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Form **990**

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
2018

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

and ending A For the 2018 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number INTERNATIONAL LEAGUE OF X Address change CONSERVATION PHOTOGRAPHERS Name change 27-1455999 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Final return/ 571-354-0248 4600 N. FAIRFAX DRIVE, 7TH FLOOR termin-ated 200,574. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return ARLINGTON, VA 22203 H(a) Is this a group return Applica-F Name and address of principal officer: SUSAN NORTON Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status: X = 501(c)(3) = 501(c)(insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.CONSERVATIONPHOTOGRAPHERS.ORG **H(c)** Group exemption number ▶ **K** Form of organization: X Corporation Trust Association L Year of formation: 2009 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: TO FURTHER ENVIRONMENTAL AND Activities & Governance CULTURAL CONSERVATION THROUGH ETHICAL PHOTOGRAPHY AND FILM. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 11 Number of voting members of the governing body (Part VI, line 1a) <u>11</u> Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) <u>11</u> 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 38 7b **Prior Year Current Year** 433,310. 194,143. Contributions and grants (Part VIII, line 1h) Revenue 7,061. 6,140. Program service revenue (Part VIII, line 2g) 22. 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 291. 4,306. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 444,699. 200.574. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Ō. Benefits paid to or for members (Part IX, column (A), line 4) 123,768. 114,037. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 354,600. 99,438. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 478,368. 213,475. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -33,669. -12,901. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 133,156. 32,643. 20 Total assets (Part X, line 16) 36,265. 123,877. 21 Total liabilities (Part X, line 26) -3,622. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign SUSAN NORTON, EXECUTIVE DIRECTOR Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature Paid DAVID JONES P01361002 Firm's name JONES, MARESCA & MCQUADE, P.A. 52-1853933 Preparer Firm's EIN ▶ Firm's address 10500 LITTLE PATUXENT PARKWAY, Use Only Phone no. 410 - 884 - 0220 COLUMBIA, MD 21044 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

Га	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.
	Did the constant of the consta
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$95,614 \cdot including grants of \$) (Revenue \$\$ 6,140 \cdot
4a	(Code:) (Expenses \$ 95,614 · including grants of \$) (Revenue \$ 6,140 · 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.
	ACTIVITI:
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
70	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$\frac{\text{including grants of \$}}{\text{10 program service expenses}} \) (Revenue \$\text{\$}\) Total program service expenses \$\text{\$}\
4e	Total program service expenses ► 95,614.
	10111330 (201

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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			x
الم	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			7.7
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	405		Х
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140		
	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		х
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		х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	7 1	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			v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

Form 990 (2018)

Part IV Checklist of Required Schedules (continued)

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 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	x x
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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	x
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 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	X
Schedule J 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	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	X
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	
Schedule K. If "No," go to line 25a	
b Did the erganization invost any proceeds of tax exempt heads beyond a temperary period exemption?	
c Did the organization minest any proceeds or tax-exempt bonds beyond a temporary period exception?	X
any tax-exempt bonds?	X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	Х
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	Х
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	
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	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	
former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	
complete Schedule L, Part II	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	37
of any of these persons? If "Yes," complete Schedule L, Part III	X
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):	Х
 a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a 	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	Х
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	Х
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	
contributions? If "Yes," complete Schedule M	X
31 Did the organization liquidate, terminate, or dissolve and cease operations?	
If "Yes," complete Schedule N, Part I	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	
Schedule N, Part II	X
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	37
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	X
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	Х
Part V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a	X
b 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	
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	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	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	
Part 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	<u> </u>
Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5 b. Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 5 b. Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 5 b.	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	
(gambling) winnings to prize winners? 1c X	

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

				Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a 4							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2 b	Х					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			Х				
	a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes." has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O								
	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in 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 in a foreign country (such as a bank account, securities account, or other financial account)?								
b	If "Yes," enter the name of the foreign country:								
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	· ·	_		Х				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b 5c						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		50						
Va	any contributions that were not tax deductible as charitable contributions?		6a		x				
h	If "Yes," did the organization include with every solicitation an express statement that such contribut		ua						
b	were not tax deductible?		6b						
7	Organizations that may receive deductible contributions under section 170(c).		0.0						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the pavor?	7a		Х				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	to file Form 8282?		7с		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontract?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	7f		Х				
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as required?	7g						
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the							
			8						
9	Sponsoring organizations maintaining donor advised funds.		_						
а			9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b						
10	Section 501(c)(7) organizations. Enter:	100							
a	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b							
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	100							
	Gross income from members or shareholders	11a							
	Gross income from other sources (Do not net amounts due or paid to other sources against								
-	amounts due or received from them.)	11b							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?		13a						
	Note. See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans	13b							
С	Enter the amount of reserves on hand	13c							
14a	· · · · · · · · · · · · · · · · · · ·		14a		X				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				37				
	excess parachute payment(s) during the year?		15		X				
40	If "Yes," see instructions and file Form 4720, Schedule N.	t in a second	40		Х				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?	16		_^				
	If "Yes," complete Form 4720, Schedule O.		Form	990	(2010)				

Form **990** (2018)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	and the designing Dody and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 11		100	110
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
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:	7.5		
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	0.0		
5	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	tion Division (This cooling Dioquesic information about periode net required by the internal riorenae code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
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	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
_	in Schedule O how this was done	12c		Х
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only	availa	able
	for public inspection. Indicate how you made these available. Check all that apply.	,		
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	SUSAN NORTON, EXECUTIVE DIRECTOR - 571-354-0248			
	4600 N. FAIRFAX DRIVE, 7TH FLOOR, ARLINGTON, VA 22203			

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Form 990 (2018) CONSERVATION PHOTOGRAPHERS 27-1 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

(A) Name and Title	(B) Average hours per week	Position (do not check more than one box, unless person is both ar 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) BUFFY REDSECKER	5.00	,,		77				0	0	0
CHAIR	2 00	Х		Х				0.	0.	0.
(2) DR. JEFF DORMAN	2.00	x		х				0.	0.	0 .
VICE CHAIR (3) JOHN HARRINGTON	2.00	^		Λ				0.	0.	0
SECRETARY	2.00	X		х				0.	0.	0 .
(4) JIM DOUGHERTY	2.00	25		22				0.	0.	
TREASURER	2700	x		х				0.	0.	0 .
(5) CONNIE BRANSILVER	2.00							0.0		
BOARD MEMBER		х						0.	0.	0
(6) JOHN NUHN	2.00							-		-
BOARD MEMBER		Х						0.	0.	0 .
(7) RICHARD STEINBERG	2.00									
BOARD MEMBER		Х						0.	0.	0 .
(8) BALAN MADHAVEN	2.00									
BOARD MEMBER		Х						0.	0.	0
(9) FLORIAN SCHULZ	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0
(10) ROB LEE	2.00									
BOARD MEMBER		Х						0.	0.	0
(11) DECLAN MOORE	2.00									•
BOARD MEMBER	40.00	Х						0.	0.	0
(12) SUSAN NORTON	40.00	-		v				75 000	0	2 525
EXECUTIVE DIRECTOR				Х				75,000.	0.	2,535
		1								
		1								
		1								
		1								
		1								

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27-1455999 CONSERVATION PHOTOGRAPHERS Form 990 (2018) 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 compensation ndividual trustee or director the 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 Sub-total 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, or 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 (2018)

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

\$100,000 of compensation from the organization

CONSERVATION PHOTOGRAPHERS 27-1455999 Page 9 Form 990 (2018) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D)** Revenue excluded Related or Unrelated Total revenue from tax under exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 26,226. **b** Membership dues 1b c Fundraising events d Related organizations 1d e Government grants (contributions) f All other contributions, gifts, grants, and 167,917. similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ 194,143. h Total. Add lines 1a-1f. Business Code 541900 5,841 5,841. 2 a LICENSING FEE Program Service Revenue 299. 900099 b PROGRAM EVENTS 299. С All other program service revenue 6,140. 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 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 b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a Other **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses 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 Miscellaneous Revenue Business Code 900099 291 291. 11 a REIMBURSED EXPENSES AN b

832009 12-31-18

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291.

291.

200,574.

d All other revenue

Total revenue. See instructions

e Total. Add lines 11a-11d

6,140.

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).

	Check if Schedule O contains a respon				(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	EE 505		EE 505	
	trustees, and key employees	77,535.		77,535.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	28,659.	21,105.	7,554.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	343.	343.		
10	Payroll taxes	7,500.		7,500.	
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	1,500.		1,500.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	7,533.	5,370.	2,163.	
12	Advertising and promotion	224.	224.		
13	Office expenses	7,168.	2,428.	3,393.	1,347 855
14	Information technology	855.			855
15	Royalties				
16	Occupancy	11,959.		11,959.	
17	Travel	11,251.	9,637.	1,614.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	855.	855.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,311.		2,311.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	FISCAL SPONSORSHIP	47,222.	47,222.		
b	PHOTO LICENSING	2,960.	2,960.		
С	MISCELLANEOUS	2,630.	2,500.	130.	
d	STORAGE FEES	1,567.	1,567.		
е	All other expenses	1,403.	1,403.		
25	Total functional expenses. Add lines 1 through 24e	213,475.	95,614.	115,659.	2,202
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)				

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			128,386.	1	29,468.
	2	Savings and temporary cash investments			239.	2	180.
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			905.	4	1,050.
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compens	ated en	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	1 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 50	I(c)(9) voluntary			
ş		employees' beneficiary organizations (see instr)	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
Ř	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			1,681.	9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	13,411.			
	b	Less: accumulated depreciation		11,466.	1,945.	10c	1,945.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	133,156.	16	32,643.		
	17	Accounts payable and accrued expenses			123,577.	17	35,715.
	18	Grants payable				18	
	19	Deferred revenue			300.	19	550.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former	r officer	s, directors, trustees,			
≣		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	3 17-24)	. Complete Part X of			
		Schedule D			100 077	25	26 265
	26	Total liabilities. Add lines 17 through 25			123,877.	26	36,265.
		Organizations that follow SFAS 117 (ASC 958		k here 🕨 🔼 and			
Ses		complete lines 27 through 29, and lines 33 ar			0 270		2 622
Fund Balances	27	Unrestricted net assets	9,279.	27	-3,622.		
Bal	28	Temporarily restricted net assets				28	
nd	29					29	
		Organizations that do not follow SFAS 117 (A	SC 958	B), check here ▶∟			
Š		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or	32	Retained earnings, endowment, accumulated in		_	0 270	32	2 622
_	33	Total net assets or fund balances			9,279.	33	-3,622.
	34	Total liabilities and net assets/fund balances			133,156.	34	32,643.

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Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>74.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			75.
3	Revenue less expenses. Subtract line 2 from line 1	3			01.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,2	79.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			-
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	-:	3,6	22.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS **Employer identification number** 27-1455999

ra	rt I	Reason for Public 0	Juarity Status (All organizations must co	omplete th	is part.) Se	ee instructions.					
Γhe	organ	ization is not a private found	ation because it is: (For lines 1 through 12, o	check only	one box.)						
1		A church, convention of ch	urches, or association	on of churches describe	d in sectio	n 170(b)(1)(A)(i).					
2		A school described in secti	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forr	n 990 or 99	90-EZ).)						
3		A hospital or a cooperative	hospital service orga	anization described in s e	ection 170	(b)(1)(A)(i	ii).					
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
		city, and state:										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
		section 170(b)(1)(A)(iv). (Complete Part II.)										
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	X	An organization that norma	lly receives a substa	ntial part of its support	from a gov	ernmental	unit or from the general	public described in				
		section 170(b)(1)(A)(vi). (Co	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	je or				
		university:										
10		An organization that norma	lly receives: (1) more	than 33 1/3% of its sup	port from	contributi	ons, membership fees, a	and gross receipts from				
		activities related to its exem	npt functions - subje	ct to certain exceptions	and (2) no	more tha	n 33 1/3% of its suppor	t from gross investment				
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the organization	after June 30, 1975.				
	_	See section 509(a)(2). (Cor	mplete Part III.)									
11	Щ	An organization organized a	and operated exclus	ively to test for public sa	afety. See	section 50)9(a)(4).					
12		An organization organized a	and operated exclus	ively for the benefit of, t	o perform	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 organization	n and con	nplete lines	s 12e, 12f, and 12g.					
а			nization operated, s	supervised, or controlled	by its sup	ported org	ganization(s), typically by	giving /				
		the supported organization			a majority	of the dire	ctors or trustees of the s	supporting				
	_	organization. You must c										
b			•					-				
		control or management o			ame perso	ons that co	ontrol or manage the sup	pported				
		organization(s). You mus										
С							•	ed with,				
		its supported organization		· ·				:+:(-)				
d		☐ Type III non-functionally						* *				
		that is not functionally int	-		•		•	iveness				
_		requirement (see instructing Check this box if the organization).	•	- ·								
е		functionally integrated, or					a type i, type ii, type iii					
f	Ente	er the number of supported of	• •		ing organi	zation.						
		vide the following information										
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other				
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)				
				above (see instructions)								

Schedule A (Form 990 or 990-EZ) 2018 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	Section A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
1	Gifts, grants, contributions, and						_				
	membership fees received. (Do not										
	include any "unusual grants.")	211,005.	248,694.	359,037.	433,310.	194,143.	1446189.				
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	211,005.	248,694.	359,037.	433,310.	194,143.	1446189.				
5	The portion of total contributions										
	by each person (other than a										
	governmental unit or publicly										
	supported organization) included										
	on line 1 that exceeds 2% of the										
	amount shown on line 11,										
	column (f)						382,804.				
	Public support. Subtract line 5 from line 4.						1063385.				
	ction B. Total Support										
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
7	Amounts from line 4	211,005.	248,694.	359,037.	433,310.	194,143.	1446189.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,	10	6	1.0	0.0		F 0				
	and income from similar sources	10.	6.	12.	22.		50.				
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	1 210			4 205	201	0 01/				
	assets (Explain in Part VI.)	4,318.			4,305.	291.	8,914. 1455153.				
	Total support. Add lines 7 through 10		`			40	178,263.				
	Gross receipts from related activities,	•	,	-l ftlf(ft)- t-		12	170,203.				
13	First five years. If the Form 990 is for		,		•	. , . ,	. □				
Sed	organization, check this box and stop ction C. Computation of Publi	ic Support Per	rcentage								
	Public support percentage for 2018 (I			rolumn (f))		14	73.08 %				
	Public support percentage from 2017					15	71.59 %				
	33 1/3% support test - 2018. If the co										
	stop here. The organization qualifies	-									
b	33 1/3% support test - 2017. If the c										
	and stop here. The organization quali										
17a	10% -facts-and-circumstances test										
	and if the organization meets the "fac										
	meets the "facts-and-circumstances"					-					
b	10% -facts-and-circumstances test										
	more, and if the organization meets th										
	organization meets the "facts-and-circ				-		>				
18	Private foundation. If the organizatio		-	•			s ▶				
					Sche	dule A (Form 990	or 990-EZ) 2018				

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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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose		-				+
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						+
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
alendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	(4) 2011	(2) 23 13	(6) 2515	(4) 2317	(0) 2010	(1) 1014
dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						+
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3 Total support. (Add lines 9, 10c, 11, and 12.)						
4 First five years. If the Form 990 is for t	ne organization'	's first, second, thir	d, fourth, or fifth t	ax year as a sect	ion 501(c)(3) organi	ization,
check this box and stop here				·····		> _
ection C. Computation of Public						
5 Public support percentage for 2018 (lin						
6 Public support percentage from 2017 S					16	
ection D. Computation of Invest						
7 Investment income percentage for 201					17	
8 Investment income percentage from 20					18	
9a 33 1/3% support tests - 2018. If the o	rganization did r	not check the box	on line 14, and lin	e 15 is more than	$33\ 1/3\%,$ and line	17 is not
more than 33 1/3%, check this box and	i stop here. The	organization quali	fies as a publicly s	supported organi	zation	▶□
b 33 1/3% support tests - 2017. If the o	•			*	•	
line 18 is not more than 33 1/3%, chec						
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t	his box and see i	nstructions	▶L

832023 10-11-18

INTERNATIONAL LEAGUE OF Schedule A (Form 990 or 990-EZ) 2018 CONSERVATION PHOTOGRAPHERS

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

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

	t IV Supporting Organizations (continued)	3333	J	age 3
	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	NO
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
u	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	110		
	and an experiment of gammadane		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
-	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			<u> </u>
	<u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
	,, <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 (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	truction	s <u>).</u>	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

832025 10-11-18

Schedule A (Form 990 or 990-EZ) 2018 CONSERVATION PHOTOGRAPHERS 27-1455999 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 Recoveries of prior-year distributions 2 2 Other gross income (see instructions) 3 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 see instructions) 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 6 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 5 5 Income tax imposed in prior year

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

Schedule A (Form 990 or 990-EZ) 2018

6

instructions).

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

	dule A (Form 990 or 990-EZ) 2018 CONSERVATION			7-1433333 Page 7
Pai	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _(continued)	
Sect	ion D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS .	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	2	
Ū	(provide details in Part VI). See instructions.	ne organization to responsive	•	
9	Distributable amount for 2018 from Section C, line 6			
	•			
10	Line 8 amount divided by line 9 amount	(:)	/::\	/:::\
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
	From 2017			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
<u></u> ;	Carryover from 2013 not applied (see instructions)			
÷	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8_	Breakdown of line 7:			
а	Excess from 2014			
h	Evanos from 2015			

Schedule A (Form 990 or 990-EZ) 2018

c Excess from 2016d Excess from 2017e Excess from 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)						
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:						
REIMBURSED PROGRAM EXPENSES AND OTHER						
2014 AMOUNT: \$ 4,318.						
2017 AMOUNT: \$ 4,305.						
2018 AMOUNT: \$ 291.						

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

Name of the organization

Employer identification number

INTERNATIONAL LEAGUE OF CONSERVATION PHOTOGRAPHERS

27-1455999

Organization typ	pe (check one):						
Filers of:	Section:						
Form 990 or 990-	EZ X 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Oh a da Wasana	and the first in a constant that the Constant Bulls are Constant Bulls						
	anization is covered by the General Rule or a Special Rule. tion 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule							
	organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or //) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules							
sections any one	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.							
year, co is check purpose	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 <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it must answ	anization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), er "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to sn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

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

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

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 addition	nal space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d) Total contributions Type of contribution
No. 4	Name, address, and ZIP + 4	Total contributions Type of contribution Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
6		\$ 5,000. Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
INTERNATIONAL LEAGUE OF
CONSERVATION PHOTOGRAPHERS

Employer identification number

27-1455999

	ash Property (see instructions). Use duplicate copies of P		1
(a) No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
_			
		\$	
(a) No. from	(b)	(c) FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	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.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received

Name of organization
INTERNATIONAL LEAGUE OF
CONSERVATION PHOTOGRAPHERS

Employer identification number

27-1455999

Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a)	tions to organizations describe	ed in section 5	01(c)(7), (8), or (10) that total more than \$1,000 for the year
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,0	00 or less for th	ne year. (Enter this info. once.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
-		(e) Transfer	of gift	
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer	 of gift	
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer	of gift	
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer	of gift	
_	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee
		-		

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 Advised	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	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 w	riting that the assets held in donor advised fu	nds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	lvisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose confe	erring
_			
Pai			V, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a historical	ly important land area
	Protection of natural habitat	Preservation of a certified I	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of a c	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			2b
С	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the orga	anization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the period		
•	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing conserva	tion easements during the year
-	Associated for a second in a second in a second second in a second secon		
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conservation e	easements during the year
	▶ \$ Does each conservation easement reported on line 2(d) above	a action the requirements of acction 170/b///	(D)(i)
8			
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation		
3	include, if applicable, the text of the footnote to the organization		
	conservation easements.	on a mandar statements that describes the o	rgariization 3 accounting for
Pai	t III Organizations Maintaining Collections of	Art. Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 9		
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue statement	and balance sheet works of art.
	historical treasures, or other similar assets held for public exhi		
	the text of the footnote to its financial statements that describ		, , , , , , , , , , , , , , , , , , , ,
b	If the organization elected, as permitted under SFAS 116 (ASC		balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	,	71
	(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 trea		
	the following amounts required to be reported under SFAS 11		
а	Revenue included on Form 990, Part VIII, line 1		• \$
b	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2018

Par	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tr	easures, d	or Oth	er Simi	lar Asse	ts (contin	ued)	3-
3	Using the organization's acquisition, accessi	on, and other record	ls, checl	k any of the	following tha	it are a s	ignifican	t use of its	collection	items	3
	(check all that apply):										
а	Public exhibition	d		Loan or exc	hange progra	ams					
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	on's exe	mpt pur	oose in Par	t XIII.		
5	During the year, did the organization solicit of										
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran								line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.		-							
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	sets no	t included				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
		·							Amount		
С	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.						•				1
Par											
	·	(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three	years back	(e) Four	years l	pack
1a	Beginning of year balance	,			,,,,		. ,	-	` ′	-	
	Contributions										
С	Net investment earnings, gains, and losses										
	Grants or scholarships										
	Other expenditures for facilities										
_	and programs										
f	Administrative expenses										
g g	End of year balance										
2	Provide the estimated percentage of the curr	rent vear end haland	e (line 1	a column (a)) held as:				l		
a	Board designated or quasi-endowment	Torre your orra balanc	%	9, 001411111 (ajj riola ao.						
b	Permanent endowment	%	_′°								
	Temporarily restricted endowment										
·	The percentages on lines 2a, 2b, and 2c sho										
За	Are there endowment funds not in the posse		ation tha	at are held a	and administe	red for t	he organ	ization			
ou	by:	oolon or the organiza	ation the	at are riola c		700 101 1	ino organ	nzation	Г	Yes	No
	(i) unrelated organizations										-110
	(ii) related organizations										
h	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on S	chedule R2	······································				3b		
4	Describe in Part XIII the intended uses of the								<u> </u>		
	t VI Land, Buildings, and Equipm		WITIETIL	iulius.							
1 0	Complete if the organization answere) Part I\	/ line 11a 9	See Form 990) Part X	line 10				
	Description of property	(a) Cost or o			t or other		ccumula	tod	(d) Book	value	
	Description of property	basis (investr			(other)		preciatio		(u) DOOK	value	,
12	Land	,		24013	(331)						
ia b	Land										
	Buildings Leasehold improvements										
d				1	3,411.		11,4	166.	1	.,94	45.
	Equipment Other				,		<u> </u>			- , , -	<u> </u>
	Add lines 1a through 1e (Column (d) must e		Y colur	nn (R) line '	100)				1	.,94	15.

Schedule D (Form 990) 2018

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11c. See Form 990. Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)			<u> </u>
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		, line 11d. See Form 990, Part X, line 15.	1
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	- 15\		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	9 15.)		<u> </u>
Complete if the organization answered "Yes"	on Form 000 Part IV	ling 11g or 11f Soc Form 990 Part V ling	25
1. (a) Description of liability	OITT OITH 990, FAILTV	(b) Book value	23.
(1) Federal income taxes		(a) Book value	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)		
2. Liability for uncertain tax positions. In Part XIII, provide		ote to the organization's financial statemen	ts that reports the

832053 10-29-18

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

Schedule D (Form 990) 2018

Pai	rt XI Reconciliation of Revenue per Audited Financial		ıe 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	ts	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:			
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 14 April 19 and 1			
Pai	rt XII Reconciliation of Expenses per Audited Financia	-	ses per Heturn.	
	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:	1 - 1		
а	Donated services and use of facilities			
b	Prior year adjustments			
С.	Other losses			
d	Other (Describe in Part XIII.)	•		
e	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	امدا		
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.) Add lines 4a and 4b		40	
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, I</i>			
	rt XIII Supplemental Information.	iiiie 16.)	J	
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	and 4: Part IV lines 1h and 2h: P	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		are v, iii o 4, i are x, iii o 2, i are	70,

Schedule D (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

2018
Open to Public

OMB No. 1545-0047

Open to Public 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;

PROVIDED, HOWEVER, THAT THE EXECUTIVE COMMITTEE SHALL NOT HAVE THE

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

OF THE ASSOCIATION; OR AMENDING, ALTERING OR REPEALING ANY RESOLUTION OF

THE BOARD OF DIRECTORS WHICH BY ITS TERMS PROVIDES THAT IT SHALL NOT BE

AMENDED, 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 15A:

THE ORGANIZATION UTILIZES A COMPENSATION SURVEY OR STUDY TO DETERMINE THE EXECUTIVE DIRECTOR'S COMPENSATION. THE COMPENSATION IS THEN APPROVED BY THE BOARD OF DIRECTORS. THE MOST RECENT COMPENSATION REVIEW WAS IN MAY OF 2017, WHEN THE NEW EXECUTIVE DIRECTOR WAS HIRED.

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FORM 990 AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.

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

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