
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5				
6	Other distributions (describe in Part VI). See instructions.			6				
7	Total annual distributions. Add lines 1 through 6.			7				
8	Distributions to attentive supported organizations to which the	he organization is responsiv	е					
	(provide details in Part VI). See instructions.			8				
9	Distributable amount for 2020 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount			10				
		(i)	(ii)		(iii)			
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2020	าร	Distributable Amount for 2020			
1	Distributable amount for 2020 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2020 (reason-							
	able cause required - explain in Part VI). See instructions.							
3	Excess distributions carryover, if any, to 2020							
a	From 2015							
b	From 2016							
С	From 2017							
d	From 2018							
e	From 2019							
f	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
h	Applied to 2020 distributable amount							
i_	Carryover from 2015 not applied (see instructions)							
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2020 from Section D,							
	line 7: \$							
а	Applied to underdistributions of prior years							
b	Applied to 2020 distributable amount							
С	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2021. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
а	Excess from 2016							
b	Excess from 2017							
С	Excess from 2018							
	Excess from 2019							

Schedule A (Form 990 or 990-EZ) 2020

e Excess from 2020

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: REIMBURSED PROGRAM EXPENSES AND OTHER 4,305. 2017 AMOUNT: \$ 2018 AMOUNT: 291. 2019 AMOUNT: 3,889.

Part VI

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **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

2020

Name of the organization

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

Employer identification number

27-1455999

Organization type (check one):							
Filers of: Section:							
Form 99	0 or 990-EZ	\overline{X} 501(c)($\overline{3}$) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	, 0	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General	Rule						
	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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						
but it m u	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 ne filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA 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) (2020)

Name of organization
INTERNATIONAL LEAGUE OF
CONSERVATION PHOTOGRAPHERS

Employer identification number

27-1455999

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$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
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Nume, address, and 2n + 4	\$ 12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	* 12,500.	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		\$\$	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
	Name, audi 635, aliu Zif 7 7	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
INTERNATIONAL LEAGUE OF
CONSERVATION PHOTOGRAPHERS

Employer identification number

27-1455999

art II	Noncash Property (see instructions). Use duplicate copies of Pa	art II II additional space is needed.	1
(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
		_	
	20		990 990-F7 or 99

Name of organization
INTERNATIONAL LEAGUE OF
CONSERVATION PHOTOGRAPHERS

Employer identification number

27-1455999

Part III				501(c)(7), (8), or (10) that total more than \$1,000 for the year		
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, or	through (e) and the following the contributions of f	ng line entry. For d	organizations		
	Use duplicate copies of Part III if additional	space is needed.	or, out or less for the			
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ıift	(d) Description of how gift is held		
Part I	(2) 1 (1) 2000 01 9.11	(0) 000 0. 9	,	(a) Boostiphen of non-girt to note		
		(e) Transf	er of gift			
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee		
(a) No. from Part I	(h) Dumage of gift	(a) Llag of a	.:41	(d) Description of how gift is hold		
Part I	(b) Purpose of gift	(c) Use of g	Jii C	(d) Description of how gift is held		
			_			
		(e) Transf	er of gift			
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee		
Ī						
(a) No. from	(1) D	() ! ! . ((05)		
Part I	(b) Purpose of gift	(c) Use of g	утт	(d) Description of how gift is held		
			_			
			_			
			_			
		(e) Transf	sfer of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of g		(d) Description of how gift is held		
Part I	(b) Ful pose of gift	(c) Use of g	jiit	(a) Description of now girt is field		
		(e) Transf	er of gift			
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee		
Γ						
			_			

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

Employer identification number 27-1455999

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose cor	nferring
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of a h	istorically important land area
	Protection of natural habitat	Preservation of a c	ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form of a	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		2a
	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing conserv	ation easements during the year
7	Amount of our areas in a word in month wine, in an action, how		
7	Amount of expenses incurred in monitoring, inspecting, hand > \$	uling of violations, and enforcing conservation	easements during the year
8	Does each conservation easement reported on line 2(d) above	to estisfy the requirements of section 170/h)/	AVPVi)
0	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati		
5	balance sheet, and include, if applicable, the text of the foot	·	
	organization's accounting for conservation easements.	Total to the organization of interioral statements	s that accombos the
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and	balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in furth	erance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these items.	·
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and bala	ance sheet works of
	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:		•
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under FASB A	-	
а	Revenue included on Form 990, Part VIII, line 1		• \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2020

032051 12-01-20

Par	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, o	or Othe	r Similar	Asse	ts (contin	nued)
3	Using the organization's acquisition, accession	on, and other record	ls, checl	k any of the	following tha	at make si	gnificant us	e of its	;	
	collection items (check all that apply):									
а	Public exhibition	d		Loan or exc	hange progra	am				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizati	ion's exen	npt purpose	in Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	asures, or oth	er similar	assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	the orga	nization's c	ollection?			<u> </u>	Yes	☐ No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered	"Yes" on	Form 990, F	art IV,	line 9, or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contributior	ns or other as	ssets not i	ncluded		_	
	on Form 990, Part X?							L	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII									
									Amount	t
С	Beginning balance						1c			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Fo							C	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanatio	n has been	n provided on	Part XIII				
Par	t V Endowment Funds. Complete it	f the organization ar	swered	"Yes" on Fo	orm 990, Parl	t IV, line 1	0.			
		(a) Current year	(b) P	rior year	(c) Two year	rs back (d) Three year	rs back	(e) Four	years back
1a	Beginning of year balance									
	Contributions									
	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	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 baland	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
	· · · · · · · · · · · · · · · · · · ·	 %								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	and administe	ered for th	e organizati	ion		
	by:	•					Ü			Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations									
b	If "Yes" on line 3a(ii), are the related organiza									
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990	0, Part I\	/, line 11a. S	See Form 990	D, Part X, I	line 10.			
	Description of property	(a) Cost or o			t or other		cumulated		(d) Book	k value
	,	basis (investr	ment)	basis	(other)	dep	reciation		. ,	
	Land									
	Buildings							\neg		
	Leasehold improvements							\top		
	Equipment			1	3,411.		13,317	7.		94.
	Other						-	\top		
	. Add lines 1a through 1e. (Column (d) must e		X. colun	nn (B). line 1	10c.)			_		94.

Schedule D (Form 990) 2020

		e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
Financial derivatives			
Closely held equity interests			
Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
	on Form 990 Part IV line	e 11d. See Form 990. Part X. line 15	
Complete if the organization answered "Yes" or		11d. See Form 990, Part X, line 15.	(b) Book value
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organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII...

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032053 12-01-20

Schedule D (Form 990) 2020

Pai	rt XI Reconciliation of Revenue per Audited Financia	Statements With Revenu	e per Return.	
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statement	:s	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, lines VIII December 11 and 12 and 14 and 15 and 15 and 15 and 16			
Pa	rt XII Reconciliation of Expenses per Audited Financia	•	ses per neturn.	
	Complete if the organization answered "Yes" on Form 990, Part		1.1	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities			
b	Prior year adjustments			
C	Other losses			
d	Other (Describe in Part XIII.)	***************************************	20	
е 3	Add lines 2a through 2d			
4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
+ a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
	Total expenses. Add lines 3 and 4c. (<i>This must equal Form</i> 990, <i>Part I</i> , I			
	rt XIII Supplemental Information.	#10 TG.)		
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	and 4: Part IV. lines 1b and 2b: Pa	art V. line 4: Part X. line 2: Part	XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to prov		, , , ,	,
	, , , , , , , , , , , , , , , , , , , ,	•		

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

e United States 990, Part IV, line 21 or 22.

OMB No. 1545-0047	2020	Open to Public	Inspection
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Employer identification number

Attach to Form 990.Go to www.irs.gov/Form990 for the latest information.

INTERNATIONAL LEAGUE

Name of the organization

Department of the Treasury

Internal Revenue Service

å 27-1455999 ENHANCE AWARENESS OF THE /ALUES AND VULNERABILITY TLANTIC COAST PIPELINE NO WATER NO LIFE - TO (h) Purpose of grant OF GLOBAL FRESHWATER or assistance XYes ATH OF PANTHER PATH OF PANTHER Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any UMA PICTURES EXPEDITION Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Ö Ö Ö 0 Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 500 562 500 42,444 208,965 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ω, 13, 99 (c) IRC section (if applicable) CONSERVATION PHOTOGRAPHERS 501(C)(3) Enter total number of other organizations listed in the line 1 table N/A N/A N/A N/A 82-1524592 85-2323299 32-0319812 26-0172999 83-1297452 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization SUITE 301 SUITE 172 or government 212 S. WALLASE STREET, ALLEGHANY- BLUE RIDGE 330 EAST 79TH STREET CORAL & OAK STUDIOS NEW YORK, NY 10075 MONTEREY, VA 24465 GRIZZLY CREEK FILM BOSEMAN, MT 59715 NO WATER NO LIFE TAMPA, FL 33606 301 W PRATT ST, SACO, ME 04072 120 HEATH ROAD FLORIDA WILD P.O. BOX 96 Part I

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2020

Page 2

Schedule I (Form 990) 2020 CONSERVATION PHOTOGRAPHERS

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FISCAL SPONSORSHIP	Н	6,327.	.0		
Part IV Supplemental Information. Provide the information required in	uired in Part I, lin	e 2; Part III, column	Part I, line 2; Part III, column (b); and any other additional information.	dditional information.	
PART I, LINE 2:					
AMOUNTS GRANTED TO ORGANIZATIONS A	AND INDIV	INDIVIDUALS ARE	PASS-THROUGH	UGH GRANTS	
FOR FISCALLY SPONSORED PROGRAMS.					
PART II, LINE 1, COLUMN (H):					
NAME OF ORGANIZATION OR GOVERNMENT:	: NO WATER	ER NO LIFE			
(H) PURPOSE OF GRANT OR ASSISTANCE:	: NO WATER	ER NO LIFE	- TO ENHANCE	NCE	
AWARENESS OF THE VALUES AND VULNERABILITY OF	ABILITY (GLOBAL FRESHWATER	RESOURCES.	

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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

OMB No. 1545-0047

Inspection

Name of the organization

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

Employer identification number 27-1455999

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

EXCEPT AS OTHERWISE REQUIRED BY LAW OR THE BYLAWS, THE EXECUTIVE COMMITTEE SHALL HAVE THE POWER TO AUTHORIZE THE SEAL OF THE ASSOCIATION TO BE AFFIXED TO ALL PAPERS WHICH MAY REQUIRE IT AND SHALL EXERCISE THE AUTHORITY OF THE BOARD OF DIRECTORS IN THE MANAGEMENT AND SUPERVISION OF THE ASSOCIATION; THAT THE EXECUTIVE COMMITTEE SHALL NOT HAVE THE PROVIDED, HOWEVER, AUTHORITY OF THE BOARD OF DIRECTORS IN REFERENCE TO AMENDING, ALTERING OR REPEALING THE BYLAWS; ADOPTING A PLAN OF MERGER OR ADOPTING A PLAN OF CONSOLIDATION WITH ANOTHER CORPORATION; AUTHORIZING THE SALE, LEASE, EXCHANGE OR MORTGAGE OF ALL OR SUBSTANTIALLY ALL OF THE PROPERTY AND ASSETS THE ASSOCIATION; OR AMENDING, ALTERING OR REPEALING ANY RESOLUTION OF THE BOARD OF DIRECTORS WHICH BY ITS TERMS PROVIDES THAT IT SHALL NOT BE ALTERED OR REPEALED BY SUCH COMMITTEE.

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

THE EXECUTIVE DIRECTOR REVIEWS AND SIGNS THE FORM 990 PRIOR TO SUBMISSION.

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

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.

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

THE ORGANIZATION UTILIZES A COMPENSATION SURVEY OR STUDY TO DETERMINE THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS	Employer identification number 27-1455999
EXECUTIVE DIRECTOR'S COMPENSATION. THE COMPENSATION IS TH	
BOARD OF DIRECTORS. THE MOST RECENT COMPENSATION REVIEW W	AS IN APRIL OF
2021.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FORM 9	90 AVAILABLE TO
THE PUBLIC UPON WRITTEN REQUEST.	